

Health Literacy Development Course 2016

Evaluation Report

Developed by: Inner East Primary Care Partnership
& Outer East Primary Care Partnership

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The Health Literacy Development Course (HLDC) took place in 2016 over an eight-month period and was run by the Centre of Culture & Ethnicity for Health in partnership with the Inner East Primary Care Partnership and the Outer East Health & Community Support Alliance.

The aim of the HLDC was to assist health and community services to develop a series of appropriate health literacy interventions within their organisations.

Evaluation Methods

Ten organisations across the Eastern Metropolitan Region participated in the HLDC. Seven of those organisations provided feedback through a series of telephone and face-to-face interviews with individual participants. Three organisations were unavailable or unwilling to provide feedback. The interviews were transcribed and themed.

Summary

Responses to the training sessions were generally very positive and showed progress towards the objectives of the training. Six out of seven of the participants highly recommended the training.

'It was a privilege to have participated'

Most participants agreed that by completion of the course it had exceeded their expectations.

'Better than expected'

'I didn't expect to get as much out of the projects as we did'

The most valuable part of undertaking the course

Increase in knowledge: Participants found learning the basic health literacy principles to be useful in understanding what health literacy is and how it could be applied to their everyday work. The content was found to be very relevant for service delivery organisations.

'Learning the basic principles was good for me'

'Gaining a deeper appreciation and understanding of health literacy'

Improved communication: Participant's reported that the course improved communication at an organisation level and strengthened the relationship between departments by bringing management and the executive together. It also improved communication between organisations: participants valued the networking opportunities that the course provided.

'Building relationships within our organisation as well as building relationships externally with the group'

'It strengthened our relationship (between departments). It really brought management and the exec together'

Increased action: Undertaking the course resulted in the progression of health literacy work during the course. The participants were able to put health literacy on the radar, but this was **strongly dependent** on managerial support.

'The projects were fantastic because it forces you to take action and it forces you to have those conversations with management'

'I like to think that we will have a really positive impact on our community, because they are really trying to think about making things simpler, making easier access for people. That was a really big 'yes' moment.'

'Already we've seen for anything that's external, we are assessing the language that we're using and trying to make it easier for people to understand.'

'We're raising the profile of health literacy, making sure that we target messages in an appropriate way'

Course content

Overall the content was found to be practical, applicable to participants' work, easy to grasp, engaging and useful. Participants stated that they enjoyed learning about the severity of the health literacy issue in Australia and the activities used to further reinforce this.

'The content is applicable for the real world in which participants are working. It was the right fit, it focused on Australia and how health literacy works in an Australian context'

Course Delivery

Positive feedback was received about the facilitators.

'The facilitators were great, good passion and delivery, they used a wide range of techniques to suit the varying techniques of the participants'

'The facilitators were terrific'

The activities were engaging and delivery was well suited to a contact based-format.

'The delivery in a contact-based format was good. It is best to be immersed in a classroom situation'

Ongoing health literacy activity

Most participants planned to continue working on health literacy, either in their personal work practice, or because they had been able to embed health literacy into policy and/or procedures in their organisations.

'It's in the strategic plan, policies and procedures now, so it will have to continue to be supported.'

'We want to embed a health literacy module into our online orientation process and I'd like to roll that out to existing staff as well.'

Barriers to ongoing activity

Other participants expressed that there would be barriers to them continuing work in health literacy.

This included co-workers limited awareness and understanding of the issue, difficulties with ongoing commitment of staff and managers, and staff turnover rates.

'The only barrier is your co-workers awareness and understanding. Maybe not awareness of the issue, but an understanding of it is essential. The challenge was finding someone in the organisation who could commit.'

'There's staff turnover and to have something in orientation is not necessarily enough.'

Other barriers participants identified were the need for more training of staff, limited resources (both staffing and financial), decreasing momentum as the specific projects finish, and not having the right staff members on board.

'A barrier is time constraints and we are not funded to work in the space'

'Barriers might be that it just won't be kept as a priority. We'll do what we can to embed it into practice, but once the momentum of having concrete projects wears off that drive might disappear.'

'Health literacy isn't high on [the communications manager's] priority list'

Course outcomes

Overall, the outcome of participants completing the course has led to:

- Continued work in health literacy in organisations
- Health literacy practices embedded into policy and/or procedures in their organisations
- Increased knowledge about health literacy amongst participants
- Increased action in organisations
- Increased communication amongst staff and clients in organisations
- Relationship building within the workplace

- Stronger regional networking

'Staff training is on the agenda. One of our recommendations was doing mandatory basic health literacy training.'

'It really felt like there was a purpose to the course, I think it was all about building relationships within our organisation, as well as building relationships externally with the group.'

'It strengthened our relationship [between departments]. It really brought management and the exec together because they thought this was something that we could work on as an organisation. The project hasn't just ended, there is follow on.'

Would you recommend the course?

Responses to the training sessions were generally very positive and showed progress towards the objectives of the training. Six out of seven of the participants highly recommended the training.

'Yes would highly recommend'

'Yes, definitely'

Several participants identified that whilst they benefited from the course, in order to leverage organisational change they would highly recommend the training to be undertaken by staff outside of the health promotion team such as by management, reception staff and the communications team.

'We wouldn't send anyone else from health promotion, if possible someone from another team, maybe someone from reception, front of house'

'The course is good for people who are going to be involved in developing communications material'

'It would be great if team leaders participated in the long-term course, and other staff completed the 1 day or had a quick introduction to health literacy.'

'It would be great if team leaders participated in the long-term course, they have the influence over multiple staff so it makes more sense for them to participate in the HLDC.'

Factors for Success

In order for training to be successful, most organisations agreed that there were two factors for success:

- 1. Organisational leadership must be engaged, as they are in a better position to leverage change;**

'You need commitment as well as authorisation'

'It would be great if team leaders participated in the course – they have influence over multiple staff so it makes sense for them to participate'

2. At least two members from the same organisation should do the course together.

'I could see the value for those people who had more than one person from their organisation in the course'

3. Support and engagement from the communication and marketing team.

'In terms of people being positioned to effect change, people from comms and marketing and reception would be ideal, as they are the first contact to the community'

'Our communications manager was great. She was really keen to meet with us and talk about it. She was clear that she hadn't done much in that space before.'

'Having the communications manager come along to the Exec forum was helpful, because they're the ones that produce the content and flyers'

Constructive participant feedback

Participant feedback suggested that there was room for improvement in some areas:

- Tailoring content by focusing on the particular health literacy needs of each individual organisation;
- Giving some examples of the types of projects that participants would be completing during the course to gain more clarity beforehand, and to provide examples of the outcomes organisations can expect from completing the course;
- Additional support in the design of the project work.

The EMR PCPs have determined that they will address these issues in future Health Literacy Development Course programs.