Make it Easy:

A Handbook for Becoming a Health Literate Organisation

Make it easy for anyone to find, understand, and use information and services.





Acknowledgements and Thanks

We acknowledge the Traditional Owners of the lands on which this tool was developed. We pay our respects to Elders past, present and emerging and to all Aboriginal and Torre Strait Islander people. We recognise the ongoing living culture of all Aboriginal people. We express commitment to Aboriginal self-determination and our hope for reconciliation and justice.

Make it Easy: A Handbook for Becoming a Health Literate Organisation (Make it Easy) is an adaptation of the following resources, developed by the Gippsland Primary Care Partnerships (PCPs):

- The Gippsland Mini Self-Assessment to becoming a Health Literate Organisation. Gippsland Primary Care Partnerships.
- The Gippsland Guide to Becoming a Health Literate Organisation, Gippsland Primary Care Partnerships, 2015.

Many thanks to the PCPs for giving us permission to adapt their work.

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The approach and format of *Make it Easy* was informed by:

 Organisational Health Literacy Responsiveness Self-Assessment Tools and User Guide.
 Trezona A et al., Deakin University, 2017.

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Make it Easy: A Handbook for Becoming a Health Literate Organisation is a collaboration between HealthWest Partnership and Inner North West Primary Care Partnership.

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Make it Easy

Background

Why did we develop Make it Easy?

Over the years we've watched some of our partner organisations improve their organisational health literacy. Together we've learnt what works and what doesn't, what makes it harder and easier, and how to sustain change.¹

In 2017 we approached local organisations that hadn't engaged with our organisational health literacy projects. We asked what was holding them back from starting this work. They told us they wanted to improve their organisational health literacy, but they didn't know where to start. This prompted us to ask, 'how can we help you?'

Their response: give us practical and adaptable tools, guide us to the right resources, give us support, and make it small and achievable. In other words, Make it Easy.

Who developed Make it Easy?

HealthWest, Inner North West PCP and health and social service professionals and consumers in Melbourne's west and inner north developed Make it Easy. We used previous work by Gippsland Primary Care Partnership and added our perspectives, experiences of what works and academic evidence.

We hope this handbook helps you Make it Easy for anyone to find, understand and use your organisation's information and services.

What's in *Make it Easy*?

Make it Easy: A Handbook for Becoming a Health Literate Organisation (Make it Easy) provides:

- a **simple definition** of what it means to be a health literate organisation,
- an explanation of the five requirements for being a health literate organisation,
- a five-step approach to becoming a health literate organisation and
- two tools to help you get there:



This tool will help you guide discussions with leaders and workers about the benefits of being a health literate organisation. It helps you explain how being more health literate assists in meeting objectives and makes work easier and more satisfying. These benefits are backed up by evidence.

Tool 2: Mini Self-Assessment Tool and Resources

This self-assessment tool takes around three hours to complete. It offers ideas for improvements based on our experience of what works and a list of resources to help you make these improvements.

Why become a health literate organisation?

What is a health literate organisation?

The definition of a health literate organisation is:

'An organisation that makes it easy for anyone to find, understand, and use information and services.'2

Why become a health literate organisation?

It's our responsibility

We recognise that our services and systems can be complicated. It's our responsibility to reduce confusion for everyone by being health literate organisations.

The benefits of being a Health **Literate Organisation**

A Health Literate Organisation can:

- Improve health and social outcomes. 345
- · Strengthen their strategic and operational advantage.6
- Improve consumer safety and reduce legal risk through effective communication.4
- · Improve service quality and meet accreditation requirements.3
- Improve consumer satisfaction and reduce complaints.78
- Improve efficiency and cost effectiveness.96
- **Solution** Tool 1: Benefits of a Health Literate **Organisation** describes these benefits in more detail.

How do you become a health literate organisation?

5 requirements for being a health literate organisation

To become a Health Literate Organisation, we need:10



A workforce with the appropriate knowledge and skills.



To partner with **consumers** and ensure they are at the centre of our work.



A commitment from leaders at all levels.

Five requirements for being a health literate organisation

To plan userfriendly services across our organisation and with communities and partner organisations.



To provide **information** and communicate in ways that are easy for anyone to understand.



Make it Easy helps your organisation assess how well it's doing against these five requirements and gives you ideas and resources for making improvements.

5 Steps to Becoming a Health Literate Organisation

If you want your organisation to be more health literate, we suggest you take the following 5 steps.



STEP 1 - Engage leadership

Why engage leaders?

Having leaders that understand and support your health literacy work is a critical factor to success. Leaders can remove common barriers by making health literacy a strategic priority and allocating money and human resources towards assessment and improvement activities.¹¹

How do you engage leaders?

Organise a meeting with your executive staff and talk to them about the economic, efficiency and quality benefits of becoming a health literate organisation. Ask them to allocate staff and resources towards undertaking a self-assessment and making improvements. Discuss the best approach for conducting this self-assessment (e.g. entire organisation or a specific area).

Use Fool 1: Benefits of a Health Literate Organisation to guide these discussions; it will help you to explain how becoming a health literate organisation intersects with their objectives.

Keep leaders engaged by sending them regular progress reports and emphasise successes. These reports can also form part of the monitoring process.¹²

STEP 2 - Form an improvement team

action plan

To make health literacy improvements, you'll need a team of at least three people who can allocate regular time to self-assessments and improvement activities.¹³ The best people to include on this team will depend on your organisation and your chosen approach.

What to consider when you're forming your team:

- Large organisations might assess their whole organisation or a specific team.
- If you assess the entire organisation, try to include a representative from each area, for example reception, clinicians etc.⁸ This will help you understand the challenges present in each area and create buy-in.
- In organisations under 10 people it often works best to include most or all staff.⁸
- You may have 'champions' who are already interested in health literacy. Identify these people and get them on your team.
- You might decide to ask an existing committee to do the self-assessment, such as a 'quality and safety committee'.

How do you become a health literate organisation? continued

STEP 3 – Invite consumers to join your self-assessment

Why involve consumers?

It is difficult to imagine the experience of using your service. Consumers can give you insights that are very hard for staff to provide. They can tell you what is working well within your organisation, what needs to be improved and how the improvements would work best for them.¹⁴ Consumers can also be included in work that arises from your action plan, again they can provide perspectives that staff cannot.

How to get consumers involved?

Including consumers can seem challenging at first, especially if your organisation doesn't do so regularly. The process of finding a consumer for your assessment doesn't need to be complicated. Ask someone from your 'Consumer Advisory Group' if you already have one. If you don't have one, ask staff to identify and suggest a consumer that's typical of your service users.¹⁴

Make sure consumers have a good experience and continue to help you:

- Brief your consumer about the work before the day.
- Use plain language.
- Compensate consumers fairly for their time.
- For more information on how to support consumers please see:
 - http://healthwest.org.au/community-corner/community-participation-2/
 - https://www.healthissuescentre.org.au/ health-services/consumer-engagementguide/

STEP 4 - Conduct your self-assessment

Use **Tool 2: Mini Self-Assessment Tool** and Resources to do your self-assessment.

Before:

- Circulate this guide well before the day. Ask team members to familiarise themselves with the self-assessment tool and make notes against each question. This is important; the more familiar team members are with the tool the more efficient and productive discussions will be on the day.
- Think about how you'll make your consumers feel 'safe' enough to offer their perspectives and suggestions for improvement.
- Book a meeting room with laptop and projector capabilities to make it easier to work through the indicators as a group.
- Allow yourselves around three hours to conduct the self-assessment.

During:

- Give yourselves around thirty minutes to discuss each of the 5 sections of the tool.
- Pick one team member to act as facilitator and 'time keeper'.
- Pick one team member to take notes in the self-assessment tool and keep track of decisions and future actions.

After:

 Communicate the results of your selfassessment to leadership and the organisation more broadly. Use plain language communication to do this.

STEP 5 – Develop and implement your action plan

Turn the ideas you generated during the selfassessment into an action plan. We have attached an Improvement Action Plan **Template** to help you do this.

Manage change

Becoming a more health literate organisation means staff will have to change some of the ways they work. This takes time and it's important to keep staff motivated during this transition. The following ideas have been shown to help make lasting change:15

- Keep explaining why the changes are needed. Use Fool 1: Benefits of a Health Literate **Organisation** to explain to staff how becoming a health literate organisation can help them meet work objectives.
- Involve the affected workers when you make decisions. For example, if you want reception to change how they work, meet with them and discuss what you want to achieve and why. Ask them for their ideas about how these issues can be resolved.
- · Communicate the threat of not changing.
- · Listen to the concerns of your staff.
- · Celebrate shifts towards your desired goals publicly. This will help to raise the profile of your work, engage staff and leaders and motivate those working hard to create change.

Get support

- · There are some inspiring people doing great work in the field of health literacy, both locally and internationally. Two networks to consider:
 - The Health Literacy Alliance: membership is open to organisations working in Melbourne's west and inner north suburbs.
 - http://healthwest.org.au/events-andnetworks/networks/health-literacvalliance
 - The Health Literacy Discussion Group: a group of 'health literacy practitioners' from around the globe. This is a great place to ask questions, find out about resources and stay up to date.
 - http://listserv.ihahealthliteracy.org

Tool 1: Benefits of a Health Literate Organisation

Improving health and social outcomes

Consumers who find it difficult to find. understand and use information and services are three times more likely to experience poor health outcomes.4 These consumers:

- Have a higher risk of death when elderly.
- · Have poorer health when elderly.
- Have a poorer understanding of their diseases and conditions and how to manage them.
- Use emergency care more often.
- Stay in hospital for longer.
- Use preventive services less.⁴

Health literate organisations make it easy for anyone to find, use and understand their information and services and improve consumer outcomes. They do this by improving:4

- · How people access and use services: Welldesigned facilities make it easy for consumers to find the services and information they need, when they need it. Consumers who get good information from service providers understand when to seek treatment and preventive care. Overall, this reduces emergency service use and poor outcomes.
- Interactions between consumers and providers: Providers who tailor information to their consumers, check understanding and encourage questions get better outcomes. Their consumers ask more questions, follow advice more easily and understand recommendations.
- How people manage their own health and wellbeing: Consumers are well informed and have more knowledge about the actions they can take to manage their health and wellbeing.

Strengthening strategic and operational advantage

- · Health and social services in Australia are becoming more market driven.16
- New funding models aim to distribute resources based on consumer needs, demands and priorities.16
- · Consumers now have greater choice and control over the services they access.¹⁷
- Health literate organisations have an advantage in this environment because consumers are more likely to choose services that:
 - are easy to find, understand and use; and
 - have been developed to meet their specific needs.

Improving consumer safety and reducing legal risk through effective communication

- Effective communication is a fundamental requirement for safe health care.4
- Effective communication means that consumers understand their rights, responsibilities and treatment options. It also enables appropriate decisions and informed consent.4
- This protects consumers from potential harms and reduces the risk of organisations attracting adverse legal action.18
- Poor communication is a major cause of health complaints. One survey found that 4 of the top 10 reasons for malpractice suits had to do with weak patient education or a breakdown in communication between provider and patient.8

Improving quality and meeting accreditation requirements

- Health literacy is part of Australia's national approach to improving the quality of health and social service systems.3
- · Many accreditation standards either directly or indirectly require organisations to work towards becoming more health literate. 4 19
- · Whilst accreditation standards are reviewed and changed regularly, the principles of health literacy that help you meet accreditation standards remain the same.

Improving consumer satisfaction and reducing complaints

- Being a health literate organisation can boost consumer satisfaction7 and reduce complaints.8
- · For example, studies show that organisations that communicate in ways that are easy to understand score much better on consumer satisfaction surveys.8 Consumers also report a better experience when organisations understand and address their needs and preferences.8
- Health care providers are less likely to attract formal complaints when they:
 - listen actively;
 - ask their patients their opinions;
 - check their patients' understanding;
 - encourage their patients to talk.9

Improving efficiency and cost effectiveness

- Research shows that consultations that include checking patients' recall and understanding (i.e. Teach-back) do not take any longer and prevent future unnecessary appointments.9
- Organisations that model easy to understand internal communication improve efficiency by reducing confusion.6
- Health literate organisations can potentially reduce their costs by increasing use of preventive and screening services and reducing inefficient use of other services (such as unnecessary emergency department visits and preventable hospitalisation).8

Tool 2: Mini Self-Assessment Tool and Resources

This tool will help you to identify your organisation's strengths and limitations in the five requirements for being a health literate organisation.

The five requirements are:



A workforce with the appropriate knowledge and skills.



To partner with **consumers** and ensure they are at the centre of our work.



A commitment from leaders at all levels.

Five requirements for being a health literate organisation

To plan userfriendly services across our organisation and with communities and partner organisations.



To provide **information** and communicate in ways that are easy for anyone to understand.



Ideas in the 'Things we could improve' column are from our experience of what works, please don't limit yourself to these.

The **[2]** symbol signifies that a resource is listed in the resources section to help you with this action.



Workforce

A health literate organisation recruits and cultivates a competent workforce with the appropriate knowledge and skills. A workforce can include paid staff and volunteers.

Questions	Things we do well	Things we could improve
Do we include health literacy knowledge		☐ Include 'has knowledge of health literacy' into all position descriptions or selection criteria for new positions.
and skills in staff position descriptions and professional development plans?		☐ Include appropriate health literacy competencies into position descriptions and selection criteria for new positions. <a>[
development plans.		☐ Include relevant questions to check understanding and competencies in employee interviews.
		Include 'improving health literacy knowledge and skills' into professional development plans.
How do we support staff to understand		☐ Train staff in the concept of health literacy.
health literacy and apply health literacy practice in the scope of their role?		☐ Integrate mandatory health literacy training into orientation of new staff (e.g. Vic PCP online training). <a>[
scope of their role:		☐ Conduct a review to determine which staff need what kind of health literacy training.
		☐ Organise ongoing health literacy skills training. 🗐
		☐ Involve consumers in health literacy training.
Have we identified health literacy		☐ Identify champions who show an interest in this area, in multiple teams.
champions, and do we support them to drive improvements that		Incorporate the role into their position descriptions and professional development programs.
make our services and information easier to use and		☐ Place champions on the committee/s or groups that are driving health literacy actions and goals.
understand?		☐ Assign resources towards making improvements.

Workforce Resources

Health Literacy Fact Sheet 5: Supporting staff to meet health literacy needs

Fact sheet for managers developed by the Australian Commission on Safety and Quality in Healthcare. Explains why it's important to support staff to meet health literacy needs and how managers can do it.



www.safetyandquality.gov.au/wp-content/uploads/2017/07/Health-Literacy-Fact-Sheet-5-Supporting-staff-to-meet-health-literacy-needs.pdf

Prioritized Health Literacy and Clear Communication Practices for Health Care Professionals, Coleman et al., 2017

A journal article which ranks health literacy and clear communication practices. Can be used to identify health literacy competencies when writing position descriptions and selection criteria.



www.semanticscholar.org/paper/Prioritized-Health-Literacy-and-Clear-Communication-Coleman-Hudson/67d0b8f50dc82cd0d40b1f50638f1f19b1dab373

Victorian PCP Online Health Literacy Course

Free online course designed to build knowledge and skills in health literacy. Can be embedded in internal Learning Management Systems.



www.vicpcphealthliteracycourse.com.au

Videos

Videos about the concept and importance of health literacy. These can be used during staff meetings.

- Health literacy the problems and consequences
- Dr Rima Rudd talk about health literacy
- Intro to health literacy in Australia
- www.youtube.com/watch?v=uqTZBdYEe7U
- www.youtube.com/watch?v=_d-dtYTpdCw
- https://healthliteracy.nnswlhd.health.nsw.gov.au/how-can-staff-working-in-healthfacilities-help-with-health-literacy/



Partnering with Consumers

A health literate organisation partners with consumers to ensure they are developing services and information that are easy for consumers to find, understand and use.

Questions	Things we do well	Things we could improve
What systems do we have in place to		☐ Review how we work with consumers and determine if we could do it better. ■
engage consumers in our work?		☐ Recruit consumers through existing networks (e.g. Consumers Connect). ■
		☐ Invite consumers to join a register that we use to communicate engagement opportunities.
		☐ Form a Consumer Advisory Group. 🗐
		☐ Explore if our consumer participants reflect the diversity of our service users. <i>■</i>
		☐ Find 'seldom heard' consumers; invite and support them to work with us.
		☐ Invite consumers to be part of internal organisational meetings/committees. <i>■</i>
		☐ Explore engaging consumers via social media.
		☐ Involve consumers in developing consumer feedback processes.
		☐ Conduct regular reviews to get feedback from consumers about their engagement experience.
How do we support consumers to		☐ Provide consumers with orientation and training. <a>
engage with us?		☐ Communicate what we expect from consumers (e.g. task description, position description). <a>
		☐ Talk to consumers to determine support preferences (e.g. child care, taxi vouchers).
		☐ Provide financial compensation (e.g. gift vouchers, travel costs).
		☐ Upskill consumers by inviting them to relevant staff training.
		☐ Talk to consumers about how they would like us to facilitate peer support.
		☐ Provide access to interpreters.

Questions	Things we do well	Things we could improve
How do we support staff to engage with consumers?		☐ Improve staff understanding of purpose and value of engaging consumers in our work. 🗐
		☐ Inform staff of consumer engagement policies.
		☐ Incorporate consumer engagement knowledge and skills into position descriptions.
		☐ Provide staff with training in how to work with consumers. 🗐
		☐ Include 'engaging with consumers' into professional development plans.
		☐ Identify and develop consumer engagement champions who can serve as role models and mentors.
Partnering with	Consumers Resources	
www.healthissuconsumer-conn Health Issues Centr The Health Issues Ce	r e entre provides comprehensive res	ing-involved-in-health-care/ sources, training and support to
recruiting consumer Start with the 'Gettir	s, advisory groups and improving ng Started Toolkit'.	care. Includes information about g consumer participation.
Developed by the Qu health agencies on ho		ook provides information and ideas for rt consumer engagement on committees.
HealthWest has develorganisation. These if Community Particition Community Particities Community Orient	resources can be used as template	



Plan User-Friendly Services

A health literate organisation plans user-friendly services across its organisation and with communities and partner organisations.

Questions	Things we do well	Things we could improve
How do we ensure that our		☐ Support consumers to conduct environmental assessments. <i>目</i>
environments are easy to understand and navigate?		☐ Work with consumers to identify sources of confusion. <i>目</i>
(E.g. physical,		☐ Work with consumers to investigate how to eliminate confusion.
website, phone.)		\square Implement suggested changes.
How do we include consumers in		☐ Review if and how consumer feedback is collected.
planning, delivering and reviewing our services?		☐ Review if and how consumer feedback is used to inform service planning.
		☐ Consult our Consumer Advisory Group and seek feedback from them about service planning and review.
		☐ Invite consumers from the target population to collaborate in the design or re-design of services.
		☐ Invite consumers from the target population to pilot new services.
		☐ Invite consumers to join committees that are involved in service planning delivery and review (e.g. consumer safety, quality improvements). ☐/
		☐ See "Partnering with Consumers" section of this tool.

Plan User-Friendly Services Resources Health Literacy Fact Sheet 3: Making way finding easier Fact sheet for managers developed by the Australian Commission on Safety and Quality in Healthcare. Explains the benefits of making way-finding easy and steps that can be taken to do so. Also contains some way-finding policies that provide guidance on expectations and strategies to improve the consumer experience. www.safetyandquality.gov.au/wp-content/uploads/2017/07/Health-Literacy-Fact-Sheet-3-Making-way-finding-easier.pdf
The Health Literacy Environment Activity Packet: First Impressions and A Walking Interview, R. Rudd, 2010. Organisations can use this tool to conduct a review of how easy their facility is to find and use. Activities examine navigating the phone, web, and physical environment. www.hsph.harvard.edu/healthliteracy/practice/environmental-barriers/
Health Literacy Review - A Guide (2015) Developed by the New Zealand Ministry of Health. Pages 19 and 58 provide instructions and a checklist for observing the physical environment of services and the actions consumers and families need to take to physically access the service. www.health.govt.nz/publication/health-literacy-review-guide
IAP2's Public Participation Spectrum Organisations can use this table to determine their current level of consumer engagement. www.iap2.org.au/Tenant/C0000004/00000001/files/IAP2_Public_Participation_ Spectrum.pdf
An Introduction to Co-Design Written by Ingrid Burkett, this resource introduces the concept of co-design and includes 5 questions organisations can answer to determine organisational readiness. www.yacwa.org.au/wp-content/uploads/2016/09/An-Introduction-to-Co-Design-by-Ingrid-Burkett.pdf
People Powered Health Co-Production Catalogue Commissioned by Nesta, this resource brings together a range of case studies, resources and other information on co-production in health settings as well as in other sectors. The purpose of the catalogue is to enable practitioners to reflect on their own practice and the extent to which that represents co-production; and to enable them to learn about co-production practice. www.qi.elft.nhs.uk/resource/people-powered-health-co-production-catalogue/
Participatory Design of evidence based online youth mental health promotion, intervention and treatment

Provides an overview of participatory design and methods organisations can use.

https://www.westernsydney.edu.au/__data/assets/pdf_file/0005/476330/Young_and_

Well_CRC_IM_PD_Guide.pdf

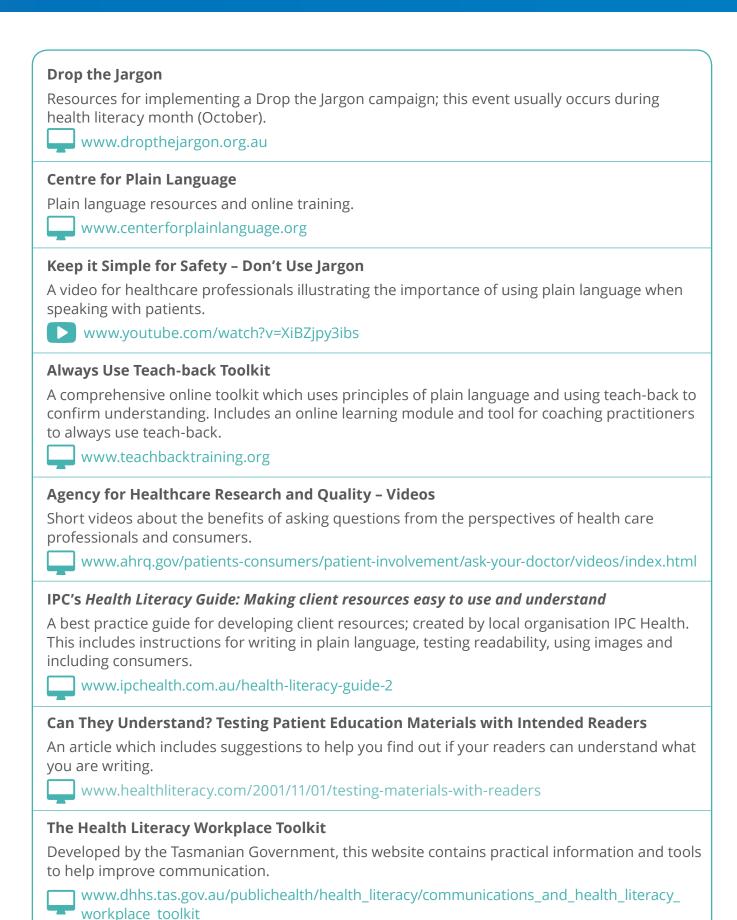


Information and Communication

Health literate organisations provide information and communicate in ways that are easy for anyone to understand. Information and communication resources can take a variety of forms including websites, written documents, videos, audio material, etc...

Questions	Things we do well	Things we could improve
How do we ensure we are providing relevant and easy		☐ Implement a 'Drop the Jargon' campaign to promote the value of communicating using plain language. <i>፭</i>
to understand information (both		☐ Talk to staff about using plain language during staff meetings. 🗐
verbal and written) between ourselves and to our target		☐ Train staff to communicate using plain language.
populations?		 Organise ongoing training to practice using plain language during staff meetings.
		☐ Monitor staff use of plain language.
		☐ Talk to staff about using inclusive language. 🗐
		□ Educate staff about how to use inclusive language. <i>■</i>
		☐ Use language assistance and communication support when required (e.g. interpreters, visual aids, Auslan, Braille).
How are we building a culture		☐ Talk to staff about communication and consumer safety during staff meetings.
that promotes the importance of checking consumer		☐ Train staff to use the 'Teach Back Method' to check consumer understanding. <i>[</i>
understanding?		☐ Organise ongoing training to practice using the 'Teach Back Method' to occur during staff meetings. <a>=
		☐ Use interpreters when required.

Questions	Things we do well	Things we could improve
How do we involve consumers in the development and		☐ Create a Consumer Advisory Group that can provide feedback on consumer information.
review of consumer information?		☐ Review all existing written materials with consumers (both materials produced by us and other organisations). <a>
		☐ Train and coach staff to work with consumers.
		☐ Involve consumers in the development of all new consumer information. <i>目</i>
		☐ Involve consumers from the target population / relevant consumers (not just anyone).
What procedures do we have in place for developing consumer		☐ Develop a step-by-step good practice guide for developing consumer resources (e.g. IPC's Health Literacy Guide). ☐
information that is easy to understand?		☐ Train and coach staff to use best practice guide.
		☐ Identify mentors that staff can approach for advice.
Elinformation and	d Communication Resources	
	Sheet 4: Writing health inform	ation for consumers
Fact sheet for manage Healthcare. Discusses and tailoring informa linguistically diverse to www.safetyando	ers developed by the Australian C s plain language, design, involving tion for Aboriginal and Torres Stra communities.	commission on Safety and Quality in consumers in developing information, ait Islander people and culturally and Is/2017/07/Health-Literacy-Fact-Sheet-4-
Diversity Council Au	stralia website	
Contains information language and a guide		les a lighthearted video about inclusive
www.dca.org.au	/inclusive-language	
www.youtube.co	om/watch?v=-jTt3Vb4FTI&feature	=youtu.be
www.dca.org.au	ı/sites/default/files/dca_wordsatw	vork_overall_guide.pdf





The foundation of becoming a health literate organisation is commitment from leaders at all levels.

Questions	Things we do well	Things we could improve
How does leadership prioritise clear and effective communication across the entire		□ Develop new or review existing policies to ensure that clear communication is adequate and a priority across all levels of the organisation. <a>
organisation? (This includes between colleagues, and staff and consumers.)		 Develop new /update existing policies to include: The use of plain language; Partnering with consumers to develop consumer information; Staff skills for checking consumer understanding. Establish communication between leadership and staff about health
How does		literacy work (e.g. presentation to board, newsletter). ☐ Review how the organisation values
leadership prioritise partnering with consumers?		consumer perspectives and input. Review current partnering with consumer policies.
		□ Include consumers on governing bodies (e.g. the board, governance committees).

Questions	Things we do well	Things we could improve
Have we incorporated health literacy improvement activities into existing committee/s (e.g. Quality and Safety Committee)?		 □ Determine which committee/s or group/s are the most appropriate to drive health literacy actions and goals. E.g. Committees involved in: Consumer safety; Quality improvements; Patient education; Consumer information.
		Assign responsibility and resources to this committee/group to improve the health literacy environment.
		☐ Ensure that 'health literacy champions' are represented on this committee.
		☐ Educate all Committee members about relevance of organisational health literacy. <i>[</i>
		 Establish goals for improvements, and accountability measures for their outcomes.
		☐ Communicate progress to leadership.
		☐ Conduct regular and ongoing organisational health literacy self-assessments. <i>目</i>
What resources do we allocate towards making our services		Allocate financial resources to support the work of health literacy champions.
and information easier to use and understand?		Allow staff to dedicate time to implement health literacy improvements into their work.
		☐ Train and increase awareness of health literacy at management level. 🗐
		 Identify health literacy champions across multiple teams and departments.
		Assign responsibility and resources to these champions.
		Incorporate the role/portfolio into their position descriptions and professional development programs.
		☐ Place champions on the committee/s or groups that are relevant to health literacy.

Commitment Resources

Health Literacy Fact Sheet 2: Making health literacy part of your policies and processes

Fact sheet for managers developed by the Australian Commission on Safety and Quality in Healthcare. Explains why it's important to embed health literacy into your organisation's policies and processes.

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www.safetyandquality.gov.au/wp-content/uploads/2017/07/Health-Literacy-Fact-Sheet-2-Making-health-literacy-part-of-policies-and-processes.pdf

New South Wales Government Plain Language Policy

Example of a plain language policy.



www.legislation.nsw.gov.au/dp2-pco_plain_language_policy.pdf

Getting Started: Participation Frameworks for Healthcare Organisations

Recent Australian and international examples of consumer participation frameworks; developed by the Health Issues Centre.



www.healthissuescentre.org.au/images/uploads/resources/Frameworks-for-participation.pdf

Austin Health's Consumer Engagement Plan

An example of a consumer engagement plan.



www.austin.org.au/Assets/Files/CE%20Plan%20FINAL.pdf

Illawarra Shoalhaven Local Health District Health Literacy Framework

An example of a health literacy framework.



www.cec.health.nsw.gov.au/__data/assets/pdf_file/0010/259066/islhdhealthliteracyframework.pdf

HealthWest Community Participation Resources

HealthWest developed several resources to support community participation within its organisation.

These resources can be used as templates when developing a:

- · Community Participation Policy;
- · Community Participant Role Description;
- · Community Orientation Manual and Process.



www.healthwest.org.au/community-corner/community-participation-2

Improvement Action Plan Template

Question	Improvement Activities	Responsibility	Timeframe	Outcome	Progress
Workforce					
Do we include health literacy knowledge and skills in staff position descriptions and professional development plans?					
How do we support staff to understand health literacy and apply health literacy practice in the scope of their role?					
Have we identified health literacy champions, and do we support them to drive improvements that make our services and information easier to use and understand?					
Partnering with Consumers					
What systems do we have in place to engage consumers in our work?					
How do we support consumers to engage with us?					
How do we support staff to engage with consumers?					
Plan User-Friendly Services					
How do we ensure that our environments are easy to understand and navigate? (E.g. physical, website, phone.)					
How do we include consumers in planning, delivering and reviewing our services?					

Improvement Action Plan Template continued

Question	Improvement Activities	Responsibility	Timeframe	Outcome	Progress
Information and Communication					
How do we ensure we are providing relevant and easy to understand information (both verbal and written) between ourselves and to our target populations?					
How are we building a culture that promotes the importance of checking consumer understanding?					
How do we involve consumers in the development and review of consumer information?					
What procedures do we have in place for developing consumer information that is easy to understand?					
Commitment					
How does leadership prioritise clear and effective communication across the entire organisation? (This includes between colleagues, and staff and consumers.)					
How does leadership prioritise partnering with consumers?					
Have we incorporated health literacy improvement activities into existing committee/s (e.g. Quality and Safety Committee)?					
What resources do we allocate towards making our services and information easier to use and understand?					

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