



EVALUATION REPORT

Health Literate Organisations
Peer Mentoring Workshops
December 2019

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*We acknowledge the traditional custodians of the lands that we work on,
the Wurundjeri, Boonwurrung, and Wathaurong peoples of the Kulin Nation,
and pay our respects to their cultures and their elders past and present.*

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Why Did We Do This Project?

From March to May 2018 the first *Peer Mentoring Project* was piloted. Organisations new to improving organisational health literacy (mentees) were brought together with individuals with more experience (mentors). The workshops were designed to foster peer group mentoring, where mentees could learn from each other and from the mentors. Figure 1 below outlines the workshops, project timeline, and what work participants were expected to complete in-between each workshop.

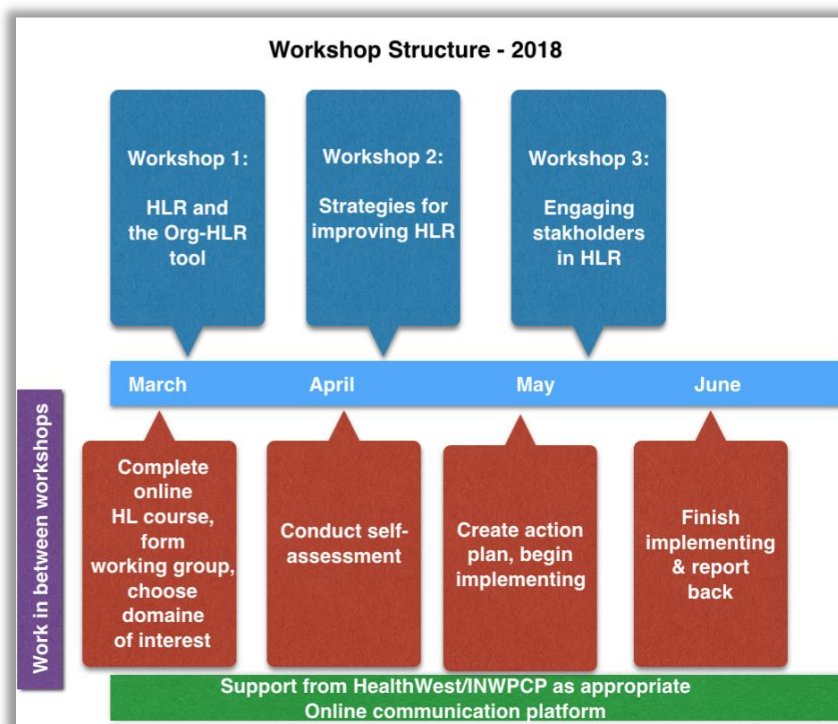


Figure 1: Format of first Peer Mentoring Project

In the first Peer Mentoring Project participation of mentees was inconsistent. An evaluation of the project found that participants:

- Liked the workshops and found them valuable.
- Wanted the workshop content and discussions to link more directly to their own work and wanted more one-on-one time with mentors.
- Were inconsistent with doing work outside of the workshops.

The project format was changed to address the above findings and a second iteration of the *Peer Mentoring Project* was delivered between April and May 2019. The second iteration is the focus of this evaluation report.

What Were We Trying to Achieve?

The objectives of this project were to:

1. Support four to six health or community member organisations to assess and improve their organisational health literacy.
2. Pilot and evaluate a revised approach to capacity building and a change management approach using a peer group mentoring setting.

What Did We Do?

The second iteration of the *Peer Mentoring Project* was delivered between April and May 2019. Similarly, to the 2018 project, the project was promoted through an expression of interest (EOI) process. Organisations who had previously expressed an interest in health literacy were encouraged to participate. Figure 2 below outlines the workshops, project timeline, and what work participants were expected to complete in-between each workshop.



Figure 2: Format of second Peer Mentoring Project

Each workshop was three hours long and held in Melbourne's CBD. Workshops 1 and 3 were co-facilitated by the Project Manager and a Consumer Participant. This was done to ensure that the consumer perspective and experience was a key theme throughout.

The learning outcomes of the workshops were to:

- Understand organisational health literacy and its benefits.
- Complete a self-assessment using 'Make it Easy: A handbook for becoming a health literate organisation'.
- Understand how to improve organisational health literacy.
- Learn about managing organisational change.

In the second iteration of the *Peer Mentoring Project* a number of changes were made to the design, structure and delivery. See below a summary of the key changes.

Workshop Structure

The 2019 workshops reduced the amount of work that mentees were required to do in between workshops. During the 2018 workshops mentees were asked to conduct self-assessments between workshops 1 and 2 using the *Org HLR tool*, developed by Anita Trezona (2017). In 2019 self-assessments were workshoped during workshop 2 using *Make It Easy: a handbook for becoming a health literate organisation*. The Project Officer attended the self-assessment at each organisation and provided support as appropriate. Organisations were encouraged to invite consumers to the self-assessment, and to the third workshop.

Workshop Style

In the 2018 workshops facilitators and mentors used a 'lecture' style approach to communicate concepts and information. Some group exercises were included. The 2019 workshops used a highly interactive approach. Concepts and information were communicated through group exercises. These were designed to find out what participants already knew about health literacy and built on this knowledge as a group. The style was changed with the aim of encouraging mentees to interact more with each other and ensure that the group learnt from each other's knowledge and experiences (peer group mentoring).

Mentoring

In 2018 the mentors interacted with mentees through presentations, question and answer sessions and group activities. In 2019 the mentees were matched with a mentor at workshop 3. They continued to meet over three months, at which time they were encouraged to review the arrangement. During the workshop mentors and mentees went through a series of questions with the aim of establishing a mutual agreement for the mentoring relationship. They also discussed their Action Plans. This was done to give the mentees an opportunity to have discussions that linked more directly to their own work and provide one-on-one time with mentors.

Participation

Sixteen mentees participated in the project, from four organisations:

- Baker Heart and Diabetes Institute
- The Royal Victorian Eye and Ear Hospital
- Campbell Page
- Djerriwarrh Health Services

Four mentors were sourced from four organisations with experience improving organisational health literacy:

- Diabetes Victoria
- Mercy Health
- Centre for Culture, Ethnicity and Health
- IPC Health

Two consumers participated from the Eye and Ear Hospital and Djerriwarrh Health Services.

Evaluation

Participants were asked to give feedback as a group at the end of each workshop. They were asked what they liked about the workshop, what could be improved and what had surprised them. The Project Manager also made observations about engagement and the effectiveness of the changes to the project. Below is a summary of the evaluation findings.

Content

The workshops were well liked by participants and presenters. Participants found value in learning how to improve health literacy from presenters who were experiencing the same contexts and real-world barriers. The consumer perspective within the workshops was also highlighted as being invaluable. Participants rated workshop 2 the highest, noting the resources and case studies to be particularly useful. Workshop 3 was rated the lowest and participants seemed confused by the topic. Participants indicated that they wanted the workshop content and discussions to link more directly to their own work.

Delivery

The interactive style used in the 2019 approach worked better than the dynamic 'lecture style' approach used in 2018. This style aligned well with peer group learnings. Participants learnt from each other's knowledge and experience. It also encouraged participants to develop connections with each other and network. However, participants did provide the feedback that they would have liked more information presented to them which allowed them to 'up-skill'. The teachings from the 2018 workshops would have helped to achieve this.

Participation

In 2019 participants were noticeably more engaged during the workshops and with the project in general. Attendance improved in 2019. The approach of reducing the amount of work done in between workshops was effective. It meant that all participants were at the same point in their journey, and the workshops were given in the right context. The 2019 structure did still require that participants work on their action plans in between workshops. As with the 2018 workshops this was problematic, as some organisations hadn't done so by workshop 3.

Mentoring

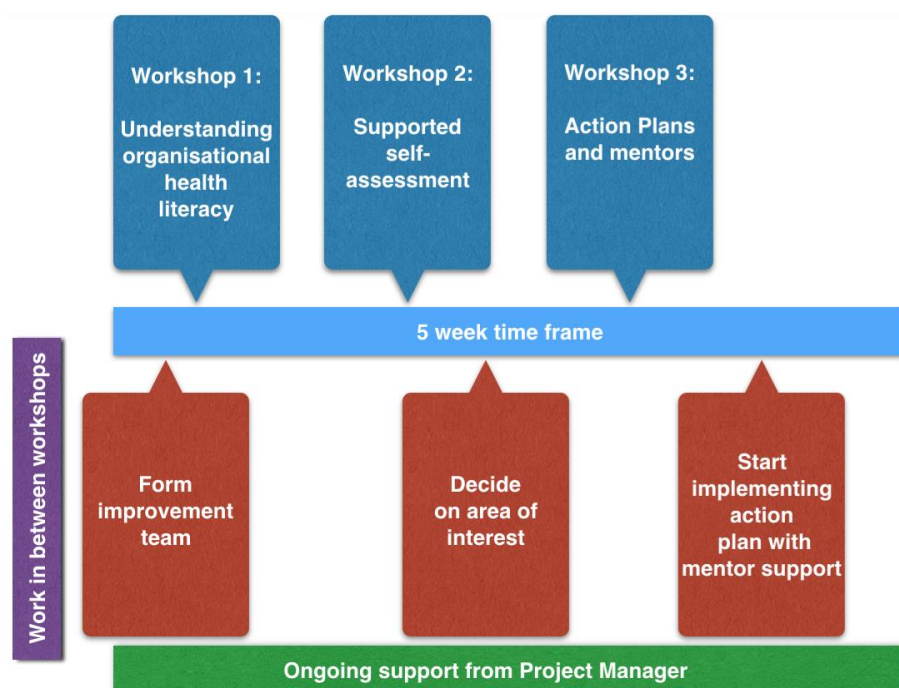
The 2019 approach of pairing mentors and mentees was an improvement. Participant feedback shows that they valued the one-on-one time with their mentors. Mentoring requires relationship building, and this is more difficult without pairing. However, each mentee group would have benefited from hearing from the other mentors. Participants reported wanting more one-on-one time with mentors.

Recommended project design for future

Based on the evaluation findings and the experience of the presenters, a hybrid design of the 2018 and 2019 projects is recommended for the future. The following outlines recommendations for future Peer Mentoring Projects and further evaluation.

Workshop Structure

The revised structure below is recommended for future mentoring workshops.



Content & Delivery

Retaining the interactive style of the workshops co-facilitation with a consumer is highly recommended. However, workshop 3 should incorporate some dynamic 'lecture style' content. This may require increasing the workshop duration to four hours to accommodate this and other recommended changes:

1. Lectures be provided by mentors, drawing on their knowledge. (Mentees to select areas of interest prior.)
2. Provide opportunity for one-on-one time with mentors to agree on logistics of mentoring relationship and develop action plan.
3. Facilitate group activities that encourage mentees to provide input on the action plans of other organisations based on their own experience and knowledge. For example, engaging consumers in co-design or improving services.

Participation & Mentoring

It is recommended workshops be delivered in a short time frame of around 5 weeks to ensure participants remain engaged and momentum is maintained. A further reduction of work in-between workshops may also enhance participation.

Continuing the approach of pairing mentors and mentees is recommended. The recommendation above of including mentor lectures in workshop 3 will ensure that mentees are also exposed to the knowledge and experience of other mentors.

The timeframes for this project did not enable the Project Manager to follow up with mentors and mentees to check on project implementation in the three months following the workshops. It is recommended that this support be offered in the future. It is also recommended that a final 'meet-up' be organised after three months to provide an opportunity to share progress and learnings. To encourage networking and peer learning beyond the project, it is recommended a contact list of mentees and mentors be circulated.

Finally, the timeframes of the project also did not enable follow-up evaluation of the mentoring to determine monitor progress, gather feedback and assess effectiveness. This is highly recommended as a follow-up activity and for future projects.

References

Donse, Estelle. (2019) Make it Easy: A Handbook for Becoming a Health Literate Organisation. HealthWest Partnership and Inner North West Primary Care Partnership. Accessed via: http://healthwest.org.au/wp-content/uploads/2019/08/HealthWest_Make-it-Easy_web.pdf

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