

### ABSTRACT

**1. Title:**

People, responsiveness and relatability: keys to implementation success

**2. Author(s):**

Dr Shandell Elmer, School of Health Sciences, University of Tasmania  
Dr Winifred van der Ploeg, School of Health Sciences, University of Tasmania  
Ms Diane Webb, Public Health Services, Department of Health and Human Services,  
Tasmania

**3. Key words:** participatory evaluation, workforce development, practice change, health literacy responsiveness

**4. Abstract text:**

**a. Background and aims**

Organisational-level changes are needed to better align healthcare demands with the public's capacity to make informed healthcare decisions. This evaluation focused on the journey of a statewide community-based healthcare organisation to improve responsiveness to health literacy needs. In addition to assessing the achievement of the organisation's aim to build workforce capacity to identify and respond to health literacy needs, this evaluation was designed to investigate factors that impact on the sustainable uptake and implementation of evidence-based interventions.

**b. Methods**

A formative evaluation approach took account of the developmental stage of the health literacy interventions as they were tested and refined within the local context.

Mixed methods were used to encapsulate the multidimensional aspects of this project.

A participatory evaluation approach enabled the close engagement of the researchers which facilitated an understanding of the variable implementation contexts as the organisation itself experienced periods of restructure and change.

**c. Results**

Developing interventions in an iterative fashion enabled the project team to accommodate the changeable organisational context.

Health literacy is very relatable and has "real world" relevance, therefore the tasks undertaken by the workforce were authentic and had immediate currency.

Predominantly human factors sustained a high level of engagement with the project, even during times of significant change and turbulence within the organisation.

**d. Conclusion**

The organisational change approach was bottom-up, iterative, responsive to identified learning needs and supportive. These human factors aided the spread and sustainability of health literacy interventions across the organisation.