Southern Grampians and Glenelg Primary Care Partnership

integrated health promotion action plan 2013-2014

introduction

Welcome to the Southern Grampians and Glenelg Primary Care Partnership Action Plan 2013-2014: a document that states what actions will be taken during 2013-2014 to achieve the strategies and objectives of the Southern Grampians and Glenelg Primary Care Partnership Strategic Plan. The Strategic Plan can be found at www.sggpcp.com or please do not hesitate to contact our office if you would like a copy.

This Action Plan details the agreed work of partners and SGGPCP support staff to work collectively towards common goals and objectives in the Strategic Plan. This Action Plan 2013-2014 is also supported by an Evaluation Plan 2013-2017 (under development).

Given that this is the first time the Partnership has written a single integrated health promotion plan for the area, it is an evolving plan and we anticipate additional actions will be included as we continue the discussions with our partners.



focus area	1		he	ealthy fo	ood and ac	tive living
goal increase the rate of fruit and vegetable intake whilst reducing the consumenergy dense (NPED) food and beverages and increase physical activity while concurrently improving their oral health						• •
objective 2.1	•	on work as	a significant increase in our community capacity to undertal measured by Community Capacity Index (UoQ) or equivale	nt		
Strategy		action	Detail	when by	leader	helper(s)
2.1.1		2.1.1.1	Build partnership with Deakin University and The Collaboration of Community-based Obesity Prevention Sites (CO-OPS Collaboration)	March 2014	SGGPCP - Clinton Thomas	PDH
Build collaborat sustainable part		2.1.1.2	Develop an appropriate partnership with the South West Primary Care Partnership and others outside our region	March 2014	SGGPCP - Clinton Thomas	SGGPCP - Janetto Lowe
2.1.2	ınity driven	2.1.2.1	 Engage relevant stakeholders in the ANGELO process; Primary schools and childcare centres Southern Grampians and Glenelg Shire WDHS, PDH, HRH, CMH, BBNC Local sporting clubs 	September 2014	SGGPCP - Clinton Thomas	PDH

sustainable partnerships	2.1.1.2	Develop an appropriate partiership with the South West Filmary Care	iviaicii	Jagi Ci -	Source - Janette
sustamusie partnersinps		Partnership and others outside our region	2014	Clinton Thomas	Lowe
2.1.2 Develop community driven action plans through undertaking systems mapping and an "ANGELO" process across the Glenelg and Southern Grampians area	2.1.2.1	 Engage relevant stakeholders in the ANGELO process; Primary schools and childcare centres Southern Grampians and Glenelg Shire WDHS, PDH, HRH, CMH, BBNC Local sporting clubs Food providers Physical activity providers 	September 2014	SGGPCP - Clinton Thomas	PDH
	2.1.2.2	Additional key community members Conduct 'Systems Mapping' workshops in three separate locations	October 2014	SGGPCP - Clinton Thomas	CO-OPS - Steven Allender, Deakin University, PDH
	2.1.2.3	Conduct ANGELO workshop/s for Glenelg and Southern Grampians	November 2014	SGGPCP - Clinton Thomas	Steven Allender CO-OPS / Deakin University / PDH
	2.1.2.4	Appoint a skilled workforce of 1.3EFT to achieve objectives in Portland	February 2014	PDH - Fiona Heenan	

Outcome Evaluation: Baseline data collection using CCI

Process Evaluation: Diverse participation rate in community planning process

objective 2.2 By 2017 there will be 30 significant process changes relating to either physical activity or healthy eating across Southern Grampians and Glenelg areas

Strategy ac	ction	Detail	when by	leader	helper(s)
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2.2.1 Implement systems changes as detailed from the community driven action plans (see strategy 2.1.1)	2.2.1.1	Implementation of system change actions will be developed pending the completion of the 'ANGELO' process	To be determined	Various – to be determined	
	2.2.1.2	Develop and analyse foot and bike path connectivity, especially to schools and review active transport/bike strategy for Portland, Casterton and Heywood	June 2014	Glenelg Shire Council - Anne Kirkham	Glenelg Shire Council - assets department
	2.2.1.3	Develop a process to ensure public drinking water access is incorporated into future developments in the Glenelg LGA	June 2014	Glenelg Shire Council	
	2.2.1.4	Develop a process to ensure public drinking water access is incorporated into future developments in the Southern Grampians LGA	June 2014	SGSC	
2.2.2 Track systems changes from community driven action plans to inform ongoing improvement	2.2.2.1	'System Tracking" and 'Feedback Loop' actions will be developed pending the completion of the 'ANGELO' process	March 2015	SGGPCP - Clinton Thomas	PDH - Health Promotion Team, CO-OPS - Steven Allender
	2.2.2.2	Establish appropriate partnership structures to support ongoing implementation pending completion of the ANGELO process	March 2015	SGGPCP - Clinton Thomas	PDH - Health Promotion Team

Outcome Evaluation: Process to be determined as part of action 2.2.2.1

Interim Evaluation: Annual report of system changes

objective 2.3 By 2017 there will be ten significant changes to the built environment that support improvements in physical activity or healthy eating

Strategy	action	Detail	when by	leader	helper(s)
2.3.1 Implement built environment improvements as outlined in the community planning process (see strategy 2.1.2)	2.3.1.1	Accessible public drinking water incorporated into Glenelg Shire Council development plans and construction of; • Portland Youth Activity Space Plan • Bridgewater Master Plan • Portland Civic Precinct Master Plan • Casterton Kelpie Interpretative Centre Plan	June 2014	Glenelg Shire Council	
	2.3.1.2	Accessible public drinking water incorporated into Southern Grampians plans and construction of; • Tarrington Structure Plan • Pedrina Park Plan • Dunkeld Hall redevelopment • Hamilton Botanic Gardens Master Plan	June 2014	SGSC	

evaluation method

Interim Evaluation: Annual report of built environment improvement

objective 2.4 By 2017 six influential workplaces across the Southern Grampians and Glenelg will use the health promoting framework "Healthy Together Victoria Achievement Program", and of these workplaces, four will achieve all five benchmark

indicators for both "physical activity" and "healthy eating" and the remaining registered workplaces will achieve a 50% improvement

Strategy	action	detail	when by	leader	helper(s)
2.4.1 Implement the "Healthy Together Victoria	2.4.1.1	Implement the Healthy Together Victoria Achievement Program at SGGPCP achieving all five benchmarks	June 2014	SGGPCP - Robyn Holcombe	SGGPCP - Clinton Thomas
	2.4.1.2	Register for the Healthy Together Victoria Achievement Program at the Southern Grampians Shire Council and commence work on two priority areas for 'healthy eating and oral health' and 'physical activity'	June 2014	SGSC	SGGPCP - Clinton Thomas
	2.4.1.3	Develop and implement a Healthy Catering Policy at the Glenelg Shire Council as a prelude to registration for the Healthy Together Victoria Achievement Program	June 2014	Glenelg Shire Council - Carol Stewart	SGGPCP - Clinton Thomas
Achievement Program" in workplaces for "healthy eating" and "physical	2.4.1.4	Register for the Healthy Together Victoria Achievement Program at the Western District Health Service and commence work on two priority areas for 'healthy eating and oral health' and 'physical activity'	June 2014	WDHS - Jess Nobes	SGGPCP - Clinton Thomas
activity"	2.4.1.5	Adopt a Healthy Together Workplace approach at Portland District Health by; Undertaking a staff needs assessment Develop a staff owned action plan Implementation of the plan	June 2014	PDH - Fiona Heenan	SGGPCP - Clinton Thomas
evaluation method	Lead agen	cy internal actions measured against the 'Healthy Together Victoria Achieve	ement Progran	n' benchmark indica	ators for healthy

evaluation method Lead agency internal actions measured against the 'Healthy Together Victoria Achievement Program' benchmark indicators for healthy eating & oral health and physical activity

objective 2.5 By 2017 twelve primary schools and four childcare centres across the Southern Grampians and Glenelg area will utilise the health promoting framework "Healthy Together Victoria Achievement Program", and of these nine schools and three childcare centres will achieve all five benchmark indicators for both "physical activity" and "health eating and oral health", and the remaining registered sites will achieve a 30% improvement

Strategy	action	Detail	when by	leader	helper(s)
2.5.1 Implement the "physical	2.5.1.1	Interview the Principals of the primary schools and childcare centres across the Southern Grampians LGA	End of term 2, 2014	WDHS - Jess Nobes	SGGPCP - Clinton Thomas
activity" and "healthy	2.5.1.2	Build partnerships with interested primary schools and childcare centres across the Southern Grampians LGA	End of term 2, 2014	WDHS - Jess Nobes	SGGPCP - Clinton Thomas
eating and oral health" components of the Achievement Program for "Primary Schools" and "Early Childhood Education	2.5.1.3	 Establish ongoing setting specific working groups for the purposes of; Resource sharing Networks for schools Ongoing coordinated and integrated intervention efforts where relevant 	End of term 4, 2014	WDHS - Jess Nobes	SGGPCP - Clinton Thomas

and Care Service Settings"		Ongoing support for framework implementation			
(or equivalent) in the Southern Grampians and Glenelg primary schools and childcare centres	2.5.1.4	Provide individual support for schools as required to assist with framework implementation	End of term 4, 2014 – ongoing	WDHS - Jess Nobes	
2.5.2 Implement Top Teeth Oral	2.5.2.1	Build a relationship with Mitchell Park and one other kindergarten (possibly Branxholme)	June 2014	WDHS - Jess Nobes	
Health Project within preschool settings to improve early childhood centres setting promoting oral health and increase access to dental services	2.5.2.2	Conduct education and screening sessions at Mitchell Park kindergarten and one other location	July 2014	WDHS - Jess Nobes	WDHS - Dental Therapist
evaluation method	Actions me physical ac	easured against the 'Health Together Victoria Achievement Program' benchr ctivity	mark indicator	s for healthy eati	ng & oral health and

focus area

community culture of responsible drinking

Goal develop a community culture of responsible drinking and reduced harm from smoking

objective 3.1 By 2017 there will a significant increase in our community capacity to undertake sustainable community driven responsible drinking health promotion work as measured by Community Capacity Building Index (UoQ) or equivalent

Strategy	action	detail	when by	leader	helper(s)
	3.1.1.1	PDH to assign workforce minimum 0.5 EFT	February 2014	PDH - Fiona Heenan	
	3.1.1.2	Evaluate our community capacity to undertake sustainable community based responsible drinking health promotion work prior to any intervention, using the Community Capacity Index (UoQ) or equivalent	February 2014	SGGPCP- Rowena Wylie	PDH
3.1.1 Collate key information	3.1.1.3	Identify and partner with organisations which can provide expertise and support on prevention of on alcohol-related harm and smoking.	March 2014	SGGPCP- Rowena Wylie	PDH
about reducing the harm from alcohol and smoking	3.1.1.4	Identify key resources on alcohol and smoking (eg NHMRC Guidelines, social marketing resources and service information/ referral pathways), including those for specific target groups eg young people, parents, pregnant women, the Aboriginal community	March 2014	SGGPCP- Rowena Wylie	PDH, Deakin Uni, GSCML
	3.1.1.5	Identify relevant evidence-based approaches for workplaces and specific target groups eg young people, parents, pregnant women, the Aboriginal community	May 2014	SGGPCP- Rowena Wylie	PDH- HP, Deakin Uni, GSCML, DWECH- EO

3.1.2 Inform and engage key organisations, stakeholders and community leaders about reducing the harm from alcohol and smoking	3.1.2.1	Present local data and evidence on interventions to identified workplace champions and partners	Yr 2 (Aug 2014)	ТВС	
	3.1.3.1	Explore the opportunity to work with Deakin Uni and GSCML on	March	SGGPCP-	GSCML, Deakin,
3.1.3		interventions to prevent alcohol-related harm in Portland	2014	Rowena Wylie	PDH
Develop local action plans through community based planning processes	3.1.3.2	Identify and collect local data on the impact of harmful alcohol consumption and tobacco use, including high risk areas, times, events and target groups, if required to inform community planning process	May 2014	PDH	SGGPCP- Rowena Wylie
	3.1.3.3	Conduct community planning process in Portland	May 2014	PCP	PDH
	3.1.3.4	From community planning process develop annual action plan	, May 2014	PDH	Deakin – John T, SGGPCP – Rowena Wylie
	3.1.3.5	Establish local community implementation structures to support integrated implementation of the action plans in Portland		PDH	SGGPCP – Rowena Wylie
evaluation method	Outcome	Evaluation: Baseline data collection using CCI			

eating & oral health and physical activity

Process Evaluation: Diverse participation rate in community planning process

By 2017 eight influential workplaces across the Southern Grampians and Glenelg area will utilise the health promoting objective 3.2 framework - 'Healthy Together Victoria Achievement Program', and of these workplaces, four workplaces will achieve all benchmark indicators for 'Alcohol' and 'Smoking' and the remaining registered workplaces will achieve a 50% improvement

Strategy	action	detail	when by	leader	helper(s)
3.2.1	3.2.1.1	Register and complete Healthy Victoria Achievement Program smoking and alcohol components at SGGPCP	June 2014	SGGPCP – Robyn Holcombe	SGGPCP - Rowena Wylie
Implement the	3.2.1.2	Commence implementation of healthy workplace practices at PDH for alcohol and smoking based on Healthy Victoria Achievement Program.	June 2014	PDH	SGGPCP – Rowena Wylie
Achievement Program's alcohol and smoking components in workplaces	3.2.1.3	Establish steering and support structures to provide guidance and support to workplaces implementing the alcohol and smokers components of the Achievement Program	Year 2	ТВС	PCP, PDH
	3.2.1.4	Monitor and support progress of workplaces and facilitate peer support structure	Year 2-4	TBC	SGGPCP – Rowena Wylie, PDH
evaluation method	Lead ager	ncy internal actions measured against the 'Healthy Together Victoria Achieve	ement Progra	m' benchmark in	dicators for healthy

objective 3.3	By 2017 more than 20 significant changes will be implemented to improve the community culture of responsible drinking
	and reduced harm from smoking

3.3.1 Implement system change	3.3.1.1	Smoke free areas: Introduce smoke free area outside HILAC and Hamilton Library.	June 2014	SGSC – Nola McFarlane	SGGPCP
activities as developed in		·			
the action plans through		Sports clubs: Support sports clubs to participate/ progress levels in the		Glenelg Shire-	
community based local planning (see strategy	3.3.1.2	Good Sports Program and Responsible Serving of Alcohol training and enforcement in Glenelg Shire.	Year 1-4	Anne Kirkham	GSP- PO, SW Sport

focus area

community resilience through climate change adaption

Goal

3.1.3)

objective 4.1 By 2017 we will build community capacity to adapt to climate change as measured by the four domains of the Community Capacity Indexⁱ; network partnerships, knowledge transfer, problem solving and infrastructure

Strategy	action	detail	when by	leader	helper(s)	
4.1.1	4.1.1.1	Expand on current stakeholders and partners	March	SGGPCP – Jo	GHCMA – Marty	
7.1.1	4.1.1.1	Expand on current stakeholders and partners	2014	Brown	Gent	
Increase our integration	4.1.1.2	Establish a forum to facilitate and further investigate participation and	March	SGGPCP – Jo		
and partnerships with	4.1.1.2	network/co-ordination mechanism	2014	Brown		
stakeholders and partners	4.1.1.3	Formalise preferred mechanism	June 2014	SGGPCP – Jo		
	4.1.1.5	Tormanse preferred mechanism	Julie 2014	Brown		
4.1.2		Work with partners and stakeholders to seek funding and commitment			SGGPCP – Penny	
Undertake vulnerability	4.1.2.1	to conduct vulnerability mapping through application to DEPI VASP or	December	SGGPCP – Jo	Fraser, RMIT – Ali	
mapping to increase knowledge of our communities vulnerability to climate change and develop a plan for action		similar funding programs	2013	Brown	Rance, SGSC – Nola McFarlane	
	4422	4400 0 1 1 1 1 1 1	February	RMIT – Ali	CCCDCD to Durant	
	4.1.2.2	Review existing mechanisms and policy	2014	Rance	SGGPCP – Jo Brown	
	4422	Conduct stakeholder and community workshop to engage stakeholders	l 2014	SGGPCP – Jo	SGSC – Nola	
	4.1.2.3	and community and to understand social vulnerability	June 2014	Brown	McFarlane	
			October	RMIT – Ali	SGGPCP – Jo	
	4.1.2.4	Conduct research workshop with stakeholders	2014	Rance	Brown, SGSC – Nola McFarlane	
					Noia ivicrariane	

	4.1.2.5	Develop community resilience strategy	November 2014	SGGPCP – Jo Brown	SGGPCP – Jo Brown, SGSC – Nola McFarlane
	4.1.2.6	Disseminate project learnings to partners and stakeholders	December 2014	SGGPCP – Jo Brown	SGSC – Nola McFarlane, RMIT – Ali Rance
4.1.3 Develop indicators to measure resilience to indirect impacts of climate change	4.1.3.1	Conduct a literature review	June 2014	SGGPCP – Jo Brown	
	4.1.3.2	Develop climate change adaptation indicators with community, stakeholders and research partners	June 2017	SGGPCP – Jo Brown	

Establish baseline indicators using the Community Capacity Index and map improvements in community capacity through re-administration of the CCI

objective 4.2 By 2017 we will implement responsive action and test local solutions to increase resilience through adaptation to climate change as measured by indicators (to be developed)

strategy	action	detail	when by	leader	helper(s)
4.2.1 Develop and implement local programs that pilot adaptation solutions	4.2.1.1	Implement the LIEEP funded Glenelg SAVES Project	June 2016	SGGPCP – Penny Fraser	GSC – Maureen Crisp, University of Ballarat – Craig Hurley, Energised Homes – Peter Reefman
	4.2.1.2	Seek funding and resources to support implementation of local projects	June 2014	SGGPCP – Jo Brown	SGGPCP – Penny Fraser
4.2.2 Expand the implementation of successful adaptation programs	4.2.2.1	Seek funding and resources to support projects	June 2015	SGGPCP	
evaluation method	Individual project evaluation				

focus area

community life participation

goal

objective 5.1 By 2017 there will be a significant increase in the community capacity within the Southern Grampians and Glenelg area to support whole of community participation in all aspects of life, as measured by Community Capacity Building Index (UoQ) or equivalent

strategy	action	detail	when by	leader	helper(s)
5.1.1 Compile local data, develop	5.1.1.1	Establish a working group to provide guidance and support to the lived experience study and facilitate steering group meetings	February 2014	SGGPCP – Rowena Wylie	
narratives of the lived experience in our	5.1.1.2	Identify partners/ experts and other studies into the lived experience of disadvantage.	March 2014	SGGPCP – Rowena Wylie	
community and share this information with key decisions makers, community leaders and service providers	5.1.1.3	Scope and cost project; identify potential sources of funding and apply for funds.	April 2014	SGGPCP – Rowena Wylie	
5.1.2					
Establish mechanisms to share learnings and good practice that support implementing changes in the way we work which better meet the needs of all the community particularly disadvantaged groups	5.1.2.1	Explore options with partners to share learnings and good practice and to collaboratively find solutions to identified barriers, including communities of practice and e-newlsetters.	May 2014	SGGPCP – Rowena Wylie	
5.1.3					
Coordinate workforce training and promote resources to build skills in engaging and delivering services and programs to disadvantaged populations		Future years			

Community Capacity Index (UoQ) or equivalent

objective 5.2 By 2017 more than 15 significant changes in the way we work will be implemented to better meet the needs of all the

community, particularly disadvantaged groups						
Strategy	action	detail	when by	leader	helper(s)	
Review and improve civic engagement processes, to ensure we hear and respond to their voices of disadvantaged groups	5.2.1.1	Develop Glenelg Shire Council Community Engagement Policy for people with a disability	December 2013	Glenelg Shire Council – Brad Charman		
	5.2.1.2	Review Glenelg Shire Council Community Engagement Plan	February 2014	Glenelg Shire Council – Adele Kennealy		
5.2.2						
Apply a social inclusion lens to all integrated health promotion activities within the Southern Grampians and Glenelg area	5.2.2.1	Develop indicators, tools and a process to assist organisations to apply a social inclusion lens to all Integrated Health Promotion and health and wellbeing work including all the focus areas within this Action Plan	May 2014	SGGPCP – Rowena Wylie	SGGPCP – Jo Brown and Clinton Thomas	
5.2.3						
Implement changes in the way we work to better meet the needs of all the community		Future years				
evaluation method	text					

ⁱ Bush, R., Downer, J.and Mutch A Community Capacity Index (V2) University of Queensland (2002).