

**Integrated Health Promotion Plan 2009-2012**

The emphasis for capacity building is:

- building an evidence-base through research and analysis
- applying collaborative planning processes
- evaluating outcomes

Goal: *To improve the health and wellbeing of the local population*

<b>Objective 1:</b> To create safe and caring communities that enhance connection and inclusion to improve the mental health and wellbeing of disadvantaged people living in our catchment by 2012	
<b>IMPACTS</b>	
<b>DH Reporting measure- Capacity Building</b>	<b>Key Indicator/s</b>
<b>1. Organisational Development</b>	1.1 Greater management support for IHP 1.2 More effective targeting of HP Investment through evidence based practice - increased use of research, evidence and local data regarding health needs and well being issues - Improved integration of HP planning process 1.3 Enhanced organisational learning and improved practice through evaluation and dissemination of findings
<b>2. Workforce Development</b>	2.1 Gap in HP skills and training needs have been identified and addressed 2.2 Newly acquired knowledge and skills amongst the HP workforce are integrated into daily work
<b>3. Resources</b>	3.1 More efficient and effective targeting of resources 3.3 A more informed sector through broader access to knowledge and evidence based information
<b>4. Leadership</b>	4.2 Organisations take leadership role within a subregion, region or catchment (i.e. leadership of PCP projects)
<b>5. Partnerships</b>	5.1 Maturing of partnerships from <i>networking</i> to <i>collaboration</i> 5.2 Greater proportion of planned HP initiatives delivered in partnership with local community and other organisations 5.3 Reduction in fragmented and duplicated effort as organisations work together and pool their resources and skills
<b>DH Reporting measure-</b>	<b>Keys indicator/s</b>

<b>impact of IHP Interventions</b>	
<b>1. Reach, Participation and satisfaction</b>	<p>1.1 Reach</p> <ul style="list-style-type: none"> <li>- the intended target audience participates in the intervention</li> <li>- HP interventions reach groups with the poorest health</li> </ul>

<b>Strategies</b>	<b>Actions</b>	<b>KPI Process outcomes/indicators/measures</b>	<b>Responsibility/Lead</b>
Support and add value to member agencies programs/interventions addressing this priority area	<ul style="list-style-type: none"> <li>• Map current interventions addressing this priority within member agencies</li> <li>• Research and disseminate evidence around practice and evidence based interventions and work at a local level in our PCP catchment</li> <li>• Identify/ develop evaluation tools that can be used on common programs- Mother Goose, Community Kitchens, Men’s Shed</li> <li>• Identify evaluation tools to measure the effectiveness of mental health promotion program- aged based tools</li> <li>• Promote and provide education around the use of the DoH “Measurement for impact evaluation- Mental Health” Guide (in line and reference to the new Impact Measures for IHP)</li> <li>• Develop a implementation/ dissemination plan for the CHPCP IHP SC evaluation tool/s</li> <li>• Research strategies and evidence based practice to engage hard to reach groups- build these in to current programs and the DOJ social connection project</li> <li>• Support other agencies to evaluate / capture incidental positive mental health outcomes using evidence based evaluation tools – physical activity programs, CARN, councils etc</li> </ul>	<ul style="list-style-type: none"> <li>- Mapping mental health promotion interventions (1.2)</li> <li>- evaluation/research completed (1.2. 3.3)</li> <li>- report on best practice to be disseminated to all CHPCP IHP agencies (1.1)</li> <li>- Develop/ identify and utilise most appropriate evaluation tools to be used across agencies for specific programs (1.2, 2.2, 4.2)</li> <li>- Standard evaluation tools are utilised across in all IHP funded agencies in line with the DoH “Measurement for impact evaluation- Mental health” Guide (2.2, 3.3)</li> <li>- Report on the evidence around engaging vulnerable groups (1.2, 2.2)</li> <li>- Adapt current programs to target vulnerable groups/ increase access</li> </ul>	<p>PCP HPO</p> <p>PCP HPO</p> <p>AGENCIES</p> <p>PCP HPO &amp; AGENCIES</p> <p>PCP HPO &amp; IHP GRP</p> <p>IHP GRP</p> <p>PCP HPO</p> <p>IHP GRP</p>
Develop social marketing messages for CHPCP promoting connection and inclusion	<ul style="list-style-type: none"> <li>• Establish a working group to drive this strategy</li> <li>• Consider skill sets within agencies and external to, to determine who may be best placed to design innovative social marketing materials</li> <li>• Brainstorm key messages and target groups for three social marketing campaigns</li> <li>• Oversee the development of materials and create a and implement a</li> </ul>	<ul style="list-style-type: none"> <li>- Working Group established</li> <li>- Innovative social marketing tools developed and disseminated across catchment (5.1, 5.2, 5.3, 4.2) (1.1)</li> </ul>	<p>OKCHS (lead</p> <p>DCHS</p>

	plan to disseminate the materials across the catchment		
Local Government Area network involvement	Be represented in the LGA networks Provide training to local government area networks including but not limited to the 4 hour introduction to health promotion workshop	Training delivered Projects implemented 5.2	FUNDED AGENCIES
Vichealth partnership tool	Measure levels of partnership at the beginning of the three year cycle Measure levels of partnership at the end of the three year cycle	Improvement in levels of partnering 5.1, 5.2,	PCP HPO
Build the capacity and confidence of agencies and individuals in our catchment to plan, implement and evaluate IHP within their agency and in partnership with other agencies	<ul style="list-style-type: none"> <li>• Roll out a Workforce development survey for all IHP members</li> <li>• Identify opportunities to co-ordinate training across the Hume region with other PCP's for workers involved in health promotion.</li> <li>• Create opportunities to link in with training offered through the Closing the Gap project eg. Cultural competencies</li> </ul> <p>Develop a training calendar in conjunction with DoH that may include:</p> <ul style="list-style-type: none"> <li>-Participation for Health short course</li> <li>- Evidence Informed IHP</li> <li>- Five day health promotion course?</li> <li>- Tools and principles of best practice evaluation</li> <li>- Disadvantage- Bridges out of poverty</li> <li>• Assist in the delivery of the 4 hour introduction to Health Promotion Workshop for member agencies</li> <li>• Encourage equity training across all member agencies</li> <li>• Utilise existing skills where appropriate to deliver appropriate training- 4 hr IHP workshop</li> </ul>	<p>-Report on current capacity and potential workforce development opportunities locally and regionally via Hume Region PCP IHP Coordinators meeting</p> <p>- Development of a training calendar</p> <p>- Delivery of training in our region in line with the calendar</p> <p>- Impact from and uptake of the training</p> <p>- the number of 4 hour Intro to IHP workshops run in the region by trained facilitators</p> <p>- the number of agencies who have participated in WHGNE equity training</p> <p>1.1, 2.1, 2.2, 3.1, 3.3</p>	<p>PCP HPO PCP HPO</p> <p>PCP HPO</p> <p>Trained Facilitators &amp; agencies</p> <p>Equity training- WHGNE OKCHS</p>
Participate in the State-wide PCP IHP network to provide our agencies a snapshot of IHP in Primary Care Partnerships at a state level	<ul style="list-style-type: none"> <li>• Utilise network to obtain tools and templates that can be adapted to local strategies/ programs</li> <li>• Advocate on key issues impacting on PCP IHP work</li> <li>• Gain insight into how other PCP's work and how their objective are implemented</li> <li>• Use the network as a resource to support our PCP</li> <li>• Obtain PD specifically relating to partnerships and effective IHP relationships</li> </ul>	1.2, 1.3, 3.3	PCP HPO

**Objective 2:**

Build the capacity of member agencies and LGA to coordinate planning and meet current and future health needs of our community and support the implementation of the Hume Region Health Promotion Strategy

<b>IMPACTS</b>			
<b>DH Reporting Measure</b>		<b>Key indicator/s</b>	
<b>Organisational Development</b>		Management support from funded agencies to develop one catchment plan Combining resources across catchment for more effective IHP investment Planning, implementation and process of developing plan based on research and evidence of local need across catchment Improved integration of HP planning process across funded IHP agencies Enhanced organisational learning and improved practice through evaluation and dissemination of findings- via improvements to practice in funded IHP agencies	
<b>Resources</b>		More efficient and effective targeting of resources- through integrated planning, program delivery and regional priorities	
<b>Leadership</b>		Organisations take leadership role in IHP within sub region or in relation to a particular priority area/ programs or target group	
<b>Partnerships</b>		Maturing of partnerships from networking to collaboration Greater proportion of planned HP initiatives delivered in partnership with the local community and other organisations Reduction in fragmented and duplicated effort as organisations work together and pool resources and skills	
<b>Strategies</b>	<b>Actions</b>	<b>Process outcomes/indicators/measures</b>	<b>Responsibility</b>
Reflect on planning process for 2009-2012	<ul style="list-style-type: none"> <li>Collect information on the planning process used for CHPCP IHP funded agencies for their 2009-2012 IHP plans</li> <li>Identify planning process used by LG in our four LGA</li> <li>Identify common process and methods that are considered best practice at a local and state level</li> </ul> <ul style="list-style-type: none"> <li>Utilise state-wide PCP IHP group as a platform to gather information around planning approaches and their success.</li> </ul>	Review of funded agencies most recent IHP planning process Review and analysis of MPHWP Planning process of each LGA  A report that outlines the most common features of the planning process for the above agencies with the view of developing a framework or model that funded agencies are happy with  Provide some state-wide context around planning process and identify any innovative approaches used	PCP HPO & funded agencies PCP HPO
Identify existing skill sets which could be utilised to strengthen integrated planning	<ul style="list-style-type: none"> <li>Identify skills which are useful for the planning process</li> <li>Audit current members skills in the area of planning</li> </ul>		PCP HPO
Promote integrated	<ul style="list-style-type: none"> <li>Show case the benefits of integrated planning</li> </ul>	-Submit two PCP projects or collaborative projects for	PCP HPO

planning and collaborative work	<ul style="list-style-type: none"> <li>Identify projects where integrated planning or collaborative work have added value to projects or shared plans that have been implemented successfully</li> </ul>	presentation at conferences/ forums	DCHS OKCHS ALPINE NHW
Co-ordinate data collection and analysis at a catchment level to help inform member agencies and support the implementation of the Hume Region Health Promotion Strategy	<ul style="list-style-type: none"> <li>Identify current data collection tools/ methods used within our member agencies for the determination of priorities</li> <li>Research data collection systems that are used in our area and the pros and cons of each system</li> <li>Determine whether this would be a viable and useful to our member agencies</li> <li>Present a case to executive</li> </ul>	<p>-From review of planning process, understand and analyse the current data collection tools utilised by our member agencies</p> <p>- Present a case to the executive regarding regional data collection</p>	PCP HPO & PCP Executive
Add value to shared priorities and programs within CHPCP IHP agencies	<ul style="list-style-type: none"> <li>Identify shared priorities, target groups and programs within agencies 2009-2012 plans</li> <li>Identify and support the collaborative planning, implementation and evaluation of these priorities</li> </ul> <p>- through data collection, referral pathways, evaluation systems, key learning's and support</p>	<p>- Audit of projects in 2012 for evidence of collaboration on various levels</p> <p>-number of projects within IHP funded agencies where collaborative work is taking place</p> <p>- the number of projects/ programs where evaluation has been approached in partnership</p> <p>- the number of joint projects across the PCP</p>	PCP HPO  DCHS OKCHS ALPINE
Plan and prepare for one catchment plan for 2012-2015 across all funded IHP agencies in CHPCP	<ul style="list-style-type: none"> <li>Identify the process and skills required to develop an IHP catchment plan across funded agencies</li> <li>Determine the barriers and enablers of a catchment plan</li> <li>Put the process in place to make integrated IHP planning across the four community health services achievable for 2012-2015 planning cycle</li> </ul>	<p>- 2012-2015 common planning process in place</p> <p>- an identified action plan with responsibilities for planning for the plan</p>	PCP HPO & Funded agencies OKCHS DCHS

## NOTES

1. Funded agency work relating to Mental Health will be reported via PCP Evaluation report. Agencies will have developed their own evaluation plans in light of the Impact Measures and Department requirements.
2. The work in objective two will overlap and thus clearly linking which DH Impact Measure was to match which strategy was too difficult at this time.
3. Building evaluation skills around the evaluating the priority VS programs is required across all funded agencies

Key Skills/ Competencies required to implement this plan:

- Research skills
- Analysis Skills
- High level communication skills
- Organisation skills
- Efficient time management skills
- Evaluation skills
- Leadership
- Facilitation
- Strategic thinking
- Planning skills