

**Evaluation of the Latrobe Health Innovation Zone,  
Latrobe Health Assembly and Latrobe Health Advocate**

Updated Evaluation Framework (Presentation 4)

March 2019

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# Glossary



AES	Australasian Evaluation Society
AM	Avoidable Mortality
ACSC	Ambulatory Care Sensitive Conditions
DHHS	Department of Health and Human Services
EQ	Evaluation Question
HHS	Hazelwood Health Study
IA	Impact Area
LGA	Local Government Area
LHA	Latrobe Health Assembly
LHIZ	Latrobe Health Innovation Zone
LO	Long Term Outcome
MBS	Medicare Benefits Scheme
MO	Medium Term Outcome
VIS	VicHealth Indicators Survey
VPHS	Victorian Population Health Study
PHS	Preventive Health Survey
PID	Project Initiation Document
SO	Short Term Outcome
VPHS	Victorian Population Health Survey



# Executive summary

The Victorian Government has designated the **Latrobe Health Innovation Zone**. Key components of the Zone include the **Latrobe Health Assembly** and the **Latrobe Health Advocate** (the initiatives).

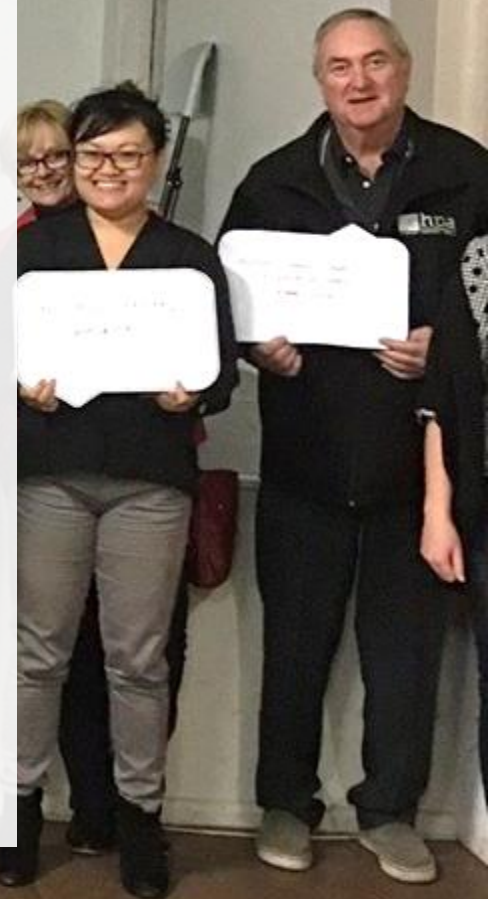
Deloitte Australia (Deloitte) is undertaking a **developmental evaluation** of these initiatives.

This document describes the **updated developmental evaluation framework**.

The purpose of this evaluation is to:

- **Provide opportunities** for Latrobe Valley communities to positively influence the design and impact of the initiatives as they unfold
- **Actively include Latrobe Valley communities and people who are part of the program** in deciding if the objectives have been, or are on track to, being achieved
- **Offer guidance** regarding innovation and empowerment to further strengthen the initiatives.

This will mean successes will be celebrated as they happen and opportunities to improve things will be identified as new ideas are tried.



# WHAT ARE THE **INITIATIVES** BEING EVALUATED?



## **LATROBE HEALTH INNOVATION ZONE**

The **Latrobe Health Innovation Zone** is the first of its kind in Australia. The Zone is the place in which voice is given to community aspirations in planning and delivering better health and wellbeing outcomes. It is a geographic location in which a process of co-design that actively engages with individuals and organisations is encouraged.



## **LATROBE HEALTH ASSEMBLY**

The **Latrobe Health Assembly** provides input and direction for health initiatives within the Latrobe Health Innovation Zone. It facilitates new ways of working to enable Latrobe Valley communities, local and state-wide agencies and government to work together to improve health and wellbeing in Latrobe. The Assembly is an incorporated organisation consisting of 45 members. It is supported by a backbone and overseen by a 10-member Board.

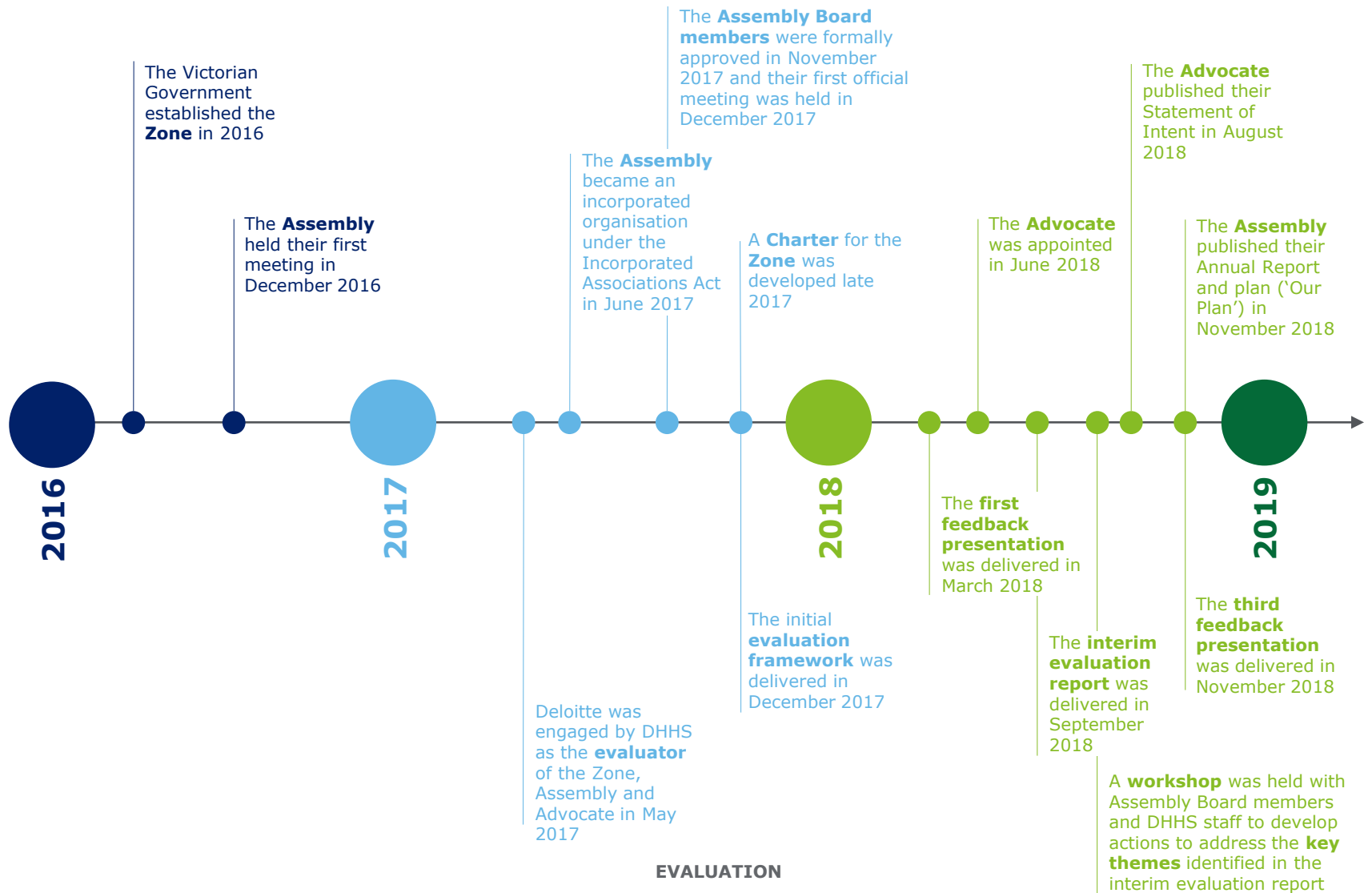


## **LATROBE HEALTH ADVOCATE**

The **Latrobe Health Advocate** provides independent community-wide leadership within the Latrobe Health Innovation Zone by enabling, mediating and advocating for health and wellbeing.

# WHAT IS THE **TIMELINE OF EVENTS?**

## LATROBE HEALTH INITIATIVES



# WHAT IS THE EVALUATION **FRAMEWORK**?

## The **evaluation framework**:

- Describes what Latrobe Valley communities want these initiatives **to do** (outcomes)
- Reflects the initiatives' objectives and strategies
- Lists the **questions** the evaluation will help to answer.

Latrobe Valley communities have indicated they want the initiatives to do four main things:

- 1. IMPROVE COMMUNITY OPPORTUNITIES AND PERCEPTIONS**
- 2. IMPROVE COMMUNITY CONNECTEDNESS AND PARTICIPATION**
- 3. IMPROVE HEALTH SERVICE ACCESS AND DESIGN**
- 4. IMPROVE HEALTH AND LIFESTYLE**





# WHAT DO COMMUNITY MEMBERS WANT TO KNOW ABOUT?



JUSTIFICATION



OPPORTUNITIES FOR  
IMPROVEMENT



COMMUNITY NEEDS



INNOVATION



AWARENESS AND  
UNDERSTANDING



HEALTH AND  
WELLBEING



EVIDENCE



ENGAGEMENT AND  
EMPOWERMENT



DEMAND



GOVERNANCE AND  
WORKING TOGETHER



TIMELINESS



CELEBRATING  
SUCCESS



COMMUNITY CAPACITY

# HOW HAS THE EVALUATION FRAMEWORK **CHANGED?**

**UPDATE: January to March 2019**

**WHAT HAS CHANGED?**



**Feedback** received and **learnings** gained throughout the evaluation



Evaluation approach **refined** and **targeted** to the initiatives



The Latrobe Health and Wellbeing **Charter**



Zone outcomes aligned with the Charter **principles**



The Assembly's **Plan** ('Our Plan')



Assembly outcomes aligned with its **action areas**



The Advocate's first annual **Statement of Intent**

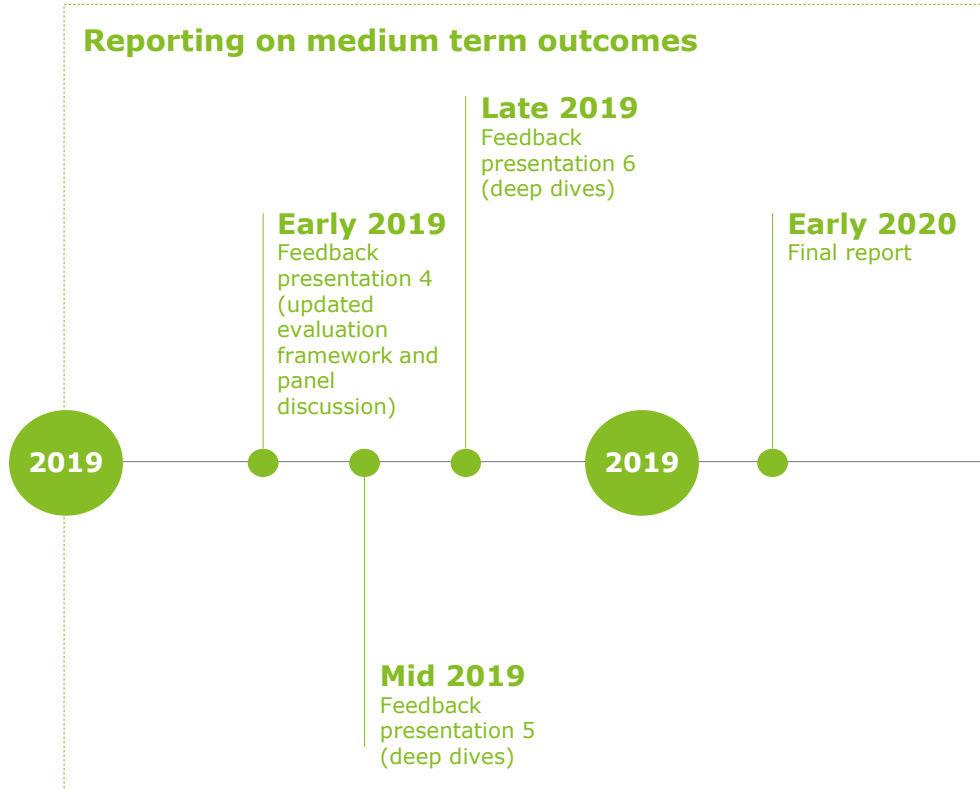


Advocate outcomes aligned with her **priority areas**

# WHEN WILL THE EVALUATION PROVIDE **FEEDBACK**?

Since commencing in May 2017, the evaluation team has worked with a large number of Latrobe Valley community members to co-design the [evaluation framework](#) and provide feedback on the initiatives, firstly via the [first evaluation presentation](#), then the [interim evaluation report](#), and again via the recently published [evaluation presentation](#).

The evaluation reporting timeline is shown below.



# HOW CAN LATROBE VALLEY COMMUNITIES BE **INVOLVED?**



Like the evaluation **Facebook page:**  
[www.facebook.com/LHIZeval/](http://www.facebook.com/LHIZeval/)



Complete the **community survey:**  
[www.communitysurvey.deloitte.com.au](http://www.communitysurvey.deloitte.com.au)



Complete the **organisation survey:**  
[www.organisationsurvey.deloitte.com.au](http://www.organisationsurvey.deloitte.com.au)



**Email:** [LHIZeval@deloitte.com.au](mailto:LHIZeval@deloitte.com.au)





**Thank you to the members of  
Latrobe Valley communities who  
contributed to the development of the  
evaluation framework!**

We Will  
succeed!

Education  
is  
a powerful  
Weapon

Our Health  
Our Future  
Our Vicinity

Education  
Leads to  
Better  
Health!!

Sense of belonging  
Supportive  
Hope  
Harmony

ENJOY  
OUR  
PLACE

Prosper

Latrobe Valley  
Strategic  
Vision 2025

Prosper

Easy, affordable  
access to good  
quality health care



# Guide to this document



# Guide to the remainder of this document

The evaluation framework forms the core planning document for the evaluation

## 8. Data collection tools

Describes the approach to collecting feedback from Latrobe Valley communities and other key stakeholders in the Zone on the initiatives.

## 7. Reporting and dissemination

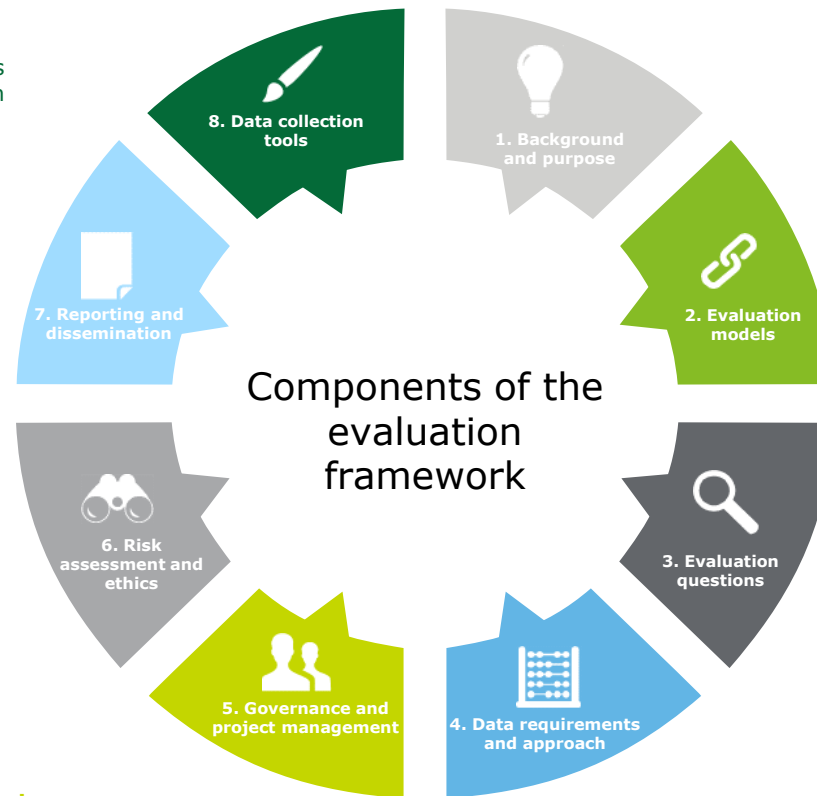
Describes the approach to sharing formal and informal feedback from the evaluation with Latrobe Valley communities, Latrobe Health Assembly, Latrobe Health Advocate, DHHS and other key stakeholders in the Zone.

## 6. Ethics

Provides the Australasian Evaluation Society (AES) principles and guidelines that are particularly relevant to this evaluation.

## 5. Governance and project management

Provides an overview of the governance and project management framework, including reporting and feedback relationships.



## 1. Background and purpose

Provides an overview of the background and purpose for the Latrobe Health Innovation Zone, Latrobe Health Assembly, Latrobe Health Advocate and the evaluation

## 2. Evaluation models

Describes the indicative, point in time evaluation models for each of the initiatives based on emerging impact areas of how Latrobe Valley communities would like the initiatives to improve health and wellbeing in Latrobe Valley.

## 3. Evaluation questions

Details the evaluation questions that define the scope and focus of the evaluation.

## 4. Data requirements and approach

Details the qualitative and quantitative data that will be brought together from primary and secondary sources to inform the evaluation. These data sources are then linked to the evaluation questions and indicators from the previous section via an indicator framework.



# 1. Background and purpose

Please refer to the [previous version](#) of the evaluation framework for more detail regarding the background and purpose of these initiatives and the evaluation





# Latrobe Health Initiatives

The Latrobe Health Initiatives were established to improve health and wellbeing in Latrobe Valley

## Latrobe Health Initiatives



**LATROBE HEALTH  
INNOVATION ZONE**  
(THE ZONE)



**LATROBE HEALTH  
ASSEMBLY**  
(THE ASSEMBLY)



**LATROBE HEALTH  
ADVOCATE**  
(THE ADVOCATE)

The *Hazelwood Mine Fire Inquiry: Victorian Government Implementation Plan* outlines the Victorian Government's response to recommendations made by the Hazelwood Mine Fire Inquiry Board. In line with their response, the Victorian Government has established the Latrobe Health Innovation Zone (DPC, 2016; Hazelwood Mine Fire Inquiry, 2016).

Key components of the Latrobe Health Innovation Zone (the Zone) include the Latrobe Health Assembly (the Assembly) and the Latrobe Health Advocate (the Advocate) – referred to collectively as the 'Latrobe Health Initiatives' or 'initiatives'.

The overarching objective of these initiatives is to improve health and wellbeing in Latrobe Valley. Specifically, Latrobe Valley communities have indicated they would like the initiatives to:

01

Improve  
community  
opportunities and  
perceptions

02

Improve  
community  
connectedness and  
participation

03

Improve health  
service access  
and design

04

Improve health  
and lifestyle

## Latrobe Health Innovation Zone

The Zone is a geographical designation, aligned with Latrobe City Council and Latrobe Local Government Area (LGA) boundaries.

The Victorian Government has allocated \$27.3 million over five years to fund initiatives and programs within the Zone (IGEM, 2017).

The role of the Zone is to give voice to community aspirations in the planning and delivery of better health and wellbeing outcomes. It represents a commitment to new ways of working between individuals and organisations (DHHS, n.d.).

The Assembly, Advocate and other key stakeholders all operate 'within the Zone'. Other key stakeholders within the Zone include Latrobe Valley communities, the Department of Health and Human Services (DHHS), Gippsland Primary Health Network, Latrobe City Council, Latrobe Community Health Service, Latrobe Regional Hospital and Latrobe Valley Authority.

Key stakeholders also include health and wellbeing service providers, and organisations that influence health and wellbeing, such as education providers; sport and recreation clubs and facilities; and other local businesses.

The Latrobe Health and Wellbeing Charter (the Charter) was developed in 2017. The Charter is 'a commitment to shared values and principles' within the Zone and was publicly launched on 18 March 2018. The Charter's supporters 'commit to driving innovation and change to improve health and wellbeing' (DHHS, 2018).

A Social Marketing Team Coordinator and Social Marketing Production Officer for the Zone ('the Social Marketing Team') are co-located with the Assembly backbone. The Social Marketing team coordinates key public messages in the context of the Zone.



# Latrobe Health Initiatives

Key components of the Zone include the Assembly and the Advocate – referred to collectively as the 'initiatives'

## Latrobe Health Assembly

The role of the Assembly is to provide input and direction for health initiatives within the Zone. It is also the responsibility of the Assembly to facilitate new ways of working between Latrobe Valley communities, local and state-wide agencies and government (Latrobe Health Assembly, n.d.).

The Assembly's strategy states that their dream is to improve the health and wellbeing of 10,000 people in 10 years (Latrobe Health Assembly, 2018). The Assembly has identified four pillars of focus to achieve this dream:

1. Great place
2. Positive culture
3. Better care
4. Healthy living

The Assembly consists of 42 members. The Assembly meets five times per year. The Assembly's first meeting was held on 19 December 2016. The Assembly became a formally incorporated organisation under the Incorporated Associations Act on 26 June 2017. Assembly members volunteer their time to represent community member interests. Each Assembly member belongs to a 'Pillar Group' aligned with one of the four pillars.

The Assembly is overseen by a 10-member Board, chaired by Professor John Catford. The Board is comprised of the Chief Executive Officers (CEOs) from the Gippsland Primary Health Network, Latrobe City Council, Latrobe Community Health Service and Latrobe Regional Hospital. A representative from the Department of Health and Human Services (DHHS), and four community member representatives, also sit on the Board. The Victorian Minister for Health formally approved these Board members in November 2017. The first official Board meeting was held in December 2017. Most Board members had been involved in the Assembly since its inception.

The Assembly is supported by a backbone staff comprised of an Executive Officer, Projects Coordinator, Engagement and Communications Coordinator, Planning and Research Officer, Grant Program Support Officer and Administration Officer. The Latrobe Regional Hospital provides back office administrative support services (such as payroll and human resources) to the Assembly.

As at February 2019, the Assembly is currently involved in delivering, funding or influencing 41 projects. This includes 17 complete projects and 17 projects in-development.

## Latrobe Health Advocate

The Advocate has been appointed to provide independent community-wide leadership within the Zone by enabling, mediating and advocating for health and wellbeing (DHHS, n.d.). The appointment of the Advocate, Jane Anderson, was announced by The Hon. Jill Hennessy MP, the Victorian Minister for Health, on 3 May 2018. The Advocate commenced in her role on 1 June 2018. The Advocate released her Statement of Intent in October 2018. This statement sets out the Advocate's priorities for 2018-19:

- Inclusive communities – Enabling inclusiveness of marginalised communities within Latrobe Valley
- Health is everyone's business – Engaging the breadth of Latrobe Valley communities to prioritise and have a say about the sustainability of their health and wellbeing
- Project campaigns– Using a project/campaign approach to change conditions that hold a problem in place with an initial focus on: mental health, alcohol and other drugs, palliative care.

The Advocate will maintain a focus on health system improvement throughout her work. She has referenced 'The Water of Systems Change' framework in describing her approach to influencing community-driven change at a systems level (Kania et al., 2018). Please refer to Appendix A for more detail regarding this approach.



# Evaluation of the Latrobe Health Initiatives

Developmental evaluation uses real-time information to support social innovation. It does this by learning from things as they occur and providing feedback to inform positive change (Patton, 2008)

## Evaluation of the Latrobe Health Innovation Zone, Latrobe Health Assembly and Latrobe Health Advocate

Deloitte has been engaged by the Department of Health and Human Services (DHHS) as the evaluator of the Zone, Assembly and Advocate.

The evaluation has a **developmental** approach. This means the evaluation provides opportunities for Latrobe Valley communities to positively influence the design and impact of the Latrobe Health Initiatives as they unfold.

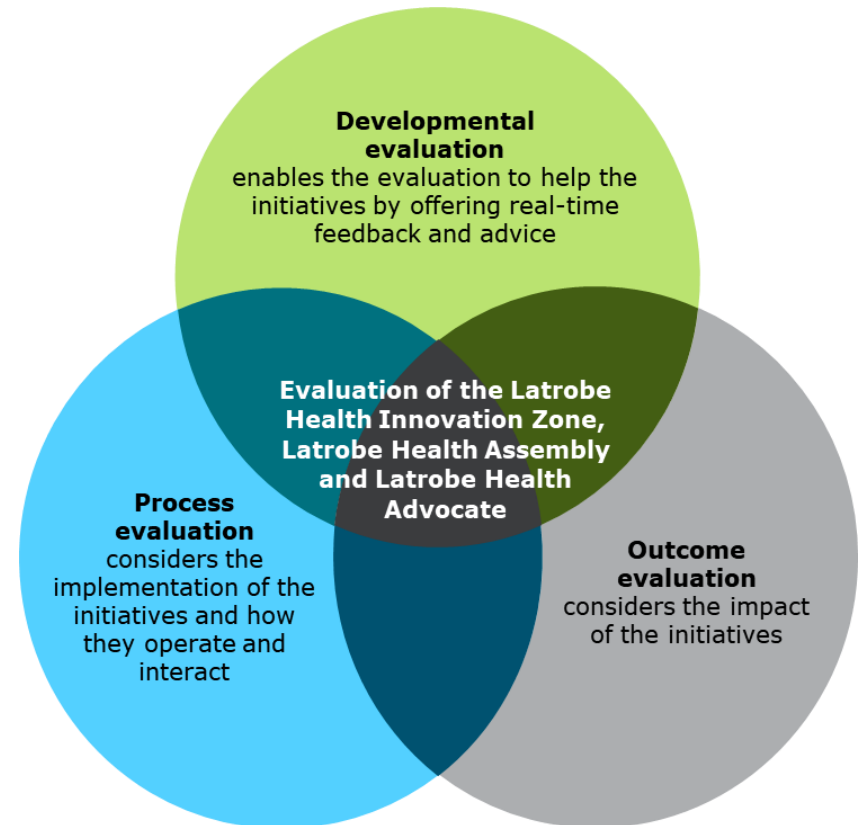
The evaluation is developmental but it incorporates process and outcome evaluation (see adjacent):

- The **developmental** approach enables the evaluation to help the initiatives, by offering real-time feedback and advice
- **Process** evaluation is considering the implementation of the initiatives and how they operate and interact
- **Outcome** evaluation will consider the impact of the initiatives.

Since commencing in May 2017:

- The evaluation team has worked with a large number of Latrobe Valley community members to co-design the [evaluation framework](#).
- And, provide feedback on the initiatives. Firstly via the [first evaluation presentation](#), then the [interim evaluation report](#), and again via the recently published [evaluation presentation](#).

The evaluation is scheduled to continue until 2020.





# Evaluation of the Latrobe Health Initiatives

The below principles are specific to this evaluation and were drafted following early insights obtained from preliminary stakeholder conversations

The Latrobe Health Initiatives are an innovative and community driven approach to improving the health and wellbeing of Latrobe Valley communities. It can take many years, or even decades, to influence health outcomes.

The evaluation will be conscious of this and, consistent with a developmental approach, will look at the processes followed by the initiatives to help understand whether they are on the right track. This is an opportunity for shared learning and insight.

The evaluation will provide an avenue for ongoing community feedback to ensure the health and wellbeing needs of Latrobe Valley communities are met. To reflect this, our approach to designing the evaluation framework has been guided by the following principles. These principles will continue to guide the evaluation.

- **Being present** in Latrobe and **forming trusting relationships** with Latrobe Valley communities
- **Listening** to and ensuring Latrobe Valley communities have **opportunities** to influence the design and outcomes of these initiatives
- **Linking in** with existing engagement opportunities and communicating through **social media** such as Facebook and traditional media including local print and radio
- Working with Latrobe Valley communities to ensure engagement is **representative of the diversity** within Latrobe Valley communities, including people who may not hear about the project through traditional channels, such as Aboriginal communities and migrant communities
- Being **flexible and adaptable** in our approach to engaging with Latrobe Valley communities to ensure our approach best meets their needs
- Being **independent** and **robust** in our evaluation methodology
- Sharing **transparent** and **timely feedback** with Latrobe Valley communities
- Recognising **existing community strengths**
- **Recognise** that influencing health outcomes can take many years.

**These principles were drafted following early insights obtained from preliminary stakeholder conversations in phase 1. The intent of these preliminary conversations was to inform our approach to designing the framework and conducting the evaluation.**



# Evaluation of the Latrobe Health Initiatives

The evaluation commenced with an intentionally broad and thematic approach to evaluating the initiatives, this was appropriate given the initiatives were in a 'forming' stage when the evaluation started

## How has the evaluation made an impact?



**Influencing the initiatives' development** – developmental evaluation means influencing the development of the initiative being evaluated. In mid-to-late 2017 the evaluation asked community members what they would like these initiatives to do. This pre-dated any substantive engagement by the initiatives themselves. As a result, the evaluation has influenced the Health and Wellbeing Charter, Assembly's 'Our Plan' and Advocate's Statement of Intent.



**Engaging stakeholders in the evaluation and with the initiatives themselves** – the evaluation commenced with a consultative process including conducting stakeholder interviews, attending existing meetings and running a community survey to understand how communities and other stakeholders wanted to engage with the evaluation and what questions they wanted the evaluation to answer.



**Building Assembly evaluation capacity and enabling the Assembly to build evaluation into their activities** – in collaboration with the evaluation, the Assembly identified their need to build evaluation capacity. The evaluation contributed to this by developing a self-evaluation form which the Assembly continues to use.



**Bringing stakeholders together in a way that enables shared interests to be recognised and progressed, and consensus to be developed** – in facilitating the interim report workshop with key DHHS and Assembly Board stakeholders, the evaluation established agreement on key findings and next steps.



**Bringing together key indicators of baseline health and wellbeing in Latrobe LGA, Mildura LGA, Gippsland region and state of Victoria** – the interim evaluation report brings together a range of publicly available health and wellbeing information to provide an evidence-led picture of health and wellbeing in the Latrobe Valley, and compares this with the Mildura LGA, Gippsland Region and state of Victoria.

## What are the opportunities?



**Continuing to listen and learn** – the evaluation will continue to seek feedback and reflect on lessons learned to ensure the evaluative approach continues to support the delivery of relevant and useful findings and improvement opportunities.



**Conducting deeper dives into certain topics and projects** – future presentations will include deeper dives into specific projects being delivered or run by the initiatives. A sampling frame has been developed to ensure an appropriate sample of projects are selected (see Section 4.3).



**Continuing to build Assembly evaluation capacity** – the evaluation could, for example, collaborate with the Assembly to conduct a deep dive into building Assembly evaluation capacity. This could form one of the evaluation presentations.



**Connecting with other local evaluations** – the evaluation will connect with other local evaluations and research efforts in Latrobe Valley. This may include the Hazelwood Health Study and the Federation University evaluation team.



**Going to where the community are** – future community engagement activities will preference a 'go to where the community are' approach instead of running community workshops. This will likely involve community based visits – for example, at libraries, universities/training centres and shopping centres.



**Sharing evaluation findings and improvement opportunities in an accessible manner** – the evaluation will continue to focus on delivering insights in plain, easy to understand language. Infographics and other visual aids will take preference over text.



# Evaluation of the Latrobe Health Initiatives

The initial evaluation framework was delivered in late 2017. An updated version is required to reflect significant developments that have occurred over the past 12 months

## Purpose of this document

The initial evaluation framework was delivered in late 2017. Since this time, the following developments have occurred:

- A Health and Wellbeing **Charter** was developed for the Zone
- The Assembly published their **Plan** ('Our Plan')
- The Advocate published her **Statement of Intent**
- **Learnings and insights** were gained through the evaluation.

The following key changes were made to the evaluation framework to reflect the above mentioned developments:

- **Evaluation approach** refined and targeted to the initiatives
- Zone **outcomes** aligned with the Charter **principles**
- Assembly **outcomes** aligned with their **action areas**
- Advocate **outcomes** aligned with their **priority areas**.





## 2. Evaluation models



# Overview

## Evaluation models represent the strategy for achieving intended changes

These **evaluation models** are a **tool to assist in the evaluation** of the Latrobe health initiatives.

They outline the '**building blocks**' required for the initiatives to improve health and wellbeing in Latrobe (Morra-Imas and Rist (2009) quote ActKnowledge and Aspen Institute (2003)).

The Latrobe Health Initiatives' evaluation models were initially developed in late 2017 based on emerging impact areas from consultation with Latrobe Valley communities, in addition to the objectives stated when the initiatives were announced.

These impact areas represent how Latrobe Valley communities would like the initiatives improve health and wellbeing in Latrobe Valley.

The initiatives were established to improve health and wellbeing in Latrobe Valley via new ways of working. This means their impact areas may be subject to change. As such, these evaluation models represent an indicative, point-in-time view of expected initiative outcomes.

These evaluation models were revised in early 2019. The update reflects evolving knowledge and understanding of the initiatives by the evaluation. The initiatives themselves have developed significantly, with their priorities and method of operating now more clearly established.

Specifically, the Assembly has developed a strategy, the Advocate has published a Statement of Intent, and there is a Health and Wellbeing Charter for the Zone.

The refinement of the evaluation models captures the evaluation's ongoing reflection on the initiatives and the evaluation approach.

### Key updates to the evaluation models

The ability to learn and modify to ensure the evaluation is able to add value is consistent with the developmental approach.

In early 2019, the evaluation team considered the initial evaluation models in the context of progress made by the initiatives.

**Four key changes** were applied to the evaluation models:

- Outcomes realigned to the correct **impact area**
- Outcomes realigned to appropriate outcome **terms**
- Wording of outcomes revised, where necessary, to reflect **language** used in the Assembly strategy, Advocate Statement of Intent, and the Charter
- Outcomes revised, where necessary, to reflect the **scope** of each initiative.

In summary:

- 5 outcomes were realigned to the correct **impact area**
- 16 were realigned to an appropriate outcome **term**
- 28 were revised to reflect the **scope** of the initiative
- 11 outcomes were **removed** to reflect **scope**
- 13 outcomes were **added** to reflect **scope**.

The focus of the evaluation will be the contribution of the Latrobe Health Innovation Zone, Latrobe Health Assembly and Latrobe Health Advocate to the impact areas identified by Latrobe Valley communities.





# Overview

The evaluation models detailed in this document contain a number of components

## Interpreting the evaluation models

**Inputs:** The resources needed to deliver the activities.

**Activities:** Tasks or actions that use the inputs, including tools, processes or events.

**Outputs:** The units of service or product delivered, resulting from the activities undertaken.

**Outcomes:** The consequences of outputs that can reasonably be expected to occur.

- Short term outcomes (year 0-1)
- Medium term outcomes (year 2-3)
- Long term outcomes (year 4-5)

**Impacts:** Eventual consequences of the short, medium and long term outcomes extending beyond the line of accountability.

1. Impact area 1: Community pride
2. Impact area 2: Community connectedness and participation
3. Impact area 3: Improved health service access and design
4. Impact area 4: Improved health and lifestyle

A detailed outline of how each initiative will address the impact areas is available in Appendix B.

The short, medium and long term outcomes are linked to evaluation questions and data sources in Appendix C.





# Overview

Below is a summary of how each initiative will address impact areas in the short, medium and long term

Impact Area:	Outcomes: <b>Short</b> <i>Listening and establishing</i>	<b>Medium</b> <i>Forming and doing</i>	<b>Long</b> <i>Meaningful change</i>
<b>(IA1) Community pride</b>	<p><b>Zone:</b> There is awareness of the Zone, and the Charter is publicly endorsed by organisations within the Zone</p> <p><b>Assembly:</b> There is awareness of the Assembly, and member organisations and networks are mobilised to promote Assembly activities and projects</p> <p><b>Advocate:</b> There is awareness of, and respect for, the Advocate, and health and wellbeing issues and goals are identified with community</p>	<p><b>Zone:</b> The Zone is identified as a place for innovative ways of working and health leadership, where Charter values and principles are adopted</p> <p><b>Assembly:</b> Board Member organisations collaborate to address community needs</p> <p><b>Advocate:</b> The Advocate is a focal point for health leadership, representing Latrobe Valley community needs to key stakeholders, who have a shared understanding of local needs and strengths</p>	<p><b>Zone:</b> Charter principles and values are embedded in organisations, and Latrobe Valley is seen as a healthy, collaborative and innovative city</p> <p><b>Assembly:</b> New ways of working are embedded in Board member organisations, and Latrobe Valley communities have positive perceptions of Latrobe Valley</p> <p><b>Advocate:</b> Stakeholders have shared health and wellbeing goals and prioritise Latrobe Valley communities' health and wellbeing</p>
<b>(IA2) Community connectedness and participation</b>	<p><b>Zone:</b> Latrobe Valley communities are receptive of programs within the Zone</p> <p><b>Assembly:</b> Latrobe Valley communities are supported to voice and prioritise issues</p> <p><b>Advocate:</b> Latrobe Valley communities are engaged effectively in discussing and knowing about local issues and opportunities</p>	<p><b>Zone:</b> Latrobe Valley communities feel ownership of the Charter and participate in programs, developing strong social connections</p> <p><b>Assembly:</b> The Assembly understands local issues and works with Latrobe Valley community members to connect and solve local issues</p> <p><b>Advocate:</b> Latrobe Valley communities feel heard, respected, understood, and enabled to advocate for health and wellbeing</p>	<p><b>Zone:</b> Latrobe Valley communities are more resilient and have capacity to take ownership of health and wellbeing outcomes and influence change</p> <p><b>Assembly:</b> Latrobe Valley communities are better connected, are more resilient, and lead programs with support from the Assembly</p> <p><b>Advocate:</b> Community voice is embedded in decision making, locally</p>
<b>(IA3) Improved health service access and design</b>	<p><b>Zone:</b> Health and wellbeing services identify community needs</p> <p><b>Assembly:</b> Gaps in services and preventive health are identified</p> <p><b>Advocate:</b> The Advocate is respected for communicating Latrobe Valley communities needs to key stakeholders</p>	<p><b>Zone:</b> The Zone is a focal point for coordinated and integrate services, where service providers work in new ways and co-design innovative ways to respond to community health and wellbeing needs</p> <p><b>Assembly:</b> The Assembly contributes to improving the accessibility and appropriateness of services and preventive health projects</p> <p><b>Advocate:</b> The Advocate directs new and existing funding to improve access to local, appropriate, affordable services</p>	<p><b>Zone:</b> Latrobe Valley is recognised as a "no wrong doors" place where health and wellbeing services are adaptive and dynamic in response to community need</p> <p><b>Assembly:</b> Latrobe Valley communities have improved access to affordable health and wellbeing services, including preventive health and chronic disease support</p> <p><b>Advocate:</b> Systemic health prevention is supported by health and wellbeing service providers and Latrobe Valley communities, and services respond to community needs</p>
<b>(IA4) Improved health and lifestyle</b>	<p><b>Zone:</b> Latrobe Valley communities are receptive of health promotion within the Zone</p> <p><b>Assembly:</b> Identified priority health outcomes shape involvement in health promotion campaigns</p> <p><b>Advocate:</b> Latrobe Valley communities and stakeholders have increased awareness about how health is shaped in the Zone</p>	<p><b>Zone:</b> Health promotion activities influence positive change to health-related behaviour</p> <p><b>Assembly:</b> Latrobe Valley communities respond positively to health promotion and the Assembly influences and supports solutions to improve health and wellbeing outcomes</p> <p><b>Advocate:</b> Latrobe Valley communities and stakeholders understand how systems change can improve health outcomes</p>	<p><b>Zone:</b> Latrobe Valley communities live healthier making positive changes to food and physical behaviour and encourage others to do so too and experiencing less chronic disease and mental health issues</p> <p><b>Assembly:</b> Latrobe Valley communities have improved health and wellbeing outcomes</p> <p><b>Advocate:</b> Latrobe Valley community members and stakeholders proactively and regularly collaborate to improve health outcomes in the Zone</p>

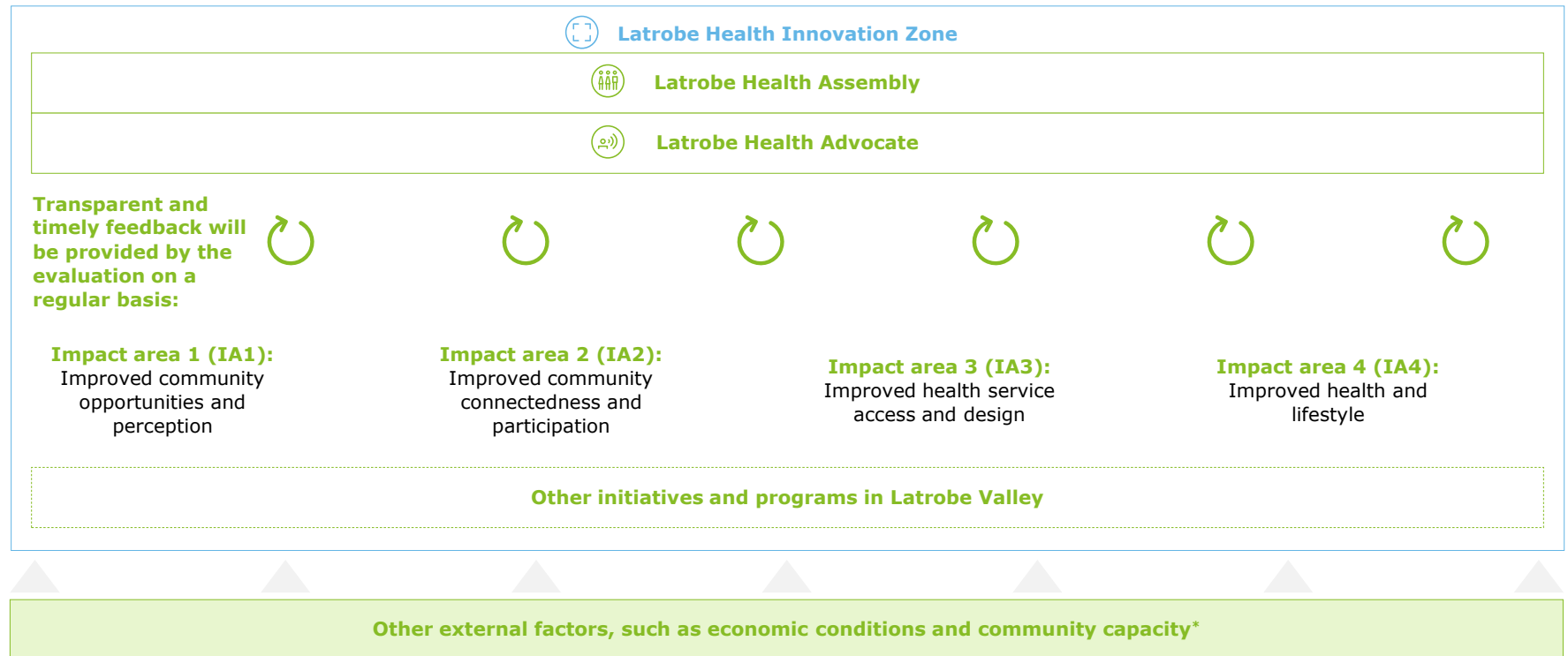


# Relationship between the initiatives

The Latrobe Health Initiatives have been tasked with the overall objective of improving health and wellbeing in Latrobe Valley

The relationship between the initiatives is depicted below. While these are distinct initiatives, in practice they are highly interrelated.

## Overarching objective: Improving health and wellbeing in Latrobe





# Latrobe Health Innovation Zone evaluation model

Inputs:	Short term outcomes Year 1: 2018	Medium term outcomes Year 2-3: 2019-20	Long term outcomes* Year 4-5: 2021-2022	Impact areas	
<ul style="list-style-type: none"> <li>The Latrobe Health and Wellbeing Charter</li> <li>Latrobe Valley communities</li> <li>The Assembly</li> <li>The Advocate</li> <li>DHHS</li> <li>Key health and wellbeing related organisations in Latrobe, many of whom are on the Board of the Assembly</li> <li>Organisations from other sectors</li> </ul>	(SO1) Sectors within Latrobe Valley are aware the region is a designated Zone, including sectors not traditionally associated with health such as small business and education	(MO1) The Zone is identified as a region for health leadership in Latrobe Valley	(LO1) The values and principles outlined in the Charter are embedded in organisations	(IA1) Community pride	
	(SO2) Latrobe Valley communities are aware of and understand the role of the Zone	(MO2) Organisations adopt the values and principles outlined in the Charter	(LO2) The Latrobe Valley is seen as a healthy city		
	(SO3) Organisations within the Zone publicly endorse the Charter	(MO3) Organisations co-brand innovative ways of working with the Zone's branding	(LO3) The Zone is recognised by Latrobe Valley communities as a symbol of collaboration and innovation		
	<b>Activities:</b> <ul style="list-style-type: none"> <li>A community-led approach to develop services needed by all people</li> <li>Work with First Nations communities and health service providers to improve health and wellbeing</li> <li>Build trust and respect among individuals, families, communities and service providers</li> <li>Use a co-design model to shift how we think about and organise health services in the Latrobe Valley</li> <li>Create innovative approaches to the design and delivery of health services</li> <li>Develop equitable access to the most appropriate supports and services for all people</li> <li>Grow and nurture collaboration and coordination between agencies to develop new ways of delivering services that cuts across boundaries to best meet the needs of each person</li> </ul>	(SO4) Latrobe Valley communities are receptive of programs within the Zone	(MO4) Latrobe Valley communities participate in funded initiatives and programs within the Zone	(LO4) Latrobe Valley communities have improved resilience	(IA2) Improved community connectedness and participation
	(SO5) Health and wellbeing services within the Zone identify community health and wellbeing needs	(MO7) Health and wellbeing services in the Zone work together in new ways	(LO6) Health and wellbeing services are adaptive and dynamic in response to community need		
	(SO6) Latrobe Valley communities are receptive of the Zone's health promotion activities	(MO8) Health and wellbeing service providers will work to co-design innovative responses to identified community health and wellbeing needs	(LO7) "No wrong door" – Latrobe Valley communities are put in touch with the service they need regardless of who they contact first		
<b>Outputs:</b> <ul style="list-style-type: none"> <li>Number of innovative approaches/ ways of working developed</li> <li>Number of initiatives established under the banner of the Zone</li> </ul>	(MO9) The Zone is a focal point for the coordination and integration of health and wellbeing services, including service providers not traditionally associated with health such as employment, education and justice	(LO8) The Zone is recognised as a place for innovative approaches to community health and wellbeing	(LO9) New ways of working attract health and wellbeing services to the Zone	(IA3) Improved health service access and design	
	(MO10) Latrobe Valley communities are influenced by funded initiatives and programs within the Zone to make positive changes to their health-related behaviours	(LO10) Latrobe Valley communities make positive changes to their food and physical activity behaviours	(LO11) Latrobe Valley communities encourage their friends and family to make positive changes to their food and physical activity behaviours		
		(LO12) Latrobe Valley communities live healthier	(LO13) Latrobe Valley communities have improved health outcomes including reduced chronic disease and mental health	(IA4) Improved health and lifestyle	

Line of accountability



# Latrobe Health Assembly evaluation model

Inputs:	Short term outcomes Year 1: 2018	Medium term outcomes Year 2-3: 2019-20	Long term outcomes* Year 4-5: 2021-2022	Impact areas			
<ul style="list-style-type: none"> <li>Existing health and wellbeing, environmental and economic evidence</li> <li>Latrobe Valley community members</li> <li>Self-monitoring/evaluation outcomes</li> <li>Assembly office staff</li> <li>Representatives of key health and wellbeing related organisations in Latrobe and relative government departments and organisation</li> </ul> <p><b>Activities:</b></p> <ul style="list-style-type: none"> <li>Develop a Strategic Plan that provides a key objective and focus points for the Assembly and that will guide the range of programs developed</li> <li>Establish methods of working that allow for consideration of ideas, development of concepts and initiation of projects</li> <li>Provide opportunities for a stronger community voice in identifying health and wellbeing issues, gaps and solutions</li> <li>Drive innovative programs and accessible service provision across the Zone</li> <li>Engage with Latrobe Valley communities</li> <li>Bring Latrobe Valley communities, service providers and sectors – including those not traditionally associated with health such as small business and education - together</li> <li>Oversee the development of local partnerships</li> <li>Seek auspice agencies to host and manage resources to deliver projects</li> </ul> <p><b>Outputs:</b></p> <ul style="list-style-type: none"> <li>Number of Assembly meetings held</li> <li>Number of Board meetings held</li> <li>Number of Work Group meetings held</li> <li>Number of Project Initiation Documents (PIDs) developed</li> <li>Number of Business Cases developed and taken to the Board</li> <li>Number of pilots initiated</li> <li>Number of processes developed to facilitate a culture of learning and continuous improvement through monitoring and adapting to learnings as they are discovered</li> </ul>	<p>(SO7) Assembly Board member organisations identify ways they can collaborate to address community needs</p> <p>(SO8) The Assembly leverages its networks in engaging Latrobe Valley communities, and promoting Assembly activities and projects, including sectors not traditionally associated with health</p> <p>(SO9) Latrobe Valley communities are aware of the Assembly and understand its role</p>	<p>(MO11) Assembly Board member organisations collaborate to address community needs</p>	<p>(LO14) New ways of working to address community needs are embedded in Assembly Board member organisations</p> <p>(LO15) Latrobe Valley communities have increased optimism and positive perceptions of Latrobe Valley</p>	<p>(IA1) Community pride</p> <p><b>Great Place</b></p>			
	<p>(SO10) Latrobe Valley communities are supported by the Assembly to come together to voice and prioritise local issues (e.g. family safety, drugs and alcohol)</p>	<p>(MO12) Latrobe Valley communities connect by participating in Assembly activities and projects</p> <p>(MO13) The Assembly understands local issues and works with Latrobe Valley communities to facilitate positive solutions</p>	<p>(LO16) Latrobe Valley communities have strengthened connections and resilience</p> <p>(LO17) Programs are community-led with support from the Assembly where required</p> <p>(LO18) Latrobe Valley communities have improved capacity to prevent issues from becoming acute</p>		<p><b>Line of accountability</b></p>	<p>(IA2) Improved community connectedness and participation</p> <p><b>Positive Culture</b></p>	
	<p>(SO11) The Assembly identifies health and wellbeing priorities and service gaps in the Zone (e.g. chronic health, mental health, dental health)</p>	<p>(MO14) The Assembly contributes to improving accessibility of health and wellbeing services in response to identified priorities and gaps</p> <p>(MO15) The Assembly influences, funds and coordinates community-based preventative health projects in response to identified priorities and gaps</p>	<p>(LO19) Latrobe Valley communities have improved access to the health and wellbeing services they need and at an affordable cost</p> <p>(LO20) Latrobe Valley communities have improved access to preventive health supports</p> <p>(LO21) People with a chronic disease or disability are supported to live well</p>				<p>(IA3) Improved health service access and design</p> <p><b>Better Care</b></p>
	<p>(SO12) The Assembly identifies priority health outcomes in the Zone</p> <p>(SO13) The Assembly is an active partner in relevant health promotion campaigns</p>	<p>(MO16) The Assembly influences, funds and coordinates solutions to address priority health outcomes gaps in the Zone</p> <p>(MO17) Latrobe Valley communities respond positively to health promotion and social marketing campaigns (e.g. quit smoking)</p>	<p>(LO22) Latrobe Valley communities have improved health and wellbeing outcomes, including reduced chronic disease and mental health</p>				



# Latrobe Health Advocate evaluation model

Inputs:	Short term outcomes	Medium term outcomes	Long term outcomes*	Impact areas	
<ul style="list-style-type: none"> <li>Evidence of existing and emerging health and wellbeing, environmental and economic trends</li> <li>Self-monitoring outcomes</li> <li>Resourcing of office</li> </ul> <p><b>Activities:</b></p> <ul style="list-style-type: none"> <li>Build and maintain a distinct public profile in providing leadership, an independent voice, and accessibility</li> <li>Provide collaborative leadership, an independent voice and strategic advice on health-related matters</li> <li>Develop and maintain strong relationships with policy and decision makers at the local and State level</li> <li>Engage and work with key stakeholders to identify and address barriers to good health and wellbeing in Latrobe Valley</li> <li>Design and develop a community engagement model with people experiencing disadvantage</li> <li>Analyse community voice to determine systemic issues for service innovation and improvements</li> <li>Enable and mediate system change by advocating to government, agencies, service providers, businesses, industry, community members and Latrobe Health Assembly</li> </ul>	<p><b>Year 1: 2018/19</b></p> <p>(SO14) Latrobe Valley communities are aware of the Advocate and understand her role</p> <p>(SO15) The Advocate identifies public health and wellbeing issues and goals among Latrobe Valley communities and stakeholders within the Zone</p> <p>(SO16) The Advocate is respected by all stakeholders as an independent representative of Latrobe Valley communities in the Zone</p>	<p><b>Year 2-3: 2019-20</b></p> <p>(MO18) Latrobe Valley communities' concerns are addressed effectively</p> <p>(MO19) Latrobe Valley communities' needs are better represented to the Government, services and systems</p> <p>(MO20) The Advocate influences stakeholders in the Zone to align their community health and wellbeing objectives</p> <p>(MO21) The Advocate influences stakeholders within the Zone to prioritise the health and wellbeing of Latrobe Valley communities when making decisions</p> <p>(MO22) Service planning and policy decisions reflect that key stakeholders, including Government, understand the needs and strengths of Latrobe Valley communities</p> <p>(MO23) The Advocate is a focal point for health and wellbeing leadership within Latrobe Valley communities</p>	<p><b>Year 4-5: 2021-2022</b></p> <p>(LO23) Stakeholders within the Zone have shared health and wellbeing goals for Latrobe Valley</p> <p>(LO24) Stakeholders within the Zone prioritise the health and wellbeing of Latrobe Valley communities when making decisions</p>	<p><b>Line of accountability</b></p> <p>(IA1) Community pride</p> <p><b>Health is everyone's business</b></p>	
<p><b>Outputs:</b></p> <ul style="list-style-type: none"> <li>Number of collaborative engagements with Latrobe Valley communities</li> <li>Number of meetings with government and other stakeholders</li> <li>Number of policies and other key decisions influenced</li> <li>Amount of funding sources influenced</li> <li>Amount of additional funds (e.g. seed funding) received</li> </ul>	<p>(SO17) The Advocate engages effectively with Latrobe Valley communities (including heard to reach groups)</p> <p>(SO18) The Advocate shares her findings and insights on issues and opportunities with Latrobe Valley communities and stakeholders in the Zone</p> <p>(SO19) The Advocate works with the Latrobe Health Assembly to ensure community is engaged across the initiatives</p>	<p>(MO24) Latrobe Valley communities feel heard, respected and understood by the Advocate.</p> <p>(MO25) Latrobe Valley communities trust, and have confidence in, the Advocate and her ability to meet their needs</p> <p>(MO26) Latrobe Valley communities feel empowered and enabled to advocate for their health and wellbeing</p> <p>(MO27) Stakeholders within the Zone turn to the Advocate for the community's perspective on issues and opportunities in Latrobe Valley</p>	<p>(LO25) Latrobe Valley communities have greater capacity to advocate for their health and wellbeing needs</p> <p>(LO26) Stakeholders within the Zone embed community voice in their decision making</p>		<p>(IA2) Improved community connectedness and participation</p> <p><b>Inclusive communities</b></p>
	<p>(SO20) The Advocate is a respected representative of Latrobe Valley communities in health and wellbeing service planning at a local and State level</p> <p>(SO21) Latrobe Valley communities' health and wellbeing needs are communicated effectively</p>	<p>(MO28) The Advocate influences existing funding sources to improve access to local, affordable services that meet Latrobe Valley communities' health and wellbeing needs</p> <p>(MO29) The Advocate attracts additional funding to improve access to local, affordable services that meet Latrobe Valley communities' health and wellbeing needs</p>	<p>(LO27) Health and wellbeing services are designed in response to community needs</p> <p>(LO28) "No wrong door" – Latrobe Valley communities are put in touch with the service they need regardless of who they contact first due to improved service integration</p> <p>(LO29) Systemic health prevention is supported by Latrobe Valley communities and service provider behaviour</p>		<p>(IA3) Improved health service access and design</p> <p><b>Project Campaigns</b></p>
	<p>(SO22) Latrobe Valley communities and stakeholders have increased awareness about how health is shaped in the Zone</p>	<p>(MO30) Latrobe Valley communities and stakeholders understand how systems change can improve health outcomes</p>	<p>(LO30) Latrobe Valley community members and stakeholders proactively work together to drive system changes to improve health outcomes in the Zone</p>	<p>(IA4) Improved health and lifestyle</p> <p><b>Health is everyone's business</b></p>	

\*The long term outcomes identified are beyond the timeframe of this evaluation, however, these should be considered in any ongoing monitoring and evaluation or future outcome evaluation.

\*\*Stakeholders include, but are not limited to, business, industry, agriculture, and health service sector stakeholders, as well as community organisations and government.



# 3. Evaluation questions



# Evaluation questions

## Evaluation questions define the scope and focus of the evaluation

### Evaluation questions define the scope and focus of the evaluation.

The ability to learn and modify to ensure the evaluation is able to add value is consistent with the developmental approach.

In early 2019, the evaluation team considered the initial evaluation questions in the context of the updated evaluation models and the progress made by the initiatives.

Questions were revised to reflect the scope each initiative as well as the language used in the Assembly strategy, the Advocate's Statement of Intent, and the Charter.

The evaluation questions detailed in this document have been categorised according to their **type, domain** and **theme**.

### Evaluation question types

- **Process:** These questions will look at the processes undertaken during the planning and implementation of the Latrobe Health Initiatives.
- **Developmental:** These questions will look at the early stages of the Latrobe health initiatives and how they are tracking towards achieving their outcomes.
- **Outcome:** These questions will look at the outcomes achieved by the Latrobe Health Initiatives.

Toward the beginning, the evaluation will have a greater focus on process evaluation questions. Over time, this focus will shift more towards outcome evaluation questions.

### Evaluation question domains

- **Appropriateness:** These questions will look at the design of the Latrobe Health Initiatives relative to their intended objectives and outcomes.
  - These questions need to consider both the extent to which the initiatives operated in an innovative manner, in addition to the extent to which the initiatives leveraged the existing evidence-base.
  - While there is sometimes a perceived tension between innovative and evidence-based initiatives, this does not always need to be the case.
  - This is because initiatives that are intended to be innovative are at risk of repeating the mistakes of the past if they fail to learn from what has been tried before and use this as a platform from which they can drive innovation.
- **Effectiveness:** These questions will look at the extent to which the Latrobe health initiatives are meeting, or are on track to meeting, their defined outcomes.
- **Sustainability:** These questions explore the ability of the Latrobe health initiatives to be maintained over-time.

Evaluation questions relating to appropriateness and sustainability have not been mapped to impact areas or outcomes as they relate to the initiatives as a whole.



# EVALUATION QUESTION THEMES

Evaluation questions reflect what community members want to know about

-  JUSTIFICATION
-  OPPORTUNITIES FOR IMPROVEMENT
-  COMMUNITY NEEDS
-  INNOVATION
-  AWARENESS AND UNDERSTANDING
-  HEALTH AND WELLBEING
-  EVIDENCE
-  ENGAGEMENT AND EMPOWERMENT
-  DEMAND
-  GOVERNANCE AND WORKING TOGETHER
-  TIMELINESS
-  CELEBRATING SUCCESS
-  COMMUNITY CAPACITY



# Evaluation questions

Evaluation questions are mapped to outcomes and data sources in Appendix C

ID	Type	Domain	Theme	Evaluation question
EQ1	Process	Appropriateness	Justification	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Was designating the Zone appropriate?</li> <li>• <b>Assembly:</b> Was establishing the Assembly appropriate?</li> <li>• <b>Advocate:</b> Was appointing the Advocate appropriate?</li> </ul>
EQ2	Process	Appropriateness	Innovation	<ul style="list-style-type: none"> <li>• <b>Zone:</b> How is the Zone innovative?               <ul style="list-style-type: none"> <li>• Is there evidence that the establishment of a zone is encouraging innovation in responding to health and wellbeing issues?</li> <li>• Are key organisations within the Zone working together differently to address health and wellbeing issues?</li> </ul> </li> <li>• <b>Assembly:</b> How is the Assembly delivering, influencing or funding innovative approaches?</li> <li>• <b>Advocate:</b> How is the Advocate employing innovative approaches?</li> </ul>
EQ3	Process	Appropriateness	Evidence	<ul style="list-style-type: none"> <li>• <b>Zone:</b> How is evidenced used in the Zone?</li> <li>• <b>Assembly:</b> How is the Assembly informed by evidence?</li> <li>• <b>Advocate:</b> How is the Advocate informed by evidence?</li> </ul>
EQ4	Process	Appropriateness	Governance and working together	<ul style="list-style-type: none"> <li>• <b>How</b> are decisions made within, and across, Initiatives?</li> <li>• <b>How</b> is accountability delineated to improve governance in the region?</li> </ul>
EQ5	Developmental	Effectiveness	Celebrating success	<ul style="list-style-type: none"> <li>• <b>Zone:</b> How are key stakeholders within the Zone committed to driving innovation and change to improve health and wellbeing?</li> <li>• <b>Assembly:</b> How has the Assembly been successful? What factors have contributed to this success?</li> <li>• <b>Advocate:</b> How has the Advocate been successful? What factors have contributed to this success?</li> </ul>
EQ6	Developmental	Effectiveness	Opportunities for improvement	<ul style="list-style-type: none"> <li>• <b>Zone:</b> How could the Zone be improved?</li> <li>• <b>Assembly:</b> How could the Assembly be improved?</li> <li>• <b>Advocate:</b> How could the Advocate be improved?</li> </ul>
EQ7	Process	Effectiveness	Awareness and understanding	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Are Latrobe Valley communities aware of the Zone? And, do they understand its purpose?</li> <li>• <b>Assembly:</b> Are Latrobe Valley communities aware of the Assembly? And, do they understand its purpose?</li> <li>• <b>Advocate:</b> Are Latrobe Valley communities aware of the Advocate? And, do they understand the its purpose?</li> </ul>



# Evaluation questions

Evaluation questions are mapped to outcomes and data sources in Appendix C

ID	Type	Domain	Theme	Evaluation question
EQ8	Process	Effectiveness	Engagement and empowerment	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Are Latrobe Valley communities engaged in, and empowered by, the Zone?</li> <li>• <b>Assembly:</b> Are Latrobe Valley communities engaged in, and empowered by, the Assembly?</li> <li>• <b>Advocate:</b> Are Latrobe Valley communities engaged in, and empowered by, activities facilitated by the Advocate?</li> </ul>
EQ9	Process	Effectiveness	Timeliness	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Have the objectives of the Zone been achieved within expected timeframes?</li> <li>• <b>Assembly:</b> Is the Assembly acting within expected timeframes?</li> <li>• <b>Advocate:</b> Is the Advocate acting within expected timeframes?</li> </ul>
EQ10	Outcome	Effectiveness	Community capacity	<ul style="list-style-type: none"> <li>• <b>Zone:</b> How do key stakeholders within the Zone work with Latrobe Valley communities to develop innovative responses to community needs?</li> <li>• <b>Assembly:</b> How does the Assembly work with Latrobe Valley communities to facilitate positive solutions to local issues?</li> <li>• <b>Advocate:</b> How does the Advocate collaborate with Latrobe Valley communities to develop solutions to identified system issues?</li> </ul>
EQ11	Outcome	Effectiveness	Community needs	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Does the Zone reflect the needs of Latrobe Valley communities?</li> <li>• <b>Assembly:</b> Is the Assembly meeting the needs of Latrobe Valley communities?</li> <li>• <b>Advocate:</b> Is the Advocate meeting the needs of Latrobe Valley communities?</li> </ul>
EQ12	Outcome	Effectiveness	Health and wellbeing	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Do strategies in the Zone improve health and wellbeing outcomes?</li> <li>• <b>Assembly:</b> Is the Assembly improving health and wellbeing outcomes?</li> <li>• <b>Advocate:</b> Is the Advocate improving health and wellbeing outcomes?</li> </ul>
EQ13	Outcome	Sustainability	Demand	<ul style="list-style-type: none"> <li>• <b>Zone:</b> Should the Zone continue?</li> <li>• <b>Assembly:</b> Should the Assembly continue?</li> <li>• <b>Advocate:</b> Should the role of the Advocate continue?</li> </ul>



# 4. Data requirements and approach

Please refer to the [previous version](#) of the evaluation framework for a more detailed description of the primary and secondary data sources for the evaluation



# 4.1 Data sources

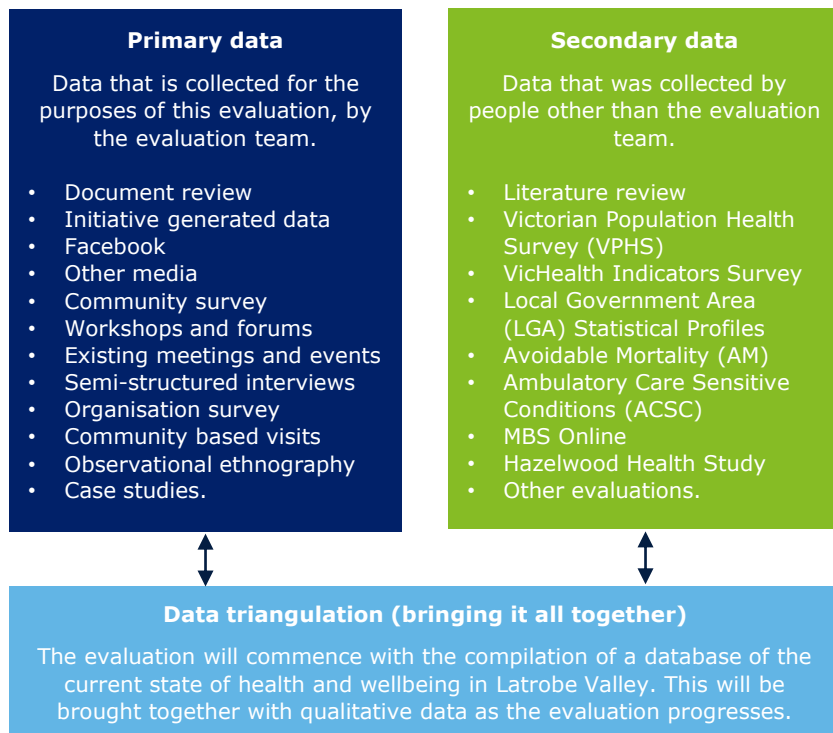


# Data sources

Qualitative and quantitative data is being drawn from primary and secondary sources, and triangulated to inform the evaluation

The Latrobe Health Initiatives have been tasked with improving health and wellbeing in Latrobe Valley. These initiatives are expected to both represent and lead to positive change. Given the broad scope of health and wellbeing and as the evaluation will consider a range of indicators and data (both primary and secondary).

The below diagram represents the relationships that exist between the data types that will be drawn on throughout the evaluation. The naming of these data types relates to how the data is collected and bears no relation to their level of importance.





# Primary data sources

Primary data is being collected from a range of sources, tailored to each stakeholder group



Key: Priority strategy Supplementary strategy



Stakeholder group:	Media:		Broad consultation:		Direct consultation:		Targeted consultation (as required):			
	Facebook	Other media	Community survey	Workshops and forums	Existing meetings and events	Semi-structured interviews	Organisation survey	Community based visits	Observational ethnography	Case studies
Assembly										
Advocate										
Latrobe Valley communities										
• Hard to reach communities										
• Aboriginal communities										
• Community groups										
Organisations in the Zone										





# Primary data sources

Primary data is being collected from a range of sources, tailored to each stakeholder group

Initiative materials	Description
 Document review	Documents produced by the initiatives including Project Initiation Documents (PIDs), business cases, Assembly self-evaluation forms, and communication and engagement strategies. This is not an exhaustive list.
 Initiative generated data	Data generated by the Assembly and Advocate over-time including, but not limited to, organic and inorganic media statistics, and data generated by Basecamp and SpeakUpLatrobe.

Media	Description
 Facebook	A key insight from our preliminary stakeholder engagements was that Facebook is the most appropriate social media platform for providing information and opportunities for comment involving the broadest range of Latrobe Valley communities members. The Latrobe Health Innovation Zone Evaluation Facebook page was established in September 2017. This Facebook page will continue to be used throughout the evaluation to share information with Latrobe Valley communities regarding future opportunities for participation and ongoing feedback from the evaluation in an iterative manner.
 Other media	Additional media sources such as newspapers and radio will continue to be used to broaden the reach of communications. Including advertisements in the Latrobe Valley Express.

Broad consultation	Description
 Community survey	<p>The community survey, launched shortly after the commencement of the evaluation, will continue to facilitate ongoing collection of quantitative and qualitative data relating to health and wellbeing in Latrobe Valley, and feedback on the Latrobe health initiatives. The evaluation will continue to leverage the Facebook page and existing relationships to promote the survey.</p> <p>Posters advertising the survey could again be posted in local shopping centres, primary schools, libraries, neighbourhood houses, healthcare centres and places where parents wait while their children participate in an activity.</p>
 Workshops and forums	Data collection for presentations 5 to 6 and the final report will likely involve a lesser focus on community workshops. Instead, future community engagement activities will preference a 'go to where the community are' approach. This approach is informed by insights gained over the past 14 months.





# Primary data sources

Primary data is being collected from a range of sources, tailored to each stakeholder group

## Direct consultation

### Description



Existing meetings and events

The evaluation will seek to leverage existing meetings and events where possible, including but not limited to Assembly meetings, Assembly Pillar Group meetings, and Assembly Board meetings. The time allocated to the evaluation would be used to understand what the attendees would like these initiatives to contribute to in Latrobe Valley and whether they are on track to achieving these outcomes. To schedule these meetings, the evaluation will go back to every stakeholder group consulted in the design of the evaluation framework to advise of the commencement of the evaluation and to invite them to participate. As such, the exact timing and method of these engagements is to be confirmed and will depend upon the responses received.



Semi-structured interviews (SSIs)

Semi-structured interviews will be held with stakeholders to obtain specific feedback on whether these initiatives are on track to achieving their stated objects in the context of the nominated consultation stream. Stakeholders consulted in this manner may include people on or connected with the Assembly, community representative groups, local government and funded organisations, government and agencies, and committees and governance. These interviews will be held at times that suit the participant.



# Primary data sources

Primary data is being collected from a range of sources, tailored to each stakeholder group

## Targeted consultation

### Description



Organisation survey

The organisation survey, launched shortly after the commencement of the evaluation, will continue to facilitate ongoing collection of quantitative and qualitative data from four target groups.

These target groups are:

- T1. Sectors that influence health, including those not traditionally associated with health such as small business and education
- T2. Health and wellbeing service providers
- T3. Food providers
- T4. Physical activity providers

Furthermore, conducting a targeted survey for Latrobe Health Assembly members will be discussed with the Assembly backbone.



Community based visits

A recurrent theme emerging from the evaluation is the importance of going to places community members frequent and engaging with them on their own terms. This has frequently been highlighted as a successful means of obtaining both a breadth and depth of community participation. This may include local shopping centres, primary schools, libraries, neighbourhood houses, healthcare centres and places where parents wait while their children participate in an activity. This method was used in the development of the Latrobe City Council *Municipal Public Health and Wellbeing Plan 2017-2021*.



Observational ethnography

Ethnography could be used to observe and systematically document behavioural or cultural changes when conducting a deep dive analysis of specific outcomes or sub-communities within Latrobe. This would build upon the principle of going to where Latrobe Valley communities are and both observing and engaging with members in an environment in which they feel most comfortable.

The evaluation will also observe Pillar Group meetings, Assembly meetings, Assembly Board meetings and Advocate meetings/forums.



Case studies

Case studies will be used to obtain details about the initiatives and their progress from a variety of perspectives. To conduct a case study, forms would be distributed to stakeholders of interest (see Section 8 for an example). This could include the Advocate, Assembly Pillar Groups and the aforementioned target groups. These forms would be tailored according to the impact area and initiative in question, and the type of stakeholder involved. Data from a variety of other sources may also be included when reporting the findings of the case study.



# Secondary data sources

Secondary data is being collected from a range of sources available at the Latrobe LGA level

 The evaluation commenced with the compilation of a **baseline database** relating to the **current state** of health and wellbeing in the Latrobe LGA, Mildura LGA, Gippsland region and state of Victoria. This will be added to as the evaluation, and the initiatives, progress.

However, there is **uncertainty** regarding the extent to which **measurable changes** in the data will occur and whether these changes will be **statistically significant**. Further, any changes to this data **will not be able to be attributed to one particular initiative**. As such, **combining quantitative and qualitative data** will assist in providing insights on the areas where the Zone, Assembly or Advocate are collectively and individually seeking to have an impact.

Secondary data source	Description	Collection frequency	Relevant collection level
<a href="#">Victorian Population Health Survey (VPHS)</a>	A Victorian survey which collects information on overall self-rated health status, level of psychological distress, body mass index, the presence of chronic diseases, nutrition, physical activity, smoking and alcohol consumption. Information is also collected on participation in screening for bowel cancer, cervical cancer, breast cancer, high blood pressure, cholesterol and high blood sugar in addition to community participation, levels of social support and connections with others. Interviews are conducted in the major non-English languages in Victoria to ensure people of culturally and linguistically diverse backgrounds are represented. Sample size: 34,000 adults aged ≥ 18 years.	Last update: 2015 data Next update: 2017/18 data	Victoria, Gippsland Region, Latrobe LGA, and Mildura LGA
<a href="#">VicHealth Indicators Survey</a>	A Victorian community wellbeing survey which focuses on the social determinants of health. The survey is based on core questions related to individual and community health and wellbeing, critical to inform decisions about public health priorities. Sample size: Just over 22,000 adults aged ≥ 18 years.	Last update: 2015 data Next update: 2019 data	Victoria, Latrobe LGA, and Mildura LGA
<a href="#">Local Government Area (LGA) Statistical Profiles</a>	Profiles developed by DHHS on an annual basis to support and inform health and human service planning and policy development. Provide measures on a broad range of topics including: population, diversity, disadvantage and social engagement, housing, transport and education, health status and service utilisation, child and family characteristics and service utilisation. Sample size: Variable, dependent on underlying data sources	Last update: 2015 data Next update: 2019 data	Latrobe LGA and Mildura LGA
<a href="#">Avoidable Mortality (AM)</a>	A method of counting untimely and unnecessary deaths from diseases for which effective public health and medical interventions are available. An excess of deaths due to preventable causes should suggest shortcomings in the healthcare system that warrant further attention. Complete data set, i.e. not a sample.	Annually	Victoria, and Latrobe LGA



# Secondary data sources

Secondary data is being collected from a range of sources available at the Latrobe LGA level

Secondary data source	Description	Collection frequency	Collection level
<a href="#">Ambulatory Care Sensitive Conditions (ACSC)</a>	Describes hospitalisation rates for which hospitalisation is thought to be avoidable with the application of public health interventions and early disease management, usually delivered in an ambulatory setting such as primary care. High rates of hospital admissions for ACSCs may provide indirect evidence of problems with patient access to primary healthcare, inadequate skills and resources, or disconnection with specialist services. Complete data set, i.e. not a sample.	Annually	Victoria, Gippsland Region, Latrobe LGA, and Mildura LGA
<a href="#">MBS Online</a>	Lists the availability and utilisation of services the Medicare services subsidised by the Australian government (i.e. services listed on the Medicare Benefits Schedule (MBS)). Complete data set, i.e. not a sample.	Annually	Latrobe LGA and Mildura LGA
<a href="#">Hazelwood Health Study</a>	The Hazelwood Health Study is about identifying potential health outcomes for people who may have been impacted by the smoke from the mine fire. These might include heart and lung disease, cancer or mental health problems. It will also look at the effects on vulnerable groups such as infants and children, young people, and other people.	Variable	Variable
<a href="#">Other evaluations</a>	There are many parallel programs of work in Latrobe. Many of these will have an impact on the health and wellbeing of Latrobe Valley communities. Evaluations may be conducted for these programs, the information collected as part of these evaluations may be relevant as part of this evaluation. For example, the evaluation of the deliverables 69-77 relating to early detection and screening including smoking cessation contracted to the GPHN, the evaluation of the Latrobe Health Innovation Zone mental health and chronic disease pilots.	Variable	Unknown, expect: smaller level than Latrobe LGA



# 4.3 Deep dive approach

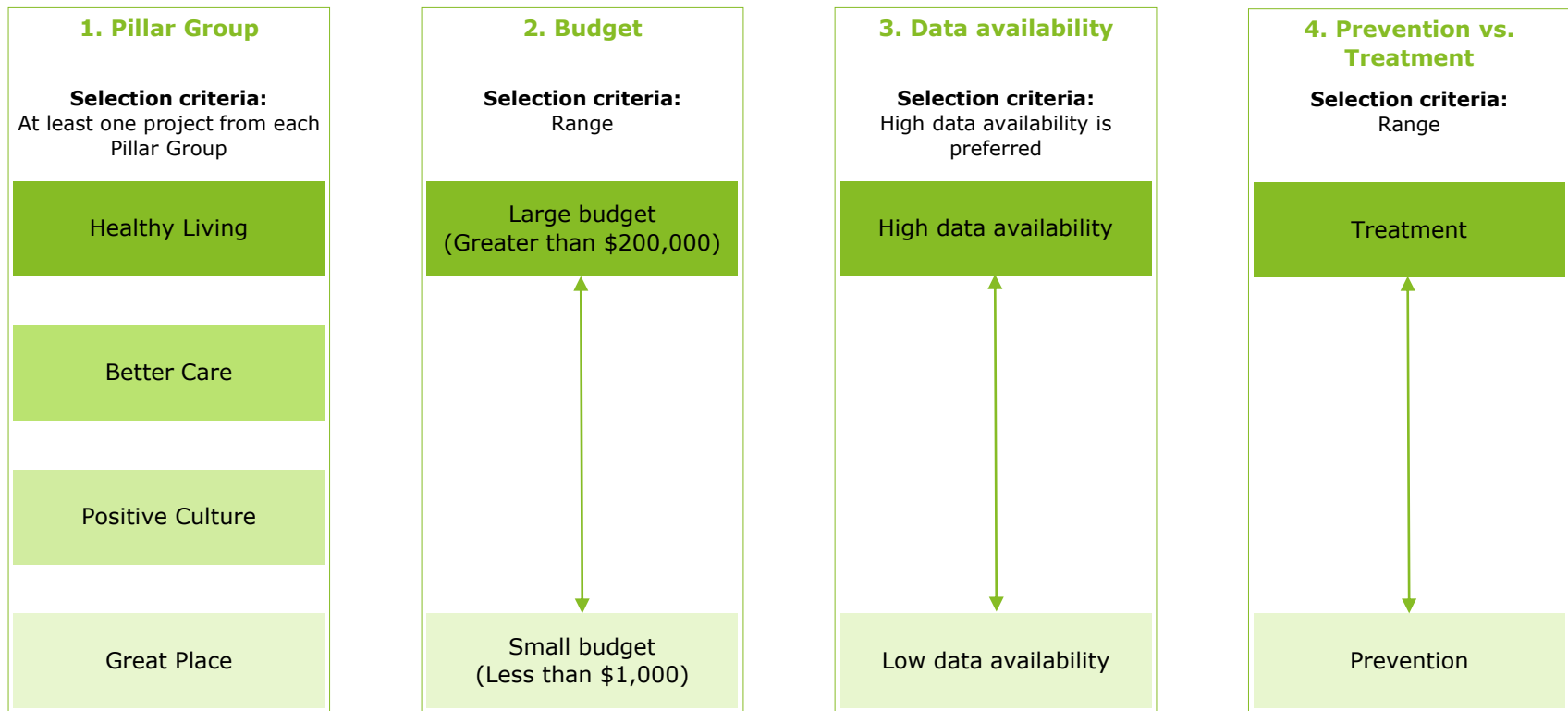


# Deep dive approach

The evaluation will 'deep dive' into a sample of Assembly projects, selected via a sampling frame comprising four components

The evaluation will '**deep dive**' into a sample of Assembly projects, **selected via a sampling frame comprising four components** (see diagram, below).

This will **complement the overarching thematic evaluation approach** by measuring the **impact of individual Assembly projects** and identifying targeted findings and improvement opportunities.



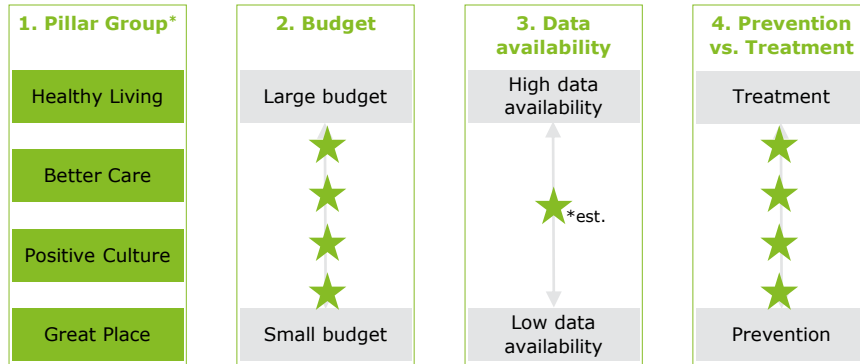


# Deep dive approach

An initial sample of Assembly projects are listed below

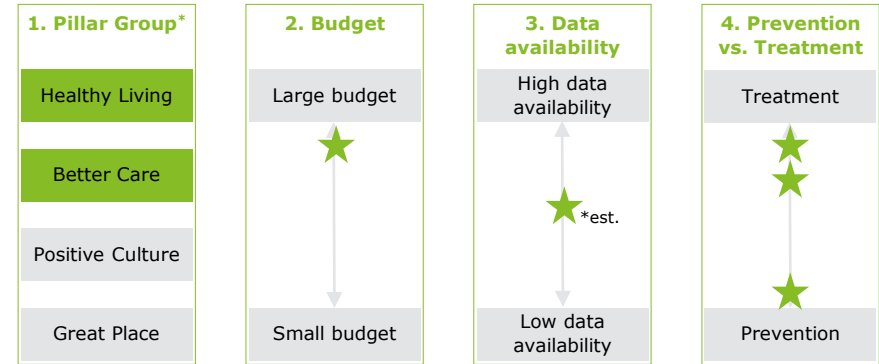
## Proposed project #1

**Health Innovation Grants Program (round 1 and 2)** – enabling Latrobe Valley communities to deliver their own identified initiatives and solutions to improve the health and wellbeing of Latrobe Valley.



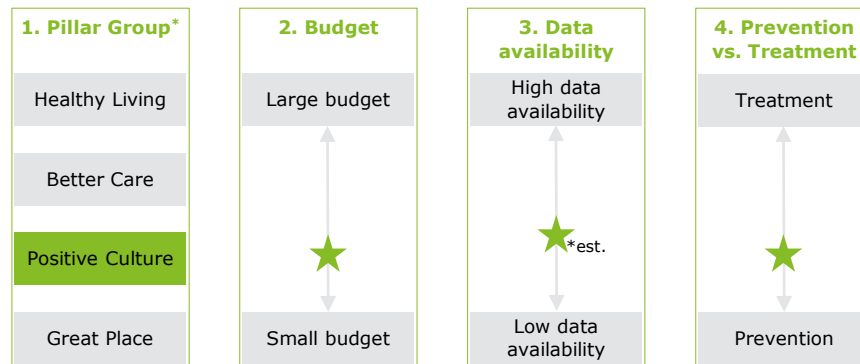
## Proposed project #2

**Dental Projects** – improving access to dental health services in Latrobe Valley through the Up-Skilling of Dental Assistants, Dental Voucher Scheme and Fluoride Varnish Treatment in Schools projects.



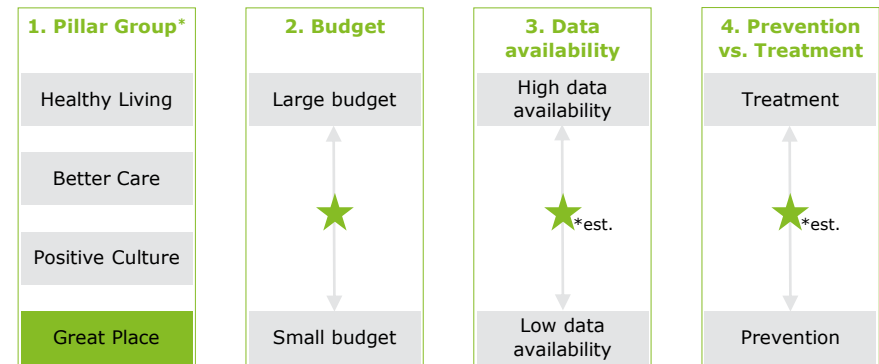
## Proposed project #3

**Family violence training for salon professionals** – free training on gender inequality and family violence for salon professionals to help women who may be facing violence or controlling behaviour at home.



## Proposed project #4

**Social prescribing** – enabling GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services.





# 5. Governance and project management





# Governance and project management

## An overview of the governance and project management for the evaluation of the Latrobe Health Initiatives

### Department of Health and Human Services (DHHS)

The Deloitte evaluation team will have regular contact with DHHS via three groups, described below.

#### 1. Latrobe Health and Wellbeing Steering Committee

- **Comprises:** DHHS Senior Executives, DHHS Central members and DHHS Traralgon members.
- **Timing:** Deloitte will attend meetings on a quarterly basis (approximately). Deloitte will hold approximately half an hour on the agenda.
- **Role:** Deloitte will prepare materials for distribution in the committee papers approximately 1 week prior to the meeting.

#### 2. Reference Group

- **Comprises:** DHHS Central members, DHHS Traralgon members, the Latrobe Health Assembly Executive Officer and Latrobe Health Advocate.
- **Timing:** Monthly.
- **Role:** Deloitte will prepare materials for distribution prior to the meeting and/or discussion during the meeting.

#### 3. Project Team

- **Comprises:** DHHS Traralgon members.
- **Timing:** Weekly.
- **Role:** Deloitte will prepare and distribute a status update prior to the meeting.

### Latrobe Valley communities

The Deloitte evaluation team will regularly engage with Latrobe Valley communities. One formal community group has been established to provide regular feedback on evaluation methods and reports. This group also provided feedback to the Federation University Health and Wellbeing Charter team in 2017 and 2018.

#### 1. Community Advisory Group

- **Comprises:** Members of Latrobe Valley communities.
- **Timing:** Every two months (approximately).
- **Role:** Deloitte will prepare materials for distribution prior to the meeting.

### Deloitte evaluation team

The Deloitte evaluation team is comprised of the following **core** members. **Additional expertise** is sourced from within Deloitte as needed.





# 5.1 Data collection timeline



# Data collection timeline

## March to July 2019

	Month:				
Stakeholder group:	March-19	April-19	May-19	June-19	July-19
<b>Latrobe Valley communities</b>	Community survey	Community survey	Community survey	Community survey	Community survey
<b>Organisations in the Zone</b>	Organisation survey	Organisation survey	Organisation survey	Organisation survey Deep dive	Organisation survey
<b>Assembly</b>	Work from LHA office	Work from LHA office	Work from LHA office	Work from LHA office Deep dive	Work from LHA office
<b>Advocate</b>	Catch-up	Catch-up	Catch-up	Catch-up Deep dive	Catch-up
<b>Secondary data</b>	Hazelwood Health Study Schools Study*		VicHealth Indicator Survey 2019 data (to be published Nov 2020)	Ambulatory Care and Sensitive Conditions 2018-19 (to be published Nov 2019)	Medicare Benefits Schedule 2018-2019 data
<b>Evaluation governance</b>	Reference Group H&W SteerCo CAG Pres. 4	Reference Group	Reference Group CAG	Reference Group H&W SteerCo	Reference Group CAG Presentation 5

**Key:**

Facebook	Other media	Community surveying	Workshops and forums	Existing meetings and events	Semi-structured interviews	Organisation survey	Community based visits	Observational ethnography	Case studies	Secondary data	Evaluation deliverable



# Data collection timeline

## August to December 2019

Month:

Stakeholder group:

**Latrobe Valley communities**

**Organisations in the Zone**

**Assembly**

**Advocate**

**Secondary data**

**Evaluation governance**

**August-19**

**September-19**

**October-19**

**November-19**

**December-19**

Stakeholder group:	August-19	September-19	October-19	November-19	December-19
<b>Latrobe Valley communities</b>	Community survey	Community survey	Community survey PUSH! Go to where they are	Community survey PUSH! Go to where they are	Community survey PUSH! Go to where they are
<b>Organisations in the Zone</b>	Organisation survey	Organisation survey	Organisation survey PUSH! Deep dive	Organisation survey PUSH! Deep dive	Organisation survey PUSH! Deep dive  SSIs
<b>Assembly</b>	Work from LHA office	Work from LHA office	Work from LHA office Deep dive	Work from LHA office Assembly survey  Req. data	Work from LHA office Assembly survey  Req. data  SSIs
<b>Advocate</b>	Catch-up	Catch-up	Catch-up Deep dive	Catch-up Req. data	Catch-up Deep dive
<b>Secondary data</b>	Hazelwood Health Study Community Perceptions*	Victorian Population Health Survey 2017 publication*			LGA Statistical Profile (to be published March 2022)
<b>Evaluation governance</b>	Reference Group	Reference Group H&W SteerCo  CAG	Reference Group	Reference Group CAG Presentation 6	Reference Group H&W SteerCo

Key:



Facebook



Other media



Community surveying



Workshops and forums



Existing meetings and events



Semi-structured interviews



Organisation survey



Community based visits



Observational ethnography



Case studies



Secondary data



Evaluation deliverable



# Data collection timeline

## January to March 2019

	Month:		
Stakeholder group:	January-20	February-20	March-20
<b>Latrobe Valley communities</b>	Community survey		
<b>Organisations in the Zone</b>	Organisation survey SSIs		
<b>Assembly</b>	Work from LHA office Req. data  SSIs	Work from LHA office	Work from LHA office
<b>Advocate</b>	Catch-up Req. data	Catch-up	Catch-up
<b>Secondary data</b>			
<b>Evaluation governance</b>	Reference Group H&W SteerCo  CAG	Reference Group	Reference Group H&W SteerCo Final report

**Key:**

Facebook	Other media	Community surveying	Workshops and forums	Existing meetings and events	Semi-structured interviews	Organisation survey	Community based visits	Observational ethnography	Case studies	Secondary data	Evaluation deliverable



# 6. Ethics



# Ethics

## The evaluation will continue to abide by the Australasian Evaluation Society (AES) principles and guidelines for the ethical conduct of evaluations

Australasian Evaluation Society (AES) principles and guidelines for the ethical conduct of evaluations considered particularly relevant for this evaluation have been listed below.

While the evaluation will abide by all AES principles and guidelines for the ethical conduct of evaluations, the historical and cultural context in Latrobe Valley communities requires that particular emphasis be given to the following principles and guidelines.

### Ethical principles

- An evaluation should be designed, conducted and reported in a manner that respects the rights, privacy, dignity and entitlements of those affected by and contributing to the evaluation.
- Reciprocity. Participants giving their information to researchers should reap some benefit. For example, the findings of the evaluation should be made available and where possible presented to participants, providing information of benefit to them and their wider community.
- The evaluation should be reported in such a way that audiences are provided with a fair and balanced response to the terms of reference for the evaluation. Many if not most evaluations will have multiple audiences, and the needs of each should be taken into account.

### Ethical guidelines

- **Consider implications of differences and inequalities:** Account should be taken in the design, the conduct and the reporting of evaluations of the potential effects of differences and inequalities in society related to race, age, gender, sexual orientation, physical or intellectual ability, religion, socio-economic or ethnic background. Particular regard should be given to any rights, protocols, treaties, legislative or legal guidelines which apply.
- **Obtain informed consent:** The informed consent of those directly providing information should be obtained, preferably in writing. They should be advised as to what information will be sought, how the information will be recorded and used, and the likely risks and benefits arising from their participation in the evaluation. In the case of minors and other dependents, informed consent must be sought from parents or guardians.
- **Maintain confidentiality:** During the course of the evaluation, the results and other findings should be held as confidential until released by the commissioner, and in accordance with any consent arrangements agreed with contributors. Confidentiality arrangements should extend to the storage and disposal of all information collected. Consent arrangements may include provision for release of information for purposes of formative evaluation and for purposes of validation of evaluation findings.
- **Report significant problems:** If the evaluator discovers evidence of an unexpected and significant problem with the program under evaluation or related matters, they should report this as soon as possible to the commissioner of the evaluation, unless this constitutes a breach of rights for those concerned. Where the evaluator discovers evidence of significant problems with the conduct of the evaluation by other evaluators or by the commissioner of the evaluation, this should be referred to the Board of the AES.



# Ethics

The evaluation will continue to abide by the Australasian Evaluation Society (AES) principles and guidelines for the ethical conduct of evaluations

## Ethical guidelines (continued)

- **Anticipate trauma:** Evaluations involving interviews or focus groups on sensitive topics such as crime, sexual violence and family dysfunction run the risk of awakening or re-awakening trauma in participants and sometimes in evaluators. Areas of potential trauma should be avoided where possible; where they must be addressed, mechanisms need to be put in place to ensure counselling and/or support for participants and evaluators is available if required. Protocols for terminating interviews if distress occurs should be built into the evaluation design.
- **Report clearly and simply:** The results of the evaluation should be presented as clearly and simply as accuracy allows so that clients and other stakeholders can easily understand the evaluation process and results. Communications that are tailored to a given stakeholder should include all important results, and also be shaped to respect the communication styles of the stakeholders. The reciprocity principle requires that evaluation findings be made available to evaluands; relevant language, literacy and cultural communication issues should be taken into account.
- **Report fairly, accurately and comprehensively:** Oral and written evaluation reports should be direct, comprehensive and honest in the disclosure of findings and the limitations of the evaluation. Reports should interpret and present evidence and conclusions in a fair manner, and include sufficient details of their methodology and findings to substantiate their conclusions. Minority perspectives and experiences should be identified and reported fairly.





# 7. Reporting and dissemination

Please refer to the [DHHS website](#) or [evaluation Facebook page](#) for more detail regarding previous reports

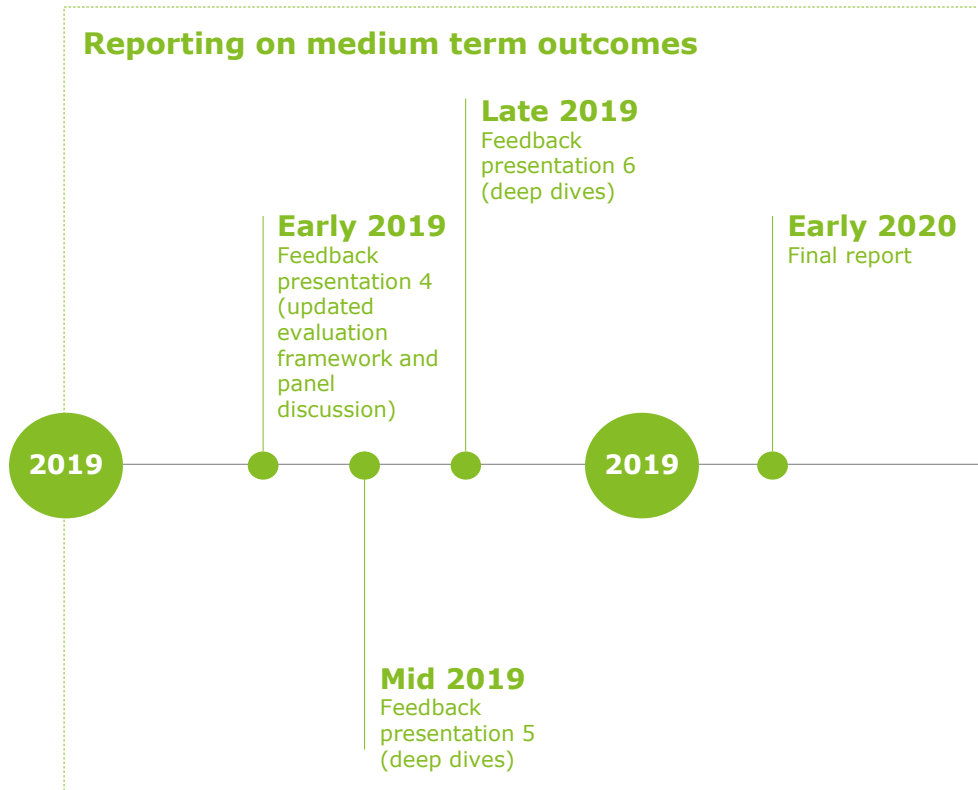


# Next steps

The evaluation has provided opportunities for Latrobe Valley communities to influence the development of the Latrobe Health Initiatives since mid-2017, and will continue to do so until early 2019

## Evaluation reporting

Since commencing in May 2017, the evaluation team has worked with a large number of Latrobe Valley community members to co-design the [evaluation framework](#) and provide feedback on the initiatives, firstly via the [first evaluation presentation](#), then the [interim evaluation report](#), and again via the recently published [evaluation presentation](#). The evaluation reporting timeline is shown below.





# Final report

This report will focus on the appropriateness, effectiveness and sustainability of the Latrobe Health Initiatives, an indicative table of contents is provided below

- Snapshot
- Executive summary
- Contents
- Glossary
- 1. Introduction
  - i. Latrobe Health Initiatives
    - a) Description
    - b) Activities to date
  - ii. Evaluation of the Latrobe Health Innovation Zone, Latrobe Health Assembly and Health Advocate
    - a) Description
    - b) Methodology
    - c) This report
- 2. Current state of health and wellbeing in Latrobe Valley
  - i. Overview
  - ii. Health and lifestyle
  - iii. Community connectedness and participation
  - iv. Health service access and design
- 3. Latrobe Health Initiatives
  - i. Justification
  - ii. Governance and working together
  - iii. Innovation
  - iv. Evidence
  - v. Awareness and understanding
  - vi. Engagement and empowerment
  - vii. Timeliness
  - viii. Community capacity
  - ix. Community needs
  - x. Health and wellbeing
  - xi. Demand
- 5. Latrobe Health Innovation Zone
  - i. Celebrating success
  - ii. Opportunities for improvement
  - iii. Summary of the Zone's progress toward achieving the short and medium term outcomes identified by Latrobe Valley communities
- 6. Latrobe Health Assembly
  - i. Strategy and prioritisation
  - ii. Operations
  - iii. Celebrating success
  - iv. Opportunities for improvement
  - v. Summary of the Assembly's progress toward achieving the short and medium term outcomes identified by Latrobe Valley communities
- 7. Latrobe Health Advocate
  - i. Celebrating success
  - ii. Opportunities for improvement
  - iii. Summary of the Advocate's progress toward achieving the short and medium term outcomes identified by Latrobe Valley communities
- 8. Conclusion
  - i. Implications for future evaluation and monitoring
  - ii. Next steps
- 9. Appendix
  - i. Primary data
  - ii. Secondary data
  - iii. References



# 8. Data collection tools



# Proposed data collection tools

Broad and targeted primary data will be collected to inform the evaluation

Proposed broad and targeted data collection tools have been developed via detailed mapping of survey and semi-structured interview questions, to evaluation questions and outcomes.

## Broad data collection tools

### Community survey

- **Tool:** [www.commuitysurvey.deloitte.com.au](http://www.commuitysurvey.deloitte.com.au)
- **Target audience:** The target audience for this survey is members of Latrobe Valley communities, recognising that:
  - People travel inside, and outside, of the Zone for work and to access services, however, these people may still have a stake in health and wellbeing in Latrobe Valley
  - The health and wellbeing of Latrobe Valley communities may be influenced by programs, services and other factors located outside of the Zone.
- **Sampling method:** A mix of convenience and snowball sampling will be used, supported by broad advertising and targeted communications.

## Targeted data collection tools

- Targeted survey (Assembly members)
- Semi-structured interview guides
- Initiative generated data and document requests.

## Targeted data collection tools (continued)

### Targeted survey (organisations)

- **Tool:** [www.organisationsurvey.deloitte.com.au](http://www.organisationsurvey.deloitte.com.au)
- **Target audience:**
  - **Providers of goods or services that can influence health and wellbeing** – e.g. education provider, local business, government department or agency, community group or club, library.
  - **Health and wellbeing service providers** – e.g. doctor, dentist, pharmacist, aged cared provider, allied health provider, chiropractor, counsellor, dietician, disability service provider, drug/alcohol addiction counsellor, emergency accommodation provider, family planning provider, massage therapy provider, mental health service provider, naturopath, occupational therapist, optometrist, paediatrician, physiotherapy, podiatrist, psychiatrist and psychologist.
  - **Physical activity providers** – e.g. gym, health and fitness centre, sport club, personal trainer.
  - **Food providers** – e.g. café, restaurant, local food mart, supermarket, health food store, fast food store.
- **Sampling method:** Stratified sampling of the above listed target groups was completed. This will be supported by snowball sampling via a referral mechanism. A data scraping exercise of publicly available directories was performed to collect contact details of organisations falling within the defined target groups. These directories include the Yellow Pages, Human Services Directory and Latrobe City Council Community Group Directory.



# Proposed data collection tools

Broad and targeted primary data will be collected to inform the evaluation

## Targeted data collection tools (continued)

### Assembly self-evaluation form

- Page 1:

## Latrobe Health Assembly

### Self-Evaluation

#### Assembly member details

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Role on the Assembly: \_\_\_\_\_  
Assembly member / Assembly Board member / Backbone staff member

#### Project details

Project name: \_\_\_\_\_

Working group: \_\_\_\_\_

Date project commenced: \_\_\_\_\_

Date project completed  
(if relevant): \_\_\_\_\_

Please send the completed form to [LHIZEval@deloitte.au](mailto:LHIZEval@deloitte.au)  
Don't forget to attach photos!

- Page 2:

#### Evaluation questions

1. Is this project innovative? Very innovative / Somewhat innovative / Neutral / Not innovative

How is this project innovative?

2. What is the goal of this project?

Was this goal met? Yes / No

Or,  
Is this goal on-track to being met? Yes / No

Please describe how the project goal has been, or is on-track to being, met.

3. Are you collecting any data on Yes / No the project?  
i.e. number of participants, participant satisfaction.

Please describe the data collected.

And/or, please attach this data when you return this form.

4. How is the project communicated/advertised to Latrobe Valley communities?



# Proposed data collection tools

Broad and targeted primary data will be collected to inform the evaluation

## Assembly self-evaluation form (continued)

- Page 3:

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5. To what extent do you agree with the following statements?

Latrobe Valley communities knew about the project  
Strongly agree / Agree / Neutral / Disagree / Strongly disagree

Latrobe Valley communities understood the purpose of the project  
Strongly agree / Agree / Neutral / Disagree / Strongly disagree

People who participated in the project would have said good things about it to their friends and family  
Strongly agree / Agree / Neutral / Disagree / Strongly disagree

---

6. Do you think this project should continue? Yes / No

Please describe why you think the project should or shouldn't continue.

---

7. If this project is continuing, or was to continue, would you change anything? Yes / No

Please describe what you would change.

---

**Thank you!**



# Appendix A: Models of systems change

The initiatives' objectives relate to fundamental change at both a community and system level. The following models outline how change occurs at these levels. The evaluation is cognisant of these and they will continue to inform the evaluation process.





# A.1: Collective impact

The Collective Impact model outlines conditions that will support the initiatives in achieving systems change



# Collective impact

Alignment of objectives and clear responsibilities is important to the success of the initiatives

## The initiatives need to work together to create meaningful change in Latrobe Valley.

One initiative, alone, can improve health and wellbeing in Latrobe Valley in a systemic and sustainable way.

It is necessary for the initiatives to have clearly-defined roles and a shared understanding of objectives in creating systemic change.

The collective impact model outlines essential conditions the initiatives work together, rather than in isolation.

## The Collective Impact Model

- **Common agenda** – the initiatives should have a shared understanding of the issues at hand and a shared vision for change
- **Shared measurement** – there should be an agreed method of measuring and reporting success. Collecting and sharing evidence of success and challenges supports shared learning
- **Mutually reinforcing activities** – the initiatives should have coordinated and complementary efforts that fit under an overarching objective
- **Continuous communication** – shared language around change is necessary to conveying consistency and cohesion to stakeholders. Regular communication and experience working together will foster trust between the initiatives
- **Backbone support** – a separate organisation can provide the infrastructure for collaboration and adaptability to changing needs. Providing staff with a skillset to organise, influence and coordinate, a backbone team can:
  - Focus stakeholder attention
  - Create a sense of urgency to stimulate coordinated action
  - Apply pressure to stakeholders without being intimidating or overwhelming
  - Identify and communication opportunities and challenges
  - Mediate conflict among stakeholders.

While the initiatives have separate tasks in improving health and wellbeing in Latrobe Valley, collective action can support coordination to avoid duplication and lost opportunities for learning.



# **A.2: Latrobe Health Initiatives and systems change**

The initiatives are designed to mobilise Latrobe Valley communities in creating systemic change



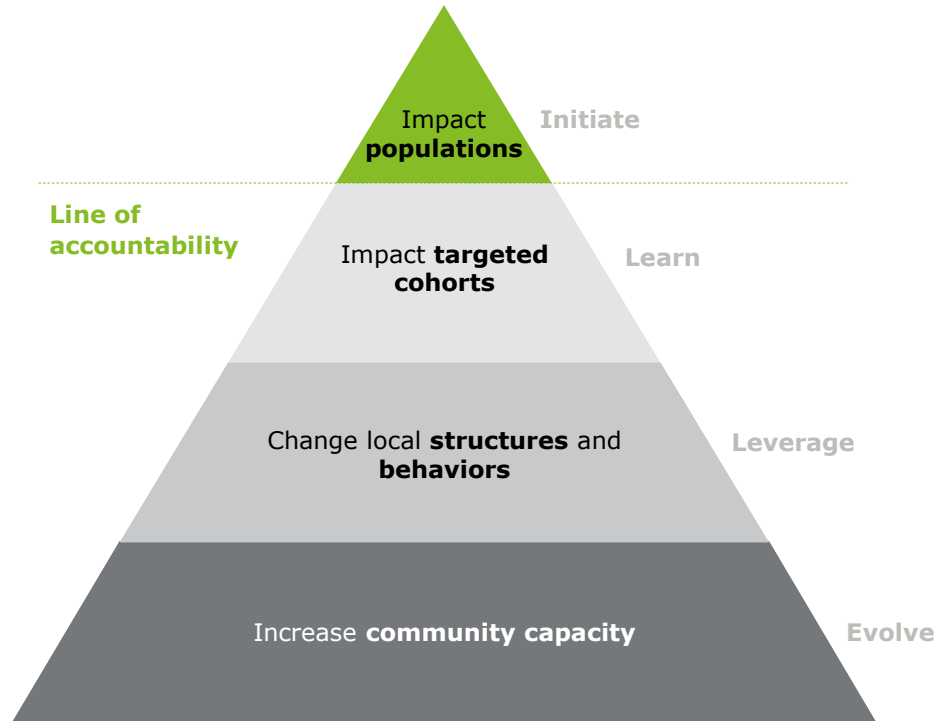
# Latrobe Health Initiatives and systems change

The initiatives are designed to impact structures and supporting behaviours

## The Iceberg of Systems Change model

The Iceberg of Systems Change model illustrates how a process of learning and leveraging skillsets can increase a community's ability to respond to a situation.

Beyond the initiation stage, stakeholders grow through learning together and challenging structures that support a situation, and behaviours that hold these structures in place.



## Breaking the model down and applying it to Latrobe Valley

The Iceberg of Systems Change model helps to break down the process that will support the initiatives in achieving their objectives.

**Initiate** – the initiatives **impact** Latrobe Valley communities

**Learn** – Latrobe Valley communities and stakeholders to **come together to explore** patterns in health outcomes. Specifically, what structures and behaviours support poor health outcomes in Latrobe Valley

**Leverage** – skills and networks in Latrobe Valley are mobilised to confront processes, relationships, organisations, and local conditions that underpin poor health and wellbeing outcomes

**Evolve** – Latrobe Valley communities and stakeholders form new and stronger relationships, **develop** local capacity to critically analyse, advocate for local priorities, and shape how services and Latrobe Valley community members can better support health and wellbeing.



# **A.3: Pathway to community empowerment**

Before Latrobe Valley community members are engaged and empowered, they must first be aware of, and understand, the initiatives



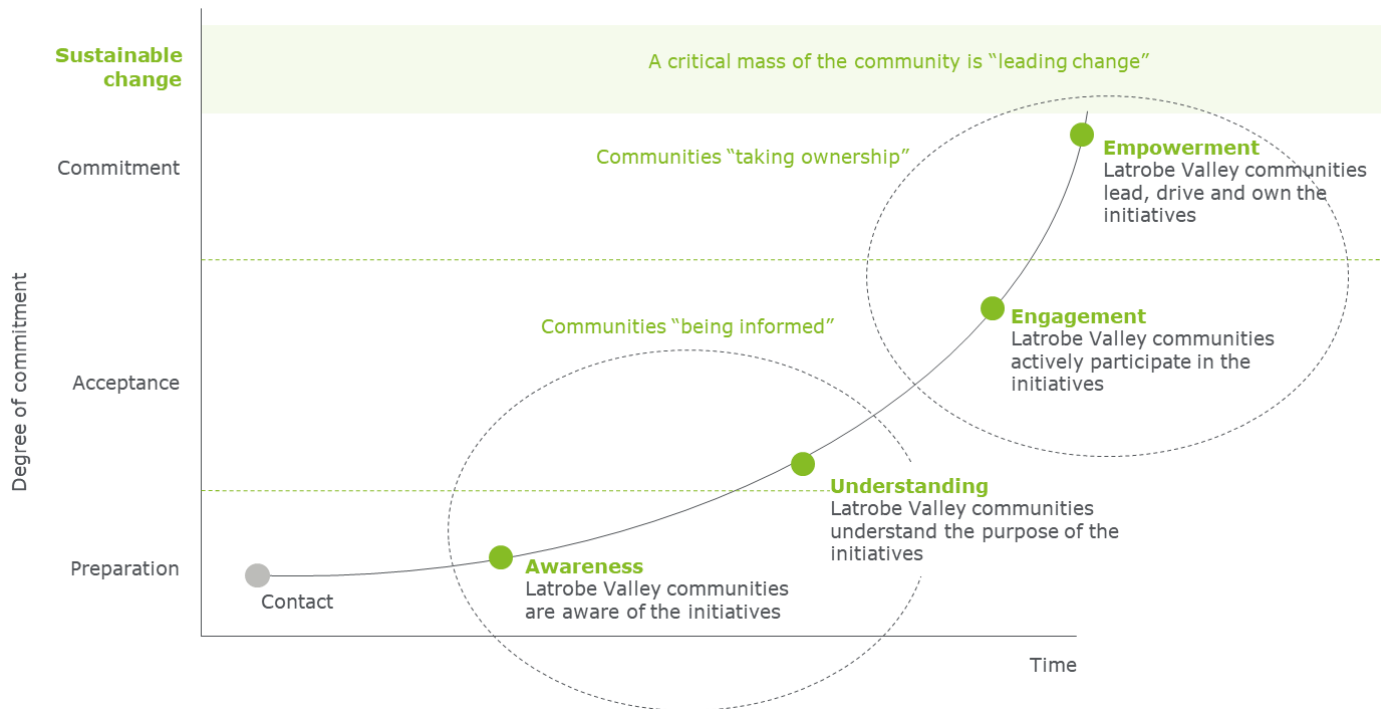
# Pathway to community empowerment

Community empowerment that drives sustainable change is built on awareness, understanding and engagement

## Empowering communities is a process that requires time, trust and buy-in

The initiatives have the potential to empower Latrobe Valley communities and create widespread positive change in the area. However, this requires an understanding of how to drive systemic change, and how to do it well.

Becoming aware of the initiatives is the first step toward community empowerment. Understanding the purpose of the initiatives is the next step. Once there is community understanding, the opportunity for change represented by the initiatives can be realised through engagement and empowerment.





# **A.4: Water of Systems Change model in practice**

The Advocate has employed a systems change model to inform the way she approaches health and wellbeing in Latrobe Valley



# Water of Systems Change model in practice

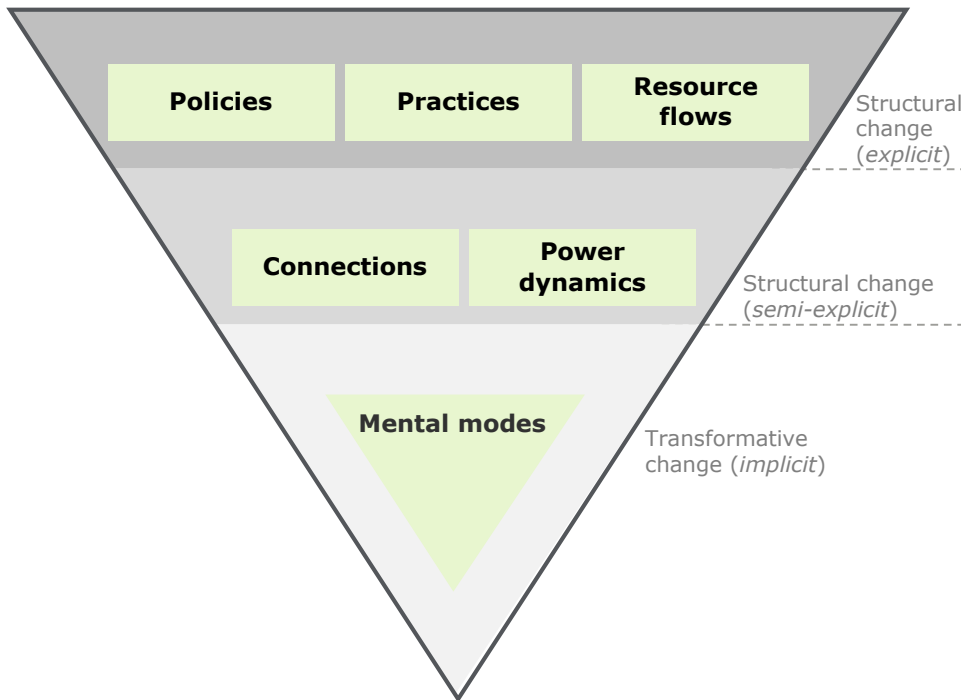
The Advocate is using the Water of Systems Change model to address structures holding problems in place in Latrobe Valley

## The Water of System's Change model

*Systems change is about shifting the conditions that are holding the problem in place*

(Kania et al., 2018)

### The Six Conditions of System Change



The Water of Systems Change is an action model that outlines the conditions underpinning systems issues. The conditions are categorised:

- **Structural (explicit)** - high-level practices and regulations
- **Structural (semi-explicit)** – unequal stakeholder relationships
- **Transformative** – behaviours and values.

## The Advocate's application of the Water of System's Change model

The Advocate will focus on the following conditions to improve health and wellbeing in Latrobe Valley:

- **Policies:** government, organisation, and service rules, regulations and priorities
- **Practices:** activities, guidelines and shared habits within government, organisations, services and Latrobe Valley communities
- **Resource flows:** how money, people, knowledge, information and assets are distributed in Latrobe Valley
- **Relationships and connections:** connections among stakeholders
- **Power dynamics:** the distribution of decision-making power and influence among stakeholders and Latrobe Valley communities
- **Mental models:** deeply held beliefs and assumptions that influence how stakeholders and Latrobe Valley organisations think and behave.





# Appendix B: Initiative accountability in impact areas



# Initiative accountability

## The initiatives have discrete tasks in addressing the impact areas

The **short term** is the listening and establishing stage. Therefore, in year 1 we are looking for *community consultation*.  
 The **medium term** is the forming and doing stage. Therefore, in years 2 and 3 we are looking for the *immediate effects of new ways of working*.  
 The **long term** is the meaningful contribution stage. Therefore, in year 4 and 5 we are looking for *directly-attributable effects of activities*.

Impact Area:	Zone	Assembly	Advocate
<b>(IA1) Community pride</b>	<p><b>Short:</b> The Charter is publicly endorsed by organisations within the Zone</p> <p><b>Medium:</b> The Zone is recognised as a place for innovative ways of working and health leadership</p> <p><b>Long:</b> Latrobe Valley is seen as a healthy, collaborative, and innovative city</p>	<p><b>Short:</b> Members' professional and social networks are mobilised to promote activities</p> <p><b>Medium:</b> Board Member organisations collaborate to address community needs</p> <p><b>Long:</b> New ways of working create positive perceptions of Latrobe Valley</p>	<p><b>Short:</b> Health and wellbeing issues and goals are identified with community</p> <p><b>Medium:</b> Latrobe Valley communities needs are understood by organisations, services, and policy makers</p> <p><b>Long:</b> Organisations collectively prioritise the health and wellbeing of Latrobe Valley communities</p>
<b>(IA2) Community connectedness and participation</b>	<p><b>Short:</b> Latrobe Valley communities are receptive to programs within the Zone</p> <p><b>Medium:</b> Latrobe Valley communities participate in programs, developing strong social connections</p> <p><b>Long:</b> Latrobe Valley communities take ownership of health and wellbeing outcomes and have capacity to influence change</p>	<p><b>Short:</b> Latrobe Valley communities come together to voice and prioritise issues</p> <p><b>Medium:</b> Activities reflect an understanding of local issues and ability to bring people together in solving them</p> <p><b>Long:</b> Programs are led by Latrobe Valley communities, who have strengthened resilience</p>	<p><b>Short:</b> Latrobe Valley communities are included in discussing local issues and opportunities</p> <p><b>Medium:</b> Latrobe Valley communities feel heard, respected, understood, and enabled to advocate for health and wellbeing</p> <p><b>Long:</b> Community voice is embedded in decision making, locally</p>
<b>(IA3) Improved health service access and design</b>	<p><b>Short:</b> Health and wellbeing services identify community needs</p> <p><b>Medium:</b> Service providers co-design innovative ways to respond to community health and wellbeing needs, including service coordination and integration</p> <p><b>Long:</b> Latrobe Valley is recognised as a place of innovative approaches to supporting community health and wellbeing</p>	<p><b>Short:</b> Gaps in services and preventive health are identified</p> <p><b>Medium:</b> Accessibility and appropriateness of services and projects are improved</p> <p><b>Long:</b> Latrobe Valley communities can access affordable health and wellbeing services</p>	<p><b>Short:</b> Latrobe Valley communities needs are communicated to key stakeholders</p> <p><b>Medium:</b> Funding supports improved access to local, appropriate, affordable services</p> <p><b>Long:</b> Health and wellbeing service design responds to community needs</p>
<b>(IA4) Improved health and lifestyle</b>	<p><b>Short:</b> Health promotion activities within the Zone are accepted</p> <p><b>Medium:</b> Health promotion activities influence positive change to health-related behaviour in the Zone</p> <p><b>Long:</b> Latrobe Valley communities live healthier</p>	<p><b>Short:</b> Gaps in health literacy, nutrition and physical activity shape health promotion campaigns</p> <p><b>Medium:</b> Latrobe Valley communities respond positively to health promotion</p> <p><b>Long:</b> Latrobe Valley communities have improved health outcomes</p>	



# Appendix C: Indicator framework



# C.1 Latrobe Health Innovation Zone



# Indicator framework

## Latrobe Health Innovation Zone

**SO1: Sectors within Latrobe Valley are aware the region is a designated Zone, including sectors not traditionally associated with health such as small business and education**

### Impact Area: 1

Process indicators	Data source	Data collection timing
The geographic location of the Zone is communicated to stakeholders	Document review: initiative generated publications	Request November
Developmental indicators		
Number of stakeholders who have heard of the Zone	Organisation survey (Q13)	Ongoing (Push Oct-Dec)
Number of stakeholders who understand the purpose of the Zone	Organisation survey (Q14) Existing meetings and events Community based visits	Ongoing (Push Oct-Dec) Oct-Dec Nov-Dec
Outcome indicators		
Number of stakeholders who have heard of the Zone	Organisation survey (Q13)	Ongoing (Push Oct-Dec)
Number of stakeholders who understand the purpose of the Zone	Organisation survey (Q14) Existing meetings and events Community based visits	Ongoing (Push Oct-Dec) Oct-Dec Nov-Dec

### Evaluation Themes

EQ6 – Opportunities for improvement

EQ7 – Awareness and understanding



# Indicator framework

## Latrobe Health Innovation Zone

### SO2: Latrobe Valley communities are aware of and understand the role of the Zone

#### Impact Area: 1

Process indicators	Data source	Data collection timing
The purpose of the Zone is clearly communicated to Latrobe Valley communities	Document review: initiative generated publications	Request November
Developmental indicators		
Number of Latrobe Valley communities who have heard of the Zone	Community survey (Q25b) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley communities who are aware of the 'We ' Are Latrobe' campaign	Community based visits	Nov-Dec
Number of Latrobe Valley communities who understand the purpose of the Zone	Community survey (Q26b) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Outcome indicators		
Number of Latrobe Valley communities who have heard of the Zone	Community survey (Q25b) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley communities who understand the purpose of the Zone	Community survey (Q26b) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec

#### Evaluation Themes

EQ6 – Opportunities for improvement

EQ7 – Awareness and understanding



# Indicator framework

## Latrobe Health Innovation Zone

### SO3: Organisations within the Zone publicly endorse the Charter

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of stakeholders who have heard of the Charter	Organisation survey (Q17)	Ongoing (Push Oct-Dec)
Stakeholders understand the purpose of the Charter	Organisation survey (Q19)	Ongoing (Push Oct-Dec)
Stakeholders contributed to the development of the Charter	Organisation survey (Q19)	Ongoing (Push Oct-Dec)
Stakeholders feel ownership of the Charter	Organisation survey (Q19)	Ongoing (Push Oct-Dec)
The Charter describes stakeholder aspirations for the Zone	Organisation survey (Q19)	Ongoing (Push Oct-Dec)
Developmental indicators		
Number of stakeholders who are referencing the Charter in relation to improving or changing the way they work	Initiative generated data SSIs	Request November Dec-Jan
Outcome indicators		
Number of stakeholder strategic plans updated to align with Charter values and principles	Initiative generated data SSIs	Request November Dec-Jan

#### Evaluation Themes

EQ6 – Opportunities for improvement

EQ7 – Awareness and understanding

EQ9 - Timeliness

EQ13 - Demand



# Indicator framework

## Latrobe Health Innovation Zone

### SO4: Latrobe Valley communities are receptive of programs within the Zone

#### Impact Area: 2

Process indicators	Data source	Data collection timing
The purpose of programs within the Zone is clearly communicated to Latrobe Valley communities	Facebook and other media Document review: initiative generated publications	June, Oct, Dec Request November
Programs are co-designed with Latrobe Valley communities	Document review: initiative generated publications, PIDs Community based visits Existing meetings and events	Request November Nov-Dec Oct-Dec
Developmental indicators		
Number of Latrobe Valley community members who think the Zone is a good idea	Community survey (Q27)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who think the Zone can improve health and wellbeing in the Latrobe Valley	Community survey (Q28)	Ongoing (Push Oct-Dec)
Latrobe Valley community members indicate that the Charter describes their aspirations for the Zone	Community survey (Q35)	Ongoing (Push Oct-Dec)
Outcome indicators		
Number of Latrobe Valley community members who think the Zone is a good idea	Community survey (Q27)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who think the Zone can improve health and wellbeing in the Latrobe Valley	Community survey (Q28)	Ongoing (Push Oct-Dec)
Latrobe Valley community members indicate that the Charter describes their aspirations for the Zone	Community survey (Q35)	Ongoing (Push Oct-Dec)

#### Evaluation Themes

EQ5 – Celebrating success

EQ6 – Opportunities for improvement

EQ8 – Engagement and empowerment

EQ12 – Health and wellbeing





# Indicator framework

## Latrobe Health Innovation Zone

### S05: Health and wellbeing services within the Zone identify community health and wellbeing needs

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Service providers provide opportunities for Latrobe Valley community members to voice communicate health and wellbeing needs	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Developmental indicators		
Service providers include Latrobe Valley community members accessing their service in the design, implementation and evaluation of their service	Organisation survey (Q35)	Ongoing (Push Oct-Dec)
Service providers use health literacy strategies in interpersonal communications and confirm understanding at all points of contact	Organisation survey (Q35)	Ongoing (Push Oct-Dec)
Existing and emerging evidence is used to identify community health and wellbeing issues and needs	Document review: meeting minutes Case studies SSIs	Request in November June, Oct, Dec Dec-Jan
Service providers working in partnership with community organisations/groups	Organisation survey (Q11)	Ongoing (Push Oct-Dec)
Outcome indicators		
Service providers report their identified community health and wellbeing needs to Latrobe Valley communities	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Service providers create a feedback loop, allowing Latrobe Valley communities to provide input on identified community health and wellbeing need, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec

#### Evaluation Themes





# Indicator framework

## Latrobe Health Innovation Zone

### SO6: Latrobe Valley communities are receptive of the Zone's health promotion activities

#### Impact Area: 4

Process indicators	Data source	Data collection timing
The purpose of health promotion activities is clearly communicated to Latrobe Valley communities	Facebook and other media Document review: initiative generated publications	June, Oct, Dec Request November
Health promotion activities are evidence-based and relevant to Latrobe Valley	Document review: initiative generated publications, PIDs, HHS findings (Adult Survey, Psychological Impacts, Community Wellbeing reports) Community based visits Existing meetings and events	Request November  Nov-Dec Oct-Dec
Developmental indicators		
Latrobe Valley community members indicate that health promotion activities are relevant to Latrobe Valley and Latrobe Valley communities health and wellbeing needs	Community based visits	Nov-Dec
Outcome indicators		
Number of Latrobe Valley community members who think health promotion activities are a good idea	Community based visits	Nov-Dec
Latrobe Valley community members who think health promotion activities can improve health and wellbeing in the Latrobe Valley	Community based visits	Nov-Dec

#### Evaluation Themes



# Indicator framework

## Latrobe Health Innovation Zone



### MO1: The Zone is identified as a region for health leadership in Latrobe Valley.

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of stakeholders who understand the purpose of the Zone	Organisation survey (Q14) Existing meetings and events Community based visits	Ongoing (Push Oct-Dec) Oct-Dec Nov-Dec
Number of Latrobe Valley communities who understand the purpose of the Zone	Community survey (Q26b) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Developmental indicators		
Number of Latrobe Valley community members who understand how the Charter is designed to support improved health and wellbeing outcomes	Community based visits	Nov-Dec
Number of Latrobe Valley community members who respond positively to the idea of living in a region for trying new ways of working to support health and wellbeing	Community based visits	Nov-Dec
Organisations understand how the Charter is designed to support improved health and wellbeing outcomes	SSIs	Dec-Jan
Number of organisations who respond positively to the idea of operating in a region for trying new ways of working to support health and wellbeing	SSIs	Dec-Jan
Outcome indicators		
Number of Latrobe Valley community members who identify living in a region that trying new ways of working to support health and wellbeing	Community based visits	Nov-Dec
Number of Latrobe Valley community members who identify living in a region that trying new ways of working to support health and wellbeing	SSIs	Dec-Jan

#### Evaluation Themes

EQ1 - Justification

EQ5 – Celebrating success

EQ7 – Awareness and understanding

EQ12 – Health and wellbeing



# Indicator framework

## Latrobe Health Innovation Zone

### MO2: Organisations adopt the values and principles outlined in the Charter

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Stakeholders feel ownership of the Charter	Organisation survey (Q21)	Ongoing (Push Oct-Dec)
The Charter describes stakeholder aspirations for the Zone	Organisation survey (Q22)	Ongoing (Push Oct-Dec)
Developmental indicators		
Number of stakeholder strategic plans updated to align with Charter values and principles	Initiative generated data SSIs	Request November Dec-Jan
Outcome indicators		
Organisations strategic plans prioritise working in innovative ways to support health and wellbeing in the Zone	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans prioritise collaborating to support health and wellbeing in the Zone	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans prioritise highlight the importance of being inclusive of, and accessible to, Latrobe Valley communities	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans support equality in Latrobe Valley	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans are codesigned with Latrobe Valley communities	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans highlight the importance of communicating with Latrobe Valley communities in plain language	Initiative generated data SSIs	Request November Dec-Jan
Organisations strategic plans highlight the importance of being fair and transparent and following through on commitments to Latrobe Valley communities	Initiative generated data SSIs	Request November Dec-Jan

#### Evaluation Themes





# Indicator framework

## Latrobe Health Innovation Zone

### MO3: Organisations co-brand innovative ways of working with the Zone's branding

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Organisations work in innovative ways to support health and wellbeing in the Zone	Initiative generated data SSIs	Request November Dec-Jan
Number of stakeholder strategic plans updated to align with Charter values and principles	Initiative generated data SSIs	Request November Dec-Jan
Developmental indicators		
Organisations want to be affiliated with the Zone	SSIs	Dec-Jan
Organisation are aware of Zone branding	SSIs	Dec-Jan
Outcome indicators		
Number of organisations using Zone branding on innovative ways of working	Initiative generated data	





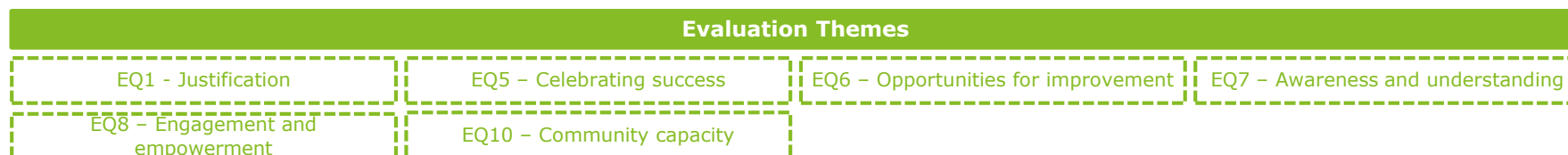
# Indicator framework

## Latrobe Health Innovation Zone

### MO4: Latrobe Valley communities participate in funded initiatives and programs within the Zone

#### Impact Area: 2

Process indicators	Data source	Data collection timing
Number of community-led programs established in Latrobe Valley	Initiative generated data	Request November
Number of ways of participating communicated to Latrobe Valley communities	Facebook and other media Document review: initiative generated publications	June, Oct, Dec Request November
Developmental indicators		
Number of Latrobe Valley community members participating in programs	Existing meetings and events SSIs	Oct-Dec Dec-Jan
Number of vulnerable community members participating in programs	Community based visits	Nov-Dec
Latrobe Valley communities are participating in programs	Initiative generated data	Request November
Outcome indicators		
Number of Latrobe Valley community members participating in programs	Existing meetings and events SSIs	Oct-Dec Dec-Jan
Number of vulnerable community members participating in programs	Community based visits	Nov-Dec
Latrobe Valley communities are participating in programs	Initiative generated data	Request November



# Indicator framework

## Latrobe Health Innovation Zone



### MO5: Latrobe Valley communities develop new and stronger social connections

#### Impact Area: 2

Process indicators	Data source	Data collection timing
Number of supported socialising opportunities provided in the Zone	Initiative generated data	Request November
Accessibility of supported socialising opportunities provided	Community based visits SSIs	Nov-Dec Dec-Jan
Developmental indicators		
Latrobe Valley community members feel that they can get help from their friends when they need it	Community survey (Q12)	Ongoing (Push Oct-Dec)
Latrobe Valley community members feel they can ask a neighbour for help	Community survey (Q12)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who identify that connecting with community and/or participating in community activities is important for health	Community survey (Q14)	Ongoing (Push Oct-Dec)
Outcome indicators	Data source	Data collection timing
Latrobe Valley community members are satisfied with personal relationships	Community survey (Q10)	Ongoing (Push Oct-Dec)
Latrobe Valley community members feel part of their community	Community survey (Q10)	Ongoing (Push Oct-Dec)
Latrobe Valley community members feel valued by society	Community survey (Q10)	Ongoing (Push Oct-Dec)
Latrobe Valley community members agree that by helping others, you help yourself in the long run	Community survey (Q12)	Ongoing (Push Oct-Dec)
Latrobe Valley community members feel that they can get help from their friends when they need it	Community survey (Q12)	Ongoing (Push Oct-Dec)
Latrobe Valley community members feel they can ask a neighbour for help	Community survey (Q12)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who identify that connecting with community and/or participating in community activities is important for health	Community survey (Q14)	Ongoing (Push Oct-Dec)

#### Evaluation Themes

EQ1 - Justification

EQ5 - Celebrating success

EQ6 - Opportunities for improvement

EQ10 - Community capacity



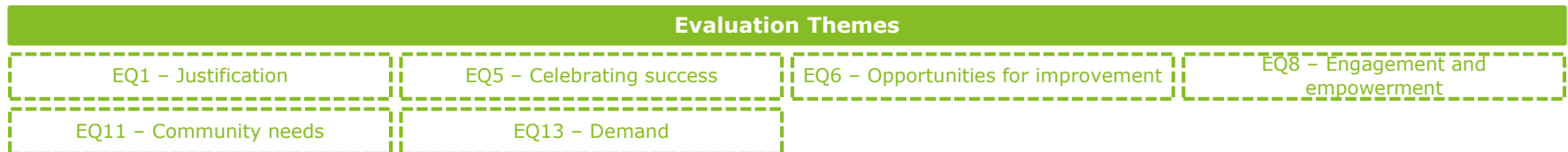
# Indicator framework

## Latrobe Health Innovation Zone

### MO6: Latrobe Valley communities feel ownership of the Charter for the Zone

#### Impact Area: 2

Process indicators	Data source	Data collection timing
The Charter describes Latrobe Valley community members' aspirations for the Zone	Organisation survey (Q38)	Ongoing (Push Oct-Dec)
Developmental indicators		
The Charter describes Latrobe Valley community members' aspirations for the Zone	Organisation survey (Q38)	Ongoing (Push Oct-Dec)
Outcome indicators		
Latrobe Valley community members feel ownership of the Charter	Community survey (Q37)	Ongoing (Push Oct-Dec)







# Indicator framework

## Latrobe Health Innovation Zone

### MO7: Health and wellbeing services in the Zone work together in new ways

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Number of service providers who identify ways of collaborating	SSIs	Dec-Jan
Number of service providers who have partnered with others	Organisation survey (Q11)	Ongoing (Push Oct-Dec)
Developmental indicators		
Number of service providers who have partnered with others	Organisation survey (Q11)	Ongoing (Push Oct-Dec)
Number of service providers collaborating with others	SSIs	Dec-Jan
Willingness of service providers to collaborate with others	SSIs	Dec-Jan
Outcome indicators		
Services are integrated in Latrobe Valley	SSIs Initiative generated data Organisation survey	Dec-Jan Request November Ongoing (Push Oct-Dec)
Number of service providers collaborating with others	Organisation survey	Ongoing (Push Oct-Dec)





# Indicator framework

## Latrobe Health Innovation Zone

### MO8: Health and wellbeing service providers work to co-design innovative responses to identified community health and wellbeing needs

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Service providers create a feedback loop, allowing Latrobe Valley communities to provide input on identified community health and wellbeing needs, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Service providers review service provision against existing and emerging evidence	SSIs	Nov-Dec
Service providers provide opportunities for Latrobe Valley community members to communicate gaps in service provision	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Number of service providers collaborating with others to identify opportunities to improve integration and reduce duplication of efforts	SSIs	Nov-Dec
Developmental indicators		
Governance structures for health and wellbeing services reflect the values and priorities of the Charter	SSIs	Nov-Dec
Outcome indicators		
Service providers create a feedback loop, allowing Latrobe Valley communities to provide input on identified community health and wellbeing needs, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Ease of access to specific services in Latrobe Valley	Community survey (Q16)	Ongoing (Push Oct-Dec)
Specific services meet Latrobe Valley community member needs	Community survey (Q16)	Ongoing (Push Oct-Dec)

#### Evaluation Themes





# Indicator framework

## Latrobe Health Innovation Zone

**MO9: The Zone is a focal point for the coordination and integration of health and wellbeing services, including service providers not traditionally associated with health such as employment, education and justice**

### Impact Area: 3

Process indicators	Data source	Data collection timing
Coordination and integration of services are encouraged within the Zone	Document review: initiative generated publications Facebook and other media Organisation survey SSIs	Request November June, Oct, Dec Ongoing (Push Oct-Dec) Dec-Jan
Coordination and integration of services are supported within the Zone	SSIs	Dec-Jan
Developmental indicators		
Number of stakeholders who identify ways of coordinating and integrating efforts within the Zone	SSIs	Dec-Jan
Number of coordination and integration efforts pursued in the Zone	Initiative generated data SSIs	Request November Dec-Jan
Stakeholders prioritise coordinating and integrating services, where appropriate, to meet Latrobe Valley communities needs	SSIs	Dec-Jan
Outcome indicators		
Number of stakeholders who can identify ways of coordinating and integrating efforts within the Zone	SSIs	Dec-Jan
Number of coordination and integration efforts established in the Zone	Initiative generated data	Request November
Stakeholders identify the Zone as supporting coordination and integration	SSIs Community based visits	Dec-Jan Nov-Dec

### Evaluation Themes

EQ1 – Justification

EQ2 – Innovation

EQ6 – Opportunities for improvement

EQ9 – Timeliness



# Indicator framework

## Latrobe Health Innovation Zone

**MO10: Latrobe Valley communities are influenced by funded initiatives and programs within the Zone to make positive changes to their health-related behaviours**

### Impact Area: 4

Process indicators	Data source	Data collection timing
Stakeholders report that being in the Zone influences health and wellbeing-related decisions	Community based visits	Nov-Dec
Number of ways Latrobe Valley communities identify the Zone influencing decisions	Community based visits	Nov-Dec
Developmental indicators		
Latrobe Valley community members indicate changes to their own health-related behaviour	Community based visits	Nov-Dec
Number of Latrobe Valley community members who encourage others to make positive changes to their health-related behaviour	Community based visits	Nov-Dec
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm	VPHS	Collected in 2017 (Release date unknown)
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm on a single occasion	VPHS	Collected in 2017 (Release date unknown)
Percent of Latrobe Valley community members who agree that getting drunk every now and again is okay	VIS	2015
Percent of Latrobe Valley community members currently smoking	VPHS	Collected in 2017 (Release date unknown)
Percent of Latrobe Valley community members previously smoking		
Percent of Latrobe Valley community members meeting fruit and vegetable consumption guidelines		
Prevalence of daily sugar-sweetened soft drink consumption		
Percent of Latrobe Valley community members meeting physical activity guidelines		



# Indicator framework

## Latrobe Health Innovation Zone

### MO10: Latrobe Valley communities are influenced by funded initiatives and programs...(continued)

#### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Latrobe Valley community members indicate changes to their own health-related behaviour	Community based visits	Nov-Dec
Number of Latrobe Valley community members who encourage others to make positive changes to their health-related behaviour	Community based visits	Nov-Dec
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm	VPHS	2019
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm on a single occasion	VPHS	2019
Percent of Latrobe Valley community members who agree that getting drunk every now and again is okay	VIS	2019
Percent of Latrobe Valley community members currently smoking		
Percent of Latrobe Valley community members previously smoking		
Percent of Latrobe Valley community members meeting fruit and vegetable consumption guidelines	VPHS	2019
Prevalence of daily sugar-sweetened soft drink consumption		
Percent of Latrobe Valley community members meeting physical activity guidelines		

#### Evaluation Themes





# Indicator framework

## Latrobe Health Innovation Zone

**LO1: The values and principles outlined in the Charter are embedded in organisations**

**Impact Area: 1**

Outcome indicators	Data source	Data collection timing
Organisations work in innovative ways to support health and wellbeing in the Zone		
Organisations collaborate to support health and wellbeing in the Zone		
Organisations are inclusive of, and accessible to, Latrobe Valley communities		
Organisations support equality in Latrobe Valley	Subject to future evaluation	N/A
Organisations are codesigned with Latrobe Valley communities		
Organisations communicate with Latrobe Valley communities in plain language		
Organisations are fair and transparent and follow through on commitments to Latrobe Valley communities		

# Indicator framework

## Latrobe Health Innovation Zone



### LO2: The Latrobe Valley is seen as a healthy city

#### Impact Area: 1

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley communities who report that organisations support health and wellbeing	Subject to future evaluation	N/A
Number of Latrobe Valley communities who report that services support health and wellbeing		
Number of stakeholders who report that organisations health and wellbeing		
Number of stakeholders who report that services support health and wellbeing		
Stakeholders external to Latrobe Valley refer to Latrobe Valley as having positive health outcomes		

# Indicator framework

## Latrobe Health Innovation Zone



**LO3: The Zone is recognised by Latrobe Valley communities as a symbol of collaboration and innovation**

**Impact Area: 1**

Outcome indicators	Data source	Data collection timing
Coordination and integration of services are encouraged within the Zone	Subject to future evaluation	N/A
Coordination and integration of services are supported within the Zone		
Number of stakeholders who can identify ways of coordinating and integrating efforts within the Zone	Subject to future evaluation	N/A
Number of coordination and integration efforts established in the Zone		
Stakeholders identify the Zone as supporting coordination and integration		





# Indicator framework

## Latrobe Health Innovation Zone

### LO4: Latrobe Valley communities have improved resilience

#### Impact Area: 2

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley communities who report ability to get help from family		
Number of Latrobe Valley communities who report ability to get help from friends		
Number of Latrobe Valley communities who report ability to get help from neighbours	VPHS	2023
Feelings of trust		
Number of Latrobe Valley communities who report feeling valued by society		
Resilience of Latrobe Valley communities		

# Indicator framework

## Latrobe Health Innovation Zone



### L05: Latrobe Valley communities have improved capacity to influence and take ownership of health and wellbeing outcomes

#### Impact Area: 2

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley communities participating in programs	Subject to future evaluation	N/A
Accessibility of capacity building opportunities within programs provided to Latrobe Valley community members		
Number of leadership opportunities within programs reserved for Latrobe Valley community members	Subject to future evaluation	N/A
Accessibility of leadership opportunities within programs reserved for Latrobe Valley community members		
Number of programs led by Latrobe Valley communities		

# Indicator framework

## Latrobe Health Innovation Zone



### L06: Health and wellbeing services are adaptive and dynamic in response to community need

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Service providers provide opportunities for Latrobe Valley community members to communicate gaps in service provision		
Number of service providers collaborating with others to identify opportunities to improve integration and reduce duplication of efforts	Subject to future evaluation	N/A
Existing and emerging evidence is used to identify gaps and opportunities in the accessibility and provision of health and wellbeing services		
Number of innovative service developments proposed		
Number of innovative service developments trialled	Subject to future evaluation	N/A
Number of innovative service developments implemented		



# Indicator framework

## Latrobe Health Innovation Zone

**L07: “No wrong door” – Latrobe Valley communities are put in touch with the service they need regardless of who they contact first**

**Impact Area: 3**

Outcome indicators	Data source	Data collection timing
Collaboration strategies of services reflect the values and priorities of the Charter		
Governance structures for collaborating services reflect the values and priorities of the Charter		
Extent of service integration in Latrobe Valley		
Number of service providers collaborating with others	Subject to future evaluation	N/A
Collaboration strategies of services reflect the values and priorities of the Charter		
Ease of access to specific services in Latrobe Valley		
Specific services meet Latrobe Valley community member needs		

# Indicator framework

## Latrobe Health Innovation Zone



**LO8: The Zone is recognised as a place for innovative approaches to community health and wellbeing**

**Impact Area: 3**

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley community members who report that health and wellbeing issues are addressed in new and more appropriate ways	Subject to future evaluation	N/A
Number of organisations who report increased innovative thinking in their workplace		
Number of times innovative approaches to supporting health and wellbeing is mentioned in the media		

# Indicator framework

## Latrobe Health Innovation Zone



### LO9: New ways of working attract health and wellbeing services to the Zone

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of aged care residential places	Subject to future evaluation	N/A
Number of organisations who report increased innovative thinking in their workplace		
General practitioners per 1,000 population	Latrobe LGA Statistical Profile	2022
General practice clinics per 1,000 population		
Allied health service sites per 1,000 population		
Dental service sites per 1,000 population		
Pharmacies per 1,000 population		
Diagnostic imaging services per 1,000 population		
Number of General Practitioners in Latrobe Valley		
Number of General Practices in Latrobe Valley	Medicare Benefits Schedule data	Annually
Number of After Hour General Practitioners/Emergency Attenders in Latrobe Valley		
Number of After Hour General Practices/Emergency Attendance Practices in Latrobe Valley		
Number of Mental Health General Practitioners in Latrobe Valley		
Number of Mental Health General Practices in Latrobe Valley		
Number of Chronic Disease General Practitioners in Latrobe Valley		
Number of Chronic Disease General Practices in Latrobe Valley		

# Indicator framework

## Latrobe Health Innovation Zone



### LO9: New ways of working attract health and wellbeing services to the Zone (continued)

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of General Practitioners in Latrobe Valley who provider Health Assessments	Medicare Benefits Schedule data	Annually
Number of General Practices in Latrobe Valley who provider Health Assessments		
Number of Early Intervention/Children with Disabilities providers in Latrobe Valley		
Number of Early Intervention/Children with Disabilities services in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health Workers in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health services in Latrobe Valley		
Number of Allied Mental Health Providers in Latrobe Valley		
Number of Allied Mental Health services in Latrobe Valley		
Number of Allied Health Providers in Latrobe Valley		
Number of Allied Health services in Latrobe Valley		
Number of Optometry Providers in Latrobe Valley		
Number of Optometry services in Latrobe Valley		
Number of Telehealth Providers in Latrobe Valley		
Number of Telehealth services in Latrobe Valley		



# Indicator framework

## Latrobe Health Innovation Zone

### LO10: Latrobe Valley communities make positive changes to their food and physical activity behaviours

#### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Latrobe Valley community members indicate changes to their own health-related behaviour	Subject to future evaluation	N/A
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm	VPHS	2023
Percent of Latrobe Valley community members at lifetime risk of alcohol related harm on a single occasion	VPHS	2023
Percent of Latrobe Valley community members who agree that getting drunk every now and again is okay	VIS	2023
Percent of Latrobe Valley community members currently smoking	VPHS	2023
Percent of Latrobe Valley community members previously smoking		
Percent of Latrobe Valley community members meeting fruit and vegetable consumption guidelines		
Prevalence of daily sugar-sweetened soft drink consumption		
Percent of Latrobe Valley community members meeting physical activity guidelines		





# Indicator framework

## Latrobe Health Innovation Zone

**LO11: Latrobe Valley communities encourage their friends and family to make positive changes to their food and physical activity behaviours**

**Impact Area: 4**

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley community members who encourage others to make positive changes to their health-related behaviour	Subject to future evaluation	N/A

# Indicator framework

## Latrobe Health Innovation Zone



### LO12: Latrobe Valley communities live healthier

#### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Life time risk of alcohol related harm (Increased lifetime risk; %)	VPHS	2023
Risk of alcohol related injury on a single occasion of drinking (Increased lifetime risk; %)		
Getting drunk every now and then is okay (% agree)	VIS	2023
Smoking status (Current %)	VPHS	2023
Smoking status (Ex-smoker %)		
Fruit & vegetable consumption (% meeting fruit and veg guidelines)		
Fruit & vegetable consumption (% meeting veg guidelines)		
Fruit & vegetable consumption (% meeting fruit guidelines)		
Prevalence of daily sugar-sweetened soft drink consumption		
Physical activity (% meeting guidelines)	VIS	2023
Participation in any organised physical activity		
Participation in any non-organised physical activity		
Prevalence of psychological distress, by level (% based on Kessler 10 score - High:Very high: (K10: 22+))		

# Indicator framework

## Latrobe Health Innovation Zone



### LO12: Latrobe Valley communities live healthier (continued)

#### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Prevalence of cancer (%)	VPHS	2023
Prevalence of heart disease (%)		
Prevalence of stroke (%)		
Self-reported health status (Excellent/very good; %)		
Self-reported health status (good; %)		
Subjective wellbeing (average)	VIS	2023
Babies with low birth weight (%)	Latrobe LGA Statistical Profile	2022
Unintentional injuries treated in hospital per 100,000 population		
Intentional injuries treated in hospital per 100,000 population		
Hospital inpatient separations per 100,000 population		
Emergency department presentations per 100,000 population		
Primary care type emergency department presentations per 1,000 population		
Rate of dental conditions (per 1,000 population)	Ambulatory Care Sensitive Condition data	Annually
Rate of diabetes (per 1,000 population)		
Rate of hypertension (per 1,000 population)		

# Indicator framework

## Latrobe Health Innovation Zone



**LO13: Latrobe Valley communities have improved health outcomes including reduced chronic disease and mental health**

### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Prevalence of cancer (%)	VPHS	2023
Prevalence of heart disease (%)		
Prevalence of stroke (%)		
Self-reported health status (Excellent/very good; %)		
Self-reported health status (good; %)		
Subjective wellbeing (average)	VIS	2023
Babies with low birth weight (%)	Latrobe LGA Statistical Profile	2022
Unintentional injuries treated in hospital per 100,000 population		
Intentional injuries treated in hospital per 100,000 population		
Hospital inpatient separations per 100,000 population		
Emergency department presentations per 100,000 population		
Primary care type emergency department presentations per 1,000 population		
Rate of dental conditions (per 1,000 population)	Ambulatory Care Sensitive Condition data	Annually
Rate of diabetes (per 1,000 population)		
Rate of hypertension (per 1,000 population)		

# Indicator framework

## Latrobe Health Innovation Zone



### LO13: Latrobe Valley communities have improved health outcomes (continued)

#### Impact Area: 4

Outcome indicators	Data source	Data collection timing
Life time risk of alcohol related harm (Increased lifetime risk; %)		
Risk of alcohol related injury on a single occasion of drinking (Increased lifetime risk; %)	VPHS	2023
Getting drunk every now and then is okay (% agree)	VIS	2023
Smoking status (Current %)		
Smoking status (Ex-smoker %)		
Fruit & vegetable consumption (% meeting fruit and veg guidelines)		
Fruit & vegetable consumption (% meeting veg guidelines)	VPHS	2023
Fruit & vegetable consumption (% meeting fruit guidelines)		
Prevalence of daily sugar-sweetened soft drink consumption		
Physical activity (% meeting guidelines)		
Participation in any organised physical activity		
Participation in any non-organised physical activity	VIS	2023
Prevalence of psychological distress, by level (% based on Kessler 10 score - High:Very high: (K10: 22+))		



# C.2 Latrobe Health Assembly

# Indicator framework

## Latrobe Health Assembly



### S07: Assembly Board member organisations identify ways they can collaborate to address community needs

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of interorganisational meetings discussing strategic plans and goals to identify opportunities for collaboration and reducing duplication	SSIs	Dec-Jan
Number of organisations collaborating	Organisation survey (Assembly members)	Ongoing (Push Oct-Dec)
Outcome indicators		
Number of reported ways of organisations working together to support community needs	SSIs	Dec-Jan





# Indicator framework

## Latrobe Health Assembly

**S08: The Assembly leverages its networks in engaging Latrobe Valley communities, and promoting Assembly activities and projects, including sectors not traditionally associated with health**

### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of networks identified by Assembly members	Document review: meeting minutes	Request November
Developmental indicators		
Number of engagements Assembly have with networks	Document review: meeting minutes Organisation survey (Assembly members) Existing meetings and events	Request November Oct-Dec
Content of engagements with networks	SSIs	Dec-Jan
Outcome indicators		
Number of networks mobilised to promote Assembly activities	Organisation survey (Assembly members)	Oct-Dec

### Evaluation Themes

EQ1 – Justification	EQ2 – Innovation	EQ6 – Opportunities for improvement	EQ8 – Engagement and empowerment
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# Indicator framework

## Latrobe Health Assembly



### SO9: Latrobe Valley communities are aware of the Assembly and understand its role

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of profile raising media posts (paid and unpaid)	Social and other media data	June, Oct, Dec
Outcome indicators		
Number of Latrobe Valley communities who have heard of the Assembly	Community survey (Q25a) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members understand the role of the Assembly	Community survey (Q26a) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec

#### Evaluation Themes

EQ7 – Awareness and understanding

EQ6 – Opportunities for improvement

# Indicator framework

## Latrobe Health Assembly



**SO10: Latrobe Valley communities are supported by the Assembly to come together to voice and prioritise local issues (e.g. family safety, drugs and alcohol)**

### Impact Area: 2

Process indicators	Data source	Data collection timing
Number of effective community engagement strategies used by the Assembly	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Assembly operating model incorporates community engagement	Document review: communication and strategy documents, Assembly data	Request in November
Number of opportunities created for community involvement in program design	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Assembly recruitment opportunities are accessible and appealing to Latrobe Valley communities	Document review Facebook and other media	Request in November
Developmental indicators		
Number of non-Assembly community members engaged in the Assembly project development process	Speak Up Latrobe data SSIs Document review: meeting minutes	Oct-Dec Dec-Jan Request in November
Assembly project proposals reference Latrobe Valley community input in identifying need and solution	Document review: business cases, PIDs	Request in November
Outcome indicators		
Number of Assembly community-led programs in Latrobe Valley	Document review: business cases, Assembly self-evaluation forms Existing meetings and events: community groups, the Assembly, and Pillar groups	Request in November Oct-Dec

### Evaluation Themes





# Indicator framework

## Latrobe Health Assembly

**SO11: The Assembly identifies health and wellbeing priorities and service gaps in the Zone (e.g. chronic health, mental health, dental health)**

**Impact Area: 3**

Process indicators	Data source	Data collection timing
Community and stakeholder engagement strategies used by the Assembly support Latrobe Valley communities to voice health and wellbeing needs and priorities	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Existing and emerging evidence is reviewed by Assembly members	Document review: Pillar Group meeting minutes	
Developmental indicators		
Number of health and wellbeing issues identified by the Assembly	Speak Up Latrobe data Bang the Table Document review: Pillar Group meeting minutes Initiative generated data	Oct-Dec Oct-Dec Request in November Request in November
Number of service gaps identified by the Assembly	Speak Up Latrobe data Bang the Table Document review: Pillar Group meeting minutes Initiative generated data	Oct-Dec Oct-Dec Request in November Request in November
Outcome indicators		
Assembly strategy clearly communicates prioritised health and wellbeing and service gaps in the Zone	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Number of feedback opportunities allowing Latrobe Valley communities to provide input on identified community health and wellbeing and service priorities, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Assembly strategy reflects Latrobe Valley community members' feedback, ongoing, in determining priorities	Document review: communication and strategy documents SSIs	Request in November Dec-Jan

### Evaluation Themes



# Indicator framework

## Latrobe Health Assembly



### SO12: The Assembly identifies nutritional and physical activity gaps in the Zone

#### Impact Area: 4

Process indicators	Data source	Data collection timing
Community and stakeholder engagement strategies used by the Assembly support Latrobe Valley communities to voice gaps in nutrition and physical activity	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Existing and emerging evidence is reviewed by Assembly members	Document review: Pillar Group meeting minutes	
Developmental indicators		
Number of nutritional issues identified by the Assembly	Speak Up Latrobe data Bang the Table Document review: Pillar Group meeting minutes Initiative generated data	Oct-Dec Oct-Dec Request in November Request in November
Number of physical activity issues identified by the Assembly	Speak Up Latrobe data Bang the Table Document review: Pillar Group meeting minutes Initiative generated data	Oct-Dec Oct-Dec Request in November Request in November
Outcome indicators		
Assembly strategy clearly communicates a strategy to address gaps in nutrition and physical activity in the Zone	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Number of feedback opportunities allowing Latrobe Valley communities to provide input on identified community health and wellbeing and service priorities, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Assembly strategy reflects Latrobe Valley community members' feedback, ongoing, in determining priorities	Document review: communication and strategy documents SSIs	Request in November Dec-Jan

#### Evaluation Themes

EQ1 - Justification	EQ3 - Evidence	EQ5 - Celebrating success	EQ6 - Opportunities for improvement
EQ8 - Engagement and empowerment	EQ10 - Community capacity	EQ11 - Community needs	EQ12 - Health and wellbeing

# Indicator framework

## Latrobe Health Assembly



### SO13: The Assembly is an active partner in relevant health promotion campaigns

#### Impact Area: 4

Process indicators	Data source	Data collection timing
Assembly strategy clearly communicates health and wellbeing and service gaps in the Zone	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Developmental indicators		
Existing and emerging evidence is used by the Social Marketing Team to frame content for the health promotion campaigns	Document review: PIDs	Request in November
Social Marketing Team engages with Latrobe Valley community members to identify how they would like to engage with health promotion material	Speak Up Latrobe Document review: PIDs SSIs	Request in November Request in November Dec-Jan
Number of meetings between the Social Marketing Team and organisations and stakeholders in the Zone to identify opportunities for collaboration and reduce duplication	Document review: meeting minutes SSIs	Request in November Dec-Jan
Outcome indicators		
Number of health promotion campaigns trialled	Document review: PIDs, business cases, project evaluations	Request in November
Number of campaigns published	Document review: project evaluations Initiative generated data SSIs	Request in November Request in November Dec-Jan

#### Evaluation Themes



# Indicator framework

## Latrobe Health Assembly



### MO11: Assembly Board member organisations collaborate to address community needs

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of organisations identifying new ways of working	Organisation survey (Assembly members)	Oct-Dec
Developmental indicators		
Number of organisations trialling new ways of working	Organisation survey (Assembly members)	Oct-Dec
Outcome indicators		
Number of organisations reporting new ways of working embedded in their operating model	SSIs Organisation survey (Assembly members)	Dec-Jan Oct-Dec



# Indicator framework

## Latrobe Health Assembly



### MO12: Latrobe Valley communities connect by participating in Assembly activities and projects

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of ways of participating communicated to Latrobe Valley communities	Facebook and other media Document review: initiative generated publications	June, Oct, Dec Request November
Developmental indicators		
Number of Latrobe Valley community members, including vulnerable community members, participating in programs	Existing meetings and events SSIs	Oct-Dec Dec-Jan
Latrobe Valley communities are participating in programs	Community based visits Initiative generated data	Nov-Dec Request November
Number of new connections made between Latrobe Valley community members and key stakeholders	SSIs Community based visits	Nov-Dec Nov-Dec
Number of new connections made between Latrobe Valley community members	Community based visits	Nov-Dec
Number of existing relationships between Latrobe Valley community members and key stakeholders are strengthened	SSIs Community based visits	Nov-Dec Nov-Dec
Outcome indicators		
Number of Latrobe Valley community members participating in programs	Existing meetings and events SSIs	Oct-Dec Dec-Jan
Number of vulnerable community members participating in programs	Community based visits Initiative generated data	Nov-Dec Request November
Latrobe Valley communities are participating in programs		
Existing relationships between Latrobe Valley community members and key stakeholders are strengthened	SSIs	Nov-Dec
Latrobe Valley communities connect to make decisions	SSIs	Dec-Jan

#### Evaluation Themes



# Indicator framework

## Latrobe Health Assembly



### MO13: The Assembly understands local issues and works with Latrobe Valley communities to facilitate positive solutions

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of effective community engagement strategies used by the Assembly	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Assembly operating model incorporates community engagement	Document review: communication and strategy documents, Assembly data	Request in November
Number of opportunities created for community involvement in program design	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Assembly recruitment opportunities are accessible and appealing to Latrobe Valley communities	Document review Facebook and other media	Request in November
Developmental indicators		
Number of non-Assembly community members engaged in the Assembly project development process	Speak Up Latrobe data SSIs Document review: meeting minutes	Oct-Dec Dec-Jan Request in November
Assembly project proposals reference Latrobe Valley community input in identifying need and solution	Document review: business cases, PIDs	Request in November
Outcome indicators		
Latrobe Valley communities feel included by the Assembly in forming solutions to local issues	SSIs Community based visits	Dec-Jan Nov-Dec
Assembly strategy reflect an understanding of local issues	SSIs Community based visits	Dec-Jan Nov-Dec
Assembly projects reflect an understanding of local issues	SSIs Community based visits	Dec-Jan Nov-Dec

#### Evaluation Themes

EQ1 - Justification	EQ2 - Innovation	EQ5 - Celebrating success	EQ6 - Opportunities for improvement
EQ7 - Awareness and understanding	EQ8 - Engagement and empowerment	EQ10 - Community capacity	EQ11 - Community needs



# Indicator framework

## Latrobe Health Assembly



### MO14: The Assembly contributes to improving accessibility of health and wellbeing services in response to identified priorities and gaps

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of service gaps identified by the Assembly	Speak Up Latrobe data Bang the Table Document review: Pillar Group meeting minutes Initiative generated data	Oct-Dec Oct-Dec Request in November Request in November
Developmental indicators		
Number of service developments commissioned	Document review: meeting minutes	Request in November
Number of service developments proposed	Document review: PIDs, business cases	Request in November
Outcome indicators		
Number of service developments implemented	SSIs	Dec-Jan

#### Evaluation Themes



# Indicator framework

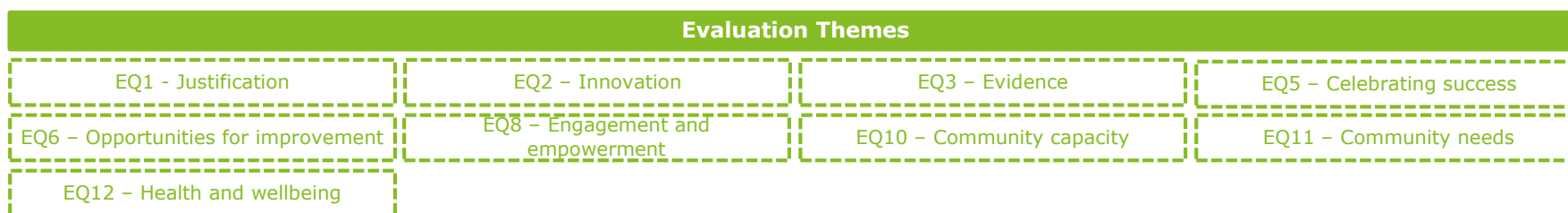
## Latrobe Health Assembly



### MO15: The Assembly influences, funds and coordinates community-based preventative health projects in response to identified priorities and gaps

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Existing and emerging evidence is used to identify gaps in the accessibility and provision of community-based prevention health projects are identified	Document review: meeting minutes Case studies SSIs	Request in November June, Oct, Dec Dec-Jan
Community and stakeholder engagement strategies used by the Assembly support Latrobe Valley communities to voice gaps in nutrition and physical activity	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Developmental indicators		
Number of preventative health projects commissioned	Document review: business cases, meeting minutes	Request in November
Number of preventative health projects proposed	Document review: PIDs, business cases	Request in November
Outcome indicators		
Number of preventative health projects implemented	SSIs	Dec-Jan
Number of Latrobe Valley communities reporting improved accessibility of preventative health services	Community based visits	Nov-Dec



# Indicator framework

## Latrobe Health Assembly



### MO16: The Assembly influences, funds and coordinates solutions to address nutritional and physical activity gaps in the Zone

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Assembly strategy clearly communicates a strategy to address gaps in nutrition and physical activity in the Zone	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Existing and emerging evidence is used to identify opportunities for improving nutrition in the Zone	Document review: meeting minutes Case studies SSIs	Request in November June, Oct, Dec Dec-Jan
Existing and emerging evidence is used to identify opportunities for improving physical activity in the Zone	Document review: meeting minutes Case studies SSIs	Request in November June, Oct, Dec Dec-Jan
Community and stakeholder engagement strategies are used by the Assembly support Latrobe Valley communities to identify opportunities for improving physical activity in the Zone	Document review: communication and strategy documents SSIs	Request in November Dec-Jan
Developmental indicators		
Number of nutrition projects commissioned	Document review: business cases, meeting minutes	Request in November
Number of physical activity projects commissioned	Document review: business cases, meeting minutes	Request in November
Number of nutrition projects proposed	Document review: PIDs, business cases	Request in November
Number of physical activity projects proposed	Document review: PIDs, business cases	Request in November
Outcome indicators		
Number of nutrition projects implemented	Document review: initiative generated data SSIs	Request in November Dec-Jan
Number of physical activity projects implemented	Document review: initiative generated data SSIs	Request in November Dec-Jan

#### Evaluation Themes





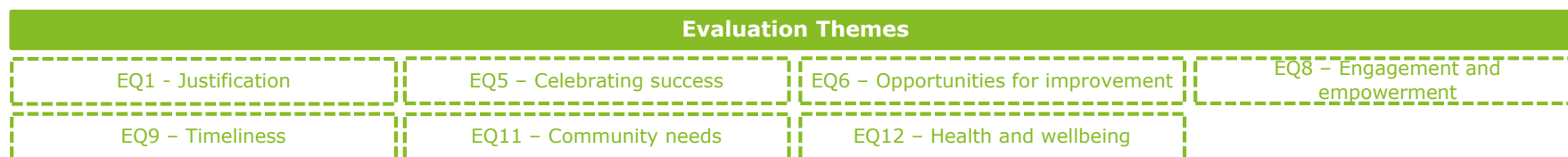
# Indicator framework

## Latrobe Health Assembly

### MO17: Latrobe Valley communities respond positively to health promotion and social marketing campaigns (e.g. quit smoking)

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of campaigns published	Document review: project evaluations Initiative generated data SSIs	Request in November Request in November Dec-Jan
Developmental indicators		
Number of Latrobe Valley community members how know how to access health and wellbeing education materials	Community survey (Q18) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members for whom it is easy to access information about health and wellbeing	Community survey (Q19)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who know where to find information to make a life decision	Community survey (Q12)	Ongoing (Push Oct-Dec)
Outcome indicators		
Latrobe Valley communities identification of necessities for health	Community survey (Q14)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members noticing decisions being influenced	Community based visits	Nov-Dec
Number of ways in which Latrobe Valley communities identify the Zone influencing decisions	Community based visits	Nov-Dec



# Indicator framework

## Latrobe Health Assembly



**LO14: New ways of working to address community needs are embedded in Assembly Board member organisations**

**Impact Area: 3**

<b>Outcome indicators</b>	<b>Data source</b>	<b>Data collection timing</b>
Number of strategic plans revised to reflect values and priorities of the Charter	Subject to future evaluation	N/A
Number of innovative service developments implemented	Subject to future evaluation	N/A

# Indicator framework

## Latrobe Health Assembly



### LO15: Latrobe Valley communities have increased optimism and positive perceptions of Latrobe Valley

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Feelings of trust (sometimes)	VPHS	2023
Feelings of trust (yes, definitely)		
Valued by society (sometimes)	VIS	2023
Valued by society (yes, definitely)		
Perceptions of neighbourhood – this is a close-knit neighbourhood (% agree)	VPHS	2023
Volunteering (sometimes)		
Volunteering (yes, definitely)	VPHS	2023
Opportunity to have a say (sometimes)		
Opportunity to have a say (yes, definitely)	VPHS	2023
Ability to get help from family (yes, definitely; %)		
Ability to get help from friends (yes, definitely; %)		
Ability to get help from neighbours (yes, definitely; %)		

# Indicator framework

## Latrobe Health Assembly



### LO16: Latrobe Valley communities have strengthened connections and resilience

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Feelings of trust (sometimes)	VPHS	2023
Feelings of trust (yes, definitely)		
Valued by society (sometimes)		
Valued by society (yes, definitely)		
Ability to get help from family (yes, definitely; %)		
Ability to get help from friends (yes, definitely; %)		
Ability to get help from neighbours (yes, definitely; %)	VIS	2023
Perceptions of neighbourhood – this is a close-knit neighbourhood (% agree)		

# Indicator framework

## Latrobe Health Assembly



### LO17: Programs are community-led with support from the Assembly where required

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of community-led projects and programs materially supported financially by the Assembly	Subject to future evaluation	N/A
Number of community-led projects and programs advised by the Assembly	Subject to future evaluation	N/A



# Indicator framework

## Latrobe Health Assembly



**LO18: Latrobe Valley communities have improved capacity to prevent issues from becoming acute**

**Impact Area: 3**

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley community members volunteering (sometimes)	VPHS	2023
Number of Latrobe Valley community members volunteering (yes, definitely)		
Number of Latrobe Valley community members who report having the opportunity to have a say (sometimes)	VIS	2023
Number of Latrobe Valley community members who report having the opportunity to have a say (yes, definitely)		
Resilience (average; range 0-8) of Latrobe Valley community members		

# Indicator framework

## Latrobe Health Assembly



**LO19: Latrobe Valley communities have improved access to the health and wellbeing services they need and at an affordable cost**

**Impact Area: 3**

Outcome indicators	Data source	Data collection timing
Latrobe Valley community members who delayed medical consultation, unable to afford (%)	Latrobe LGA Statistical Profile	2022
Latrobe Valley community members who delayed purchasing prescribed medication, unable to afford (%)		

# Indicator framework

## Latrobe Health Assembly



### LO20: Latrobe Valley communities have improved access to preventive health supports

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
General practitioners per 1,000 population	Latrobe LGA Statistical Profile	2022
General practice clinics per 1,000 population		
Allied health service sites per 1,000 population		
Dental service sites per 1,000 population		
Pharmacies per 1,000 population		
Number of General Practitioners in Latrobe Valley	Medicare Benefits Schedule data	Annually
Number of General Practices in Latrobe Valley		
Number of Mental Health General Practitioners in Latrobe Valley		
Number of Mental Health General Practices in Latrobe Valley		
Number of Chronic Disease General Practitioners in Latrobe Valley		
Number of Chronic Disease General Practices in Latrobe Valley		

# Indicator framework

## Latrobe Health Assembly



### LO20: Latrobe Valley communities have improved access to preventive health supports (continued)

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of General Practitioners in Latrobe Valley who provide Health Assessments	Medicare Benefits Schedule data	Annually
Number of General Practices in Latrobe Valley who provide Health Assessments		
Number of Early Intervention/Children with Disabilities providers in Latrobe Valley		
Number of Early Intervention/Children with Disabilities services in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health Workers in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health services in Latrobe Valley		
Number of Allied Mental Health Providers in Latrobe Valley		
Number of Allied Mental Health services in Latrobe Valley		
Number of Allied Health Providers in Latrobe Valley		
Number of Allied Health services in Latrobe Valley		
Number of Optometry Providers in Latrobe Valley		
Number of Optometry services in Latrobe Valley		
Number of Telehealth Providers in Latrobe Valley		
Number of Telehealth services in Latrobe Valley		

# Indicator framework

## Latrobe Health Assembly



### LO21: People with a chronic disease or disability are supported to live well

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of Mental Health General Practitioners in Latrobe Valley	Medicare Benefits Schedule Data	Annually
Number of Mental Health General Practices in Latrobe Valley		
Number of Chronic Disease General Practitioners in Latrobe Valley		
Number of Chronic Disease General Practices in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health Workers in Latrobe Valley		
Number of Practice Nurses/Aboriginal Health services in Latrobe Valley		
Number of Allied Mental Health Providers in Latrobe Valley		
Number of Allied Mental Health services in Latrobe Valley		
Number of Allied Health Providers in Latrobe Valley		
Number of Allied Health services in Latrobe Valley		
Primary care type emergency department presentations per 1,000 population	Latrobe LGA Statistical Profile	2022

# Indicator framework

## Latrobe Health Assembly



### LO22: Latrobe Valley communities have improved health and wellbeing outcomes, including reduced chronic disease and mental health

Outcome indicators	Data source	Data collection timing
Fruit & vegetable consumption (% meeting veg guidelines)		
Fruit & vegetable consumption (% meeting fruit guidelines)		
Prevalence of daily sugar-sweetened soft drink consumption	VPHS	2023
Physical activity (% meeting guidelines)		
Participation in any organised physical activity		
Participation in any non-organised physical activity	VIS	2023
Prevalence of cancer (%)		
Prevalence of heart disease (%)		
Prevalence of stroke (%)	VPHS	2023
Self-reported health status (Excellent/very good; %)		
Self-reported health status (good; %)		
Subjective wellbeing (average)	VIS	2023
Babies with low birth weight (%)		
Unintentional injuries treated in hospital per 100,000 population		
Intentional injuries treated in hospital per 100,000 population		
Hospital inpatient separations per 100,000 population	Latrobe LGA Statistical Profile	2022
Emergency department presentations per 100,000 population		
Primary care type emergency department presentations per 1,000 population		
Rate of dental conditions (per 1,000 population)		
Rate of diabetes (per 1,000 population)	Ambulatory Care Sensitive Condition data	Annually
Rate of hypertension (per 1,000 population)		



# C.3 Latrobe Health Advocate

# Indicator framework

## Latrobe Health Advocate



### SO14: Latrobe Valley communities are aware of the Advocate and understand her role

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of profile raising media posts (paid and unpaid)	Social and other media data	June, Oct, Dec
Developmental indicators		
Number of Latrobe Valley communities who have heard of the Advocate	Community survey (Q25c) Community based visits	Request November
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26c) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members who know who the Advocate is	Community survey (Q39) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members who know how to contact the Advocate	Community survey (Q40) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Outcome indicators		
Number of Latrobe Valley communities who have heard of the Advocate	Community survey (Q25c) Community based visits	Request November
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26c) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members who know who the Advocate is	Community survey (Q39) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members who know how to contact the Advocate	Community survey (Q40) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec

#### Evaluation Themes

EQ7 – Awareness and understanding

EQ5 – Celebrating success

EQ6 – Opportunities for improvement



# Indicator framework

## Latrobe Health Advocate

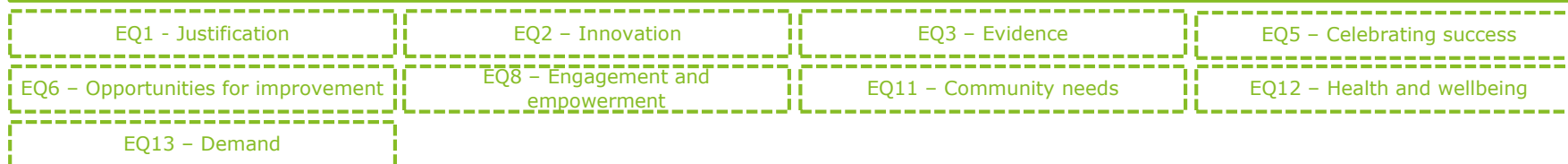


### SO15: The Advocate identifies public health and wellbeing issues and goals among Latrobe Valley communities and stakeholders within the Zone

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of communication pathways established between Latrobe Valley communities and the Advocate	Initiative generated data	Request November
Number of communication pathways established between the Advocate and organisations	Initiative generated data	Request November
Developmental indicators		
Number of engagements between the Advocate and organisations	Initiative generated data Social and other media data	Request November June, Oct, Dec
Outcome indicators		
Advocate analysis of organisation challenges and objectives is accurate	Community based visits	Nov-Dec
Advocate identification of systemic issues is accurate	Case studies SSIs Community based visits	June, Oct, Dec Dec-Jan Nov-Dec
Number of feedback opportunities allowing Latrobe Valley communities and organisations to provide input on Advocate findings, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Advocate findings reflect Latrobe Valley community members' and organisations' perspectives, ongoing	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec

#### Evaluation Themes



# Indicator framework

## Latrobe Health Advocate



### SO16: The Advocate is respected by all stakeholders as an independent representative of Latrobe Valley communities in the Zone

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Extent to which the Advocate's Statement of Intent outlines the independent nature of their role in liaising with stakeholders	Document review: Advocate Statement of Intent	2018
Developmental indicators	Data source	Data collection timing
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26c) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of organisations who understand the role of the Advocate	Organisation survey (Q14) SSIs	Ongoing (Push Oct-Dec) Dec-Jan
Latrobe Valley community members feel heard by the Advocate	Community based visits	Nov-Dec
Number of Latrobe Valley community members who identify that the Advocate independently represents the needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan
Number of Latrobe Valley organisations who identify that the Advocate independently represents the needs of organisations with the Zone	Community based visits SSIs	Nov-Dec Dec-Jan
Outcome indicators		
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26c) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of organisations who understand the role of the Advocate	Organisation survey (Q14) SSIs	Ongoing (Push Oct-Dec) Dec-Jan
Latrobe Valley community members needs are accurately represented by the Advocate	Community based visits	Nov-Dec

#### Evaluation Themes



# Indicator framework

## Latrobe Health Advocate



### SO17: The Advocate engages effectively with Latrobe Valley communities (including heard to reach groups)

#### Impact Area: 2

Process indicators	Data source	Data collection timing
Number of communication pathways established between Latrobe Valley communities and the Advocate	Initiative generated data	Request November
Developmental indicators		
Number of Latrobe Valley communities who have heard of the Advocate	Community survey (Q25c) Community based visits	Request November
Number of Latrobe Valley community members who know who the Advocate is	Community survey (Q39) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26c) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of feedback opportunities allowing Latrobe Valley communities and organisations to provide input on Advocate findings, ongoing	SSIs Existing meetings and events Community based visits	Dec-Jan Oct-Dec Nov-Dec
Outcome indicators		
Extent to which Latrobe Valley communities feel that they can speak out when they disagreed what everyone else had agreed one	Community survey (Q12)	Ongoing (Push Oct-Dec)
Advocate findings reflect Latrobe Valley community members' and organisations' feedback, ongoing	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec

#### Evaluation Themes



# Indicator framework

## Latrobe Health Advocate



### SO18: The Advocate shares her findings and insights on issues and opportunities with Latrobe Valley communities and stakeholders in the Zone

#### Impact Area: 2

Process indicators	Data source	Data collection timing
The Advocate engages with Latrobe Valley community members, organisations and key stakeholders to identify how they would like to access her findings and insights	Document review: initiative generated data SSIs Community based visits	Request in November Dec-Jan Nov-Dec
Developmental indicators		
The Advocate produces her findings in a manner that is appropriate and accessible for Latrobe Valley communities, organisations and other key stakeholders	Social and other media Document review: initiative publications Community base visits	June, Oct, Dec Request November Nov-Dec
Outcome indicators		
Number of ways in which Latrobe Valley community members, organisations and key stakeholders can access the Advocate's findings and insights	Document review: initiative generated data	Request November

#### Evaluation Themes



# Indicator framework

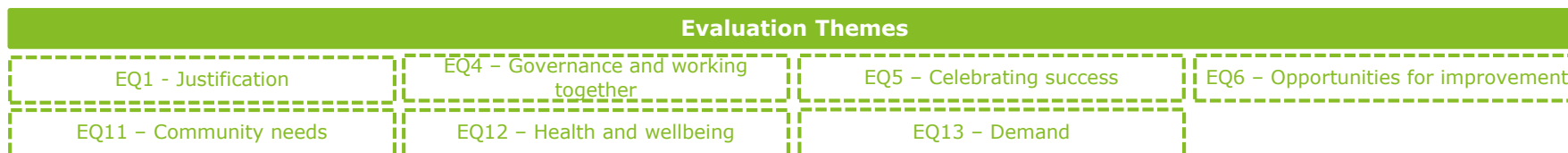
## Latrobe Health Advocate



**SO19: The Advocate works with the Latrobe Health Assembly to ensure community is engaged across the initiatives**

**Impact Area: 3**

Process indicators	Data source	Data collection timing
Number of Assembly meetings attended by the Advocate	Initiative generated data	Request November
Content of input provided by the Advocate to Assembly meetings	Document review: meeting minutes Initiative generated data SSIs	Request November Request November Dec-Jan



# Indicator framework

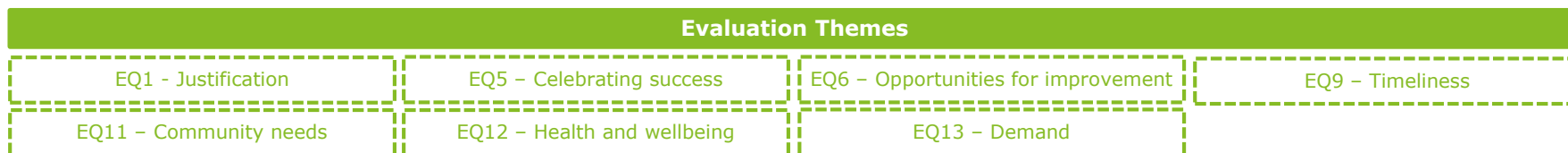
## Latrobe Health Advocate



**SO20: The Advocate is a respected representative of Latrobe Valley communities in health and wellbeing service planning at a local and State level**

### Impact Area: 3

Process indicators	Data source	Data collection timing
The Advocate's Statement of Intent outlines the independent nature of their role in liaising with health and wellbeing service planners	Document review: Advocate Statement of Intent	2018
Developmental indicators		
Number of Latrobe Valley community members who identify that the Advocate independently represents the needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan
Outcome indicators		
Number of Latrobe Valley community members who identify that the Advocate independently represents the needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan
Number of service plan changes commissioned by the Advocate	Initiative generated data	Request November





# Indicator framework

## Latrobe Health Advocate

### SO21: Latrobe Valley communities' health and wellbeing needs are communicated effectively

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Advocate findings reflect Latrobe Valley community members' and organisations' perspectives, ongoing	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec
Developmental indicators		
The Advocate produces her findings in a manner that is appropriate and accessible for Latrobe Valley communities, organisations and other key stakeholders	Social and other media Document review: initiative publications Community base visits	June, Oct, Dec Request November Nov-Dec
Outcome indicators		
Number of meetings between the Advocate and government, and service and system representatives	Initiative generated data	Request November
Content of meetings between the Advocate and government, and service and system representatives	Document review: meeting minutes	Request November



# Indicator framework

## Latrobe Health Advocate



### SO22: Latrobe Valley communities and stakeholders have increased awareness about how health is shaped in the Zone

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Number of Latrobe Valley community members communicating health needs to the Advocate	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec
Developmental indicators		
Number of Latrobe Valley community members accessing the Advocate's publications on her findings	Initiative generated data Community based visits	Request in November Nov-Dec
Number of stakeholders meeting with the Advocate to discuss her findings	Document review: initiative publications Initiative generated data	Request in November Request in November
Outcome indicators		
Latrobe Valley community members identify what they need to be healthy	Community survey (Q14)	Ongoing (Push Oct-Dec)
Stakeholders identify what supports community health	SSIs Community based visits	Dec-Jan Nov-Dec

#### Evaluation Themes







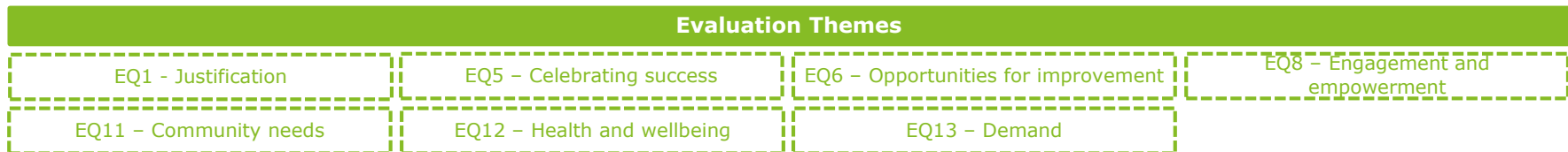
# Indicator framework

## Latrobe Health Advocate

### MO18: Latrobe Valley communities' concerns are addressed more effectively

#### Impact Area: 1

Developmental indicators	Data source	Data collection timing
Number of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Outcome indicators		
Number of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)



# Indicator framework

## Latrobe Health Advocate



### MO19: Latrobe Valley communities' needs are better represented to the Government, services and systems

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of communication pathways established between Latrobe Valley communities and the Advocate	Initiative generated data	Request November
Developmental indicators		
Number of Latrobe Valley communities that report the Advocate is a good idea	Community survey (Q27b)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley communities that report the Advocate can improve health and wellbeing in the Latrobe Valley	Community survey (Q28)	Ongoing (Push Oct-Dec)
Outcome indicators		
Number of meetings between the Advocate and government, and service and system representatives	Initiative generated data	Request November
Content of meetings between the Advocate and government, and service and system representatives	Document review: meeting minutes	Request November

#### Evaluation Themes

EQ1 - Justification	EQ2 - Innovation	EQ5 - Celebrating success	EQ6 - Opportunities for improvement
EQ7 - Awareness and understanding	EQ11 - Community needs	EQ12 - Health and wellbeing	EQ13 - Demand

# Indicator framework

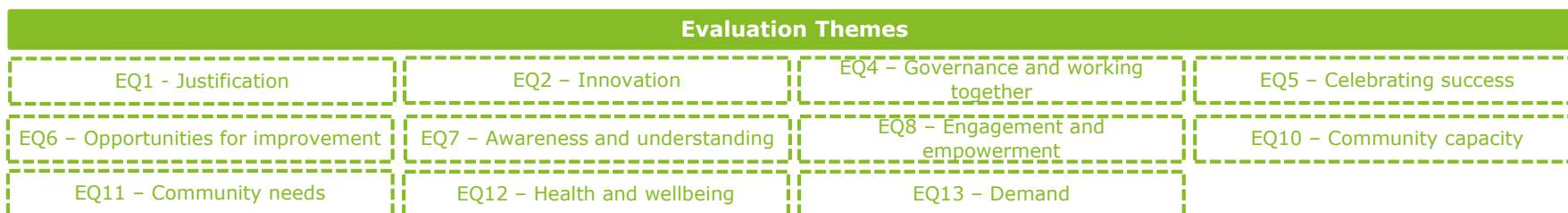
## Latrobe Health Advocate



### MO20: The Advocate influences stakeholders in the Zone to align their community health and wellbeing objectives

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Advocate findings reflect Latrobe Valley community members' and organisations' perspectives, ongoing	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec
Developmental indicators		
Number of meetings between the Advocate and organisations	Initiative generated data	Request November
Content of meetings between the Advocate and organisations	Document review: meeting minutes	Request November
Number of similarities between organisations identified and communicated by the Advocate to organisations	Document review: meeting minutes SSIs	Request November Dec-Jan
Outcome indicators		
Number of alignments proposed to organisations	Document review: meeting minutes SSIs	Request November Dec-Jan





# Indicator framework

## Latrobe Health Advocate

### MO21: The Advocate influences stakeholders within the Zone to prioritise the health and wellbeing of Latrobe Valley communities when making decisions

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Advocate findings reflect Latrobe Valley community members' and organisations' perspectives, ongoing	Document review: initiative publications SSIs Community based visits	Request in November Dec-Jan Nov-Dec
Developmental indicators		
Number of meetings between the Advocate and organisations	Initiative generated data	Request November
Content of meetings between the Advocate and organisations	Document review: meeting minutes	Request November
Number of ways for organisations to prioritising health and wellbeing when making decisions identified and communicated by he Advocate	Document review: meeting minutes SSIs	Request November Dec-Jan
Outcome indicators		
Number of developments proposed to organisations	Document review: meeting minutes SSIs	Request November Dec-Jan
Number of developments implemented by organisations	Document review: initiative generated data SSIs	Request November Dec-Jan

#### Evaluation Themes

EQ1 - Justification	EQ2 - Innovation	EQ4 - Governance and working together	EQ5 - Celebrating success
EQ6 - Opportunities for improvement	EQ7 - Awareness and understanding	EQ8 - Engagement and empowerment	EQ10 - Community capacity
EQ11 - Community needs	EQ12 - Health and wellbeing	EQ13 - Demand	



# Indicator framework

## Latrobe Health Advocate

**MO22: Service planning and policy decisions reflect that key stakeholders, including Government, understand the needs and strengths of Latrobe Valley communities**

### Impact Area: 1

Developmental indicators	Data source	Data collection timing
Number of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Number of service developments proposed that reflect the Advocate's findings and insights	Document review: PIDs, business cases SSIs	Request in November Dec-Jan
Outcome indicators		
Percentage of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Number of service developments implemented that reflect the Advocate's findings and insights	Document review: PIDs, business cases SSIs	Request in November Dec-Jan

### Evaluation Themes

EQ1 - Justification	EQ2 - Innovation	EQ4 - Governance and working together	EQ5 - Celebrating success
EQ6 - Opportunities for improvement	EQ8 - Engagement and empowerment	EQ10 - Community capacity	EQ11 - Community needs
EQ12 - Health and wellbeing	EQ13 - Demand		

# Indicator framework

## Latrobe Health Advocate



### MO23: The Advocate is a focal point for health and wellbeing leadership within Latrobe Valley communities

#### Impact Area: 1

Process indicators	Data source	Data collection timing
Number of Latrobe Valley communities that report the Advocate is a good idea	Community survey (Q27b)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley communities that report the Advocate can improve health and wellbeing in the Latrobe Valley	Community survey (Q28)	Ongoing (Push Oct-Dec)
Number of organisations that report the Advocate is a good idea	Organisation survey (Q15)	Ongoing (Push Oct-Dec)
Number of organisations that report the Advocate can improve health and wellbeing in the Latrobe Valley	Organisation survey (Q16)	Ongoing (Push Oct-Dec)
Developmental indicators		
Number of organisations who report that the Advocate's findings reflect local perspectives and needs	SSIs	Dec-Jan
Number of Latrobe Valley community members who report that the Advocate's findings reflect local perspectives and needs	Community based visits	Nov-Dec
Number of Latrobe Valley community members who identify that the Advocate independently represents the needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan
Number of organisations who identify that the Advocate independently represents the needs of Latrobe Valley communities	SSIs	Dec-Jan
Outcome indicators		
Number of organisations who consult the Advocate in developing services	SSIs	Dec-Jan
Latrobe Valley communities identification of necessities for health	Community survey (Q14)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feeling that they have power to make important decisions that change the course of their life	Community survey (Q13)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feeling that they contribute to making their community a better place to live	Community survey (Q13)	Ongoing (Push Oct-Dec)

#### Evaluation Themes

EQ1 - Justification

EQ5 - Celebrating success

EQ11 - Community needs

EQ12 - Health and wellbeing

# Indicator framework

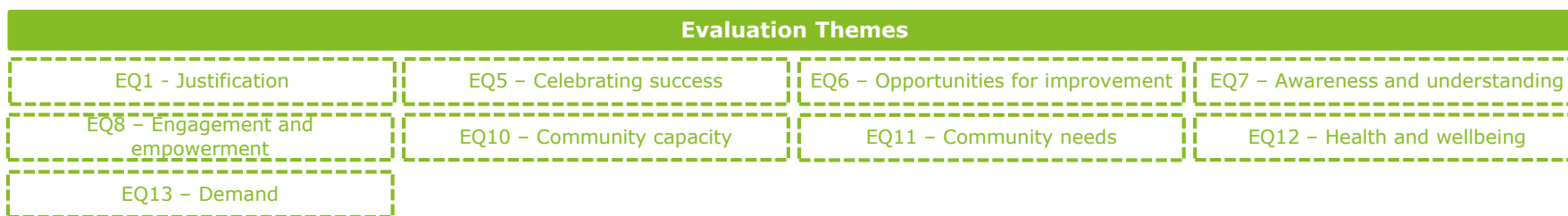
## Latrobe Health Advocate



### MO24: Latrobe Valley communities feel heard, respected and understood by the Advocate

#### Impact Area: 2

Developmental indicators	Data source	Data collection timing
Number of Latrobe Valley community members who know how to contact the Advocate	Community survey (Q40) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Percentage of Latrobe Valley communities that report the Advocate is a good idea	Community survey (Q27b)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who report that the Advocate's findings reflect local perspectives and needs	Community based visits	Nov-Dec
Outcome indicators		
Number of Latrobe Valley community members who report that the Advocate's findings reflect local perspectives and needs	Community based visits	Nov-Dec
Latrobe Valley community members who feel respected by the Advocate	Community based visits	Nov-Dec





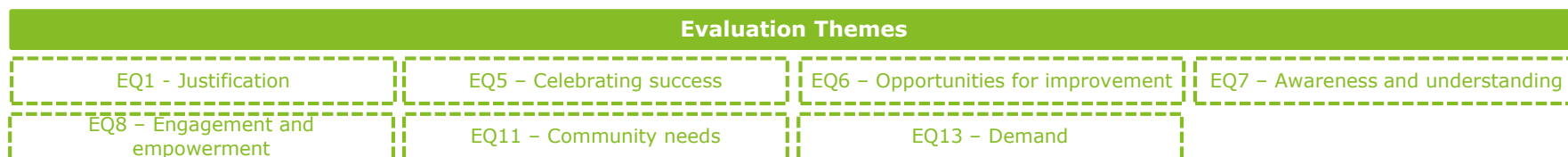
# Indicator framework

## Latrobe Health Advocate

### MO25: Latrobe Valley communities trust, and have confidence in, the Advocate and her ability to meet their needs

#### Impact Area: 2

Developmental indicators	Data source	Data collection timing
Number of Latrobe Valley communities that report the Advocate is a good idea	Community survey (Q27b)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley communities that report the Advocate can improve health and wellbeing in the Latrobe Valley	Community survey (Q28)	Ongoing (Push Oct-Dec)
Outcome indicators		
Number of Latrobe Valley community members who identify that the Advocate independently represents the needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan
Latrobe Valley community members needs are accurately represented by the Advocate	Community based visits	Nov-Dec





# Indicator framework

## Latrobe Health Advocate



### MO26: Latrobe Valley communities feel empowered and enabled to advocate for their health and wellbeing

#### Impact Area: 2

Process indicators	Data source	Data collection timing
Latrobe Valley communities identification of necessities for health	Community survey (Q14)	Ongoing (Push Oct-Dec)
Latrobe Valley communities understand communication processes between the initiatives, government and key stakeholders	Community based visits	Nov-Dec
Developmental indicators		
Latrobe Valley communities feel that they can speak out when they disagreed what everyone else had agreed one	Community survey (Q12)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feel that they have power to make important decisions that change the course of their life	Community survey (Q13)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feel that they contribute to making their community a better place to live	Community survey (Q13)	Ongoing (Push Oct-Dec)
Outcome indicators		
Latrobe Valley communities feel that they can speak out when they disagreed what everyone else had agreed one	Community survey (Q12)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feel that they have power to make important decisions that change the course of their life	Community survey (Q13)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feel that they contribute to making their community a better place to live	Community survey (Q13)	Ongoing (Push Oct-Dec)
Latrobe Valley communities feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Latrobe Valley communities understanding of system change and how to affect it	Community based visits SSIs	Nov-Dec Dec-Jan

#### Evaluation Themes



# Indicator framework

## Latrobe Health Advocate



### MO27: Stakeholders within the Zone turn to the Advocate for the community's perspective on issues and opportunities in Latrobe Valley

#### Impact Area: 2

Developmental indicators	Data source	Data collection timing
Number of organisations who identify that the Advocate independently represents the needs of Latrobe Valley communities	SSIs	Dec-Jan
Number of organisations who identify that the Advocate independently represents the needs of organisations with the Zone	SSIs	Dec-Jan
Outcome indicators		
Organisations think the Advocate is a good idea	Organisation survey (Q15)	Ongoing (Push Oct-Dec)
Organisations think the Advocate can improve health and wellbeing in the Latrobe Valley	Organisation survey (Q15)	Ongoing (Push Oct-Dec)
Number of organisations that trust the Advocate's insights	SSIs	Dec-Jan
Number of organisations that trust the Advocate's independence	SSIs	Dec-Jan

#### Evaluation Themes



# Indicator framework

## Latrobe Health Advocate



**MO28: The Advocate influences existing funding sources to improve access to local, affordable services that meet Latrobe Valley communities' health and wellbeing needs**

### Impact Area: 3

Process indicators	Data source	Data collection timing
Advocate identifies existing funding sources	SSIs	Dec-Jan
Developmental indicators		
Number of meetings between the Advocate and government, and service and system representatives	Initiative generated data	Request November
Content of meetings between the Advocate and government, and service and system representatives	Document review: meeting minutes	Request November
Outcome indicators		
Percentage of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Number of service developments implemented that reflect the Advocate's findings and insights	Document review: PIDs, business cases SSIs	Request in November Dec-Jan

### Evaluation Themes

EQ1 - Justification	EQ4 - Governance and working together	EQ5 - Celebrating success	EQ6 - Opportunities for improvement
EQ8 - Engagement and empowerment	EQ11 - Community needs	EQ12 - Health and wellbeing	EQ13 - Demand

# Indicator framework

## Latrobe Health Advocate



**MO29: The Advocate attracts additional funding to improve access to local, affordable services that meet Latrobe Valley communities' health and wellbeing needs**

### Impact Area: 3

Process indicators	Data source	Data collection timing
Number of new funding sources identified by the Advocate	SSIs	Dec-Jan
Developmental indicators		
Number of meetings between the Advocate and government, and service and system representatives	Initiative generated data	Request November
Content of meetings between the Advocate and government, and service and system representatives	Document review: meeting minutes	Request November
Outcome indicators		
Percentage of Latrobe Valley communities who feel that government representatives take into account concerns voiced by them and people like them when making policy decisions	Community survey (Q13)	Ongoing (Push Oct-Dec)
Number of service developments implemented that reflect the Advocate's findings and insights	Document review: PIDs, business cases SSIs	Request in November Dec-Jan

### Evaluation Themes

EQ1 - Justification	EQ4 - Governance and working together	EQ5 - Celebrating success	EQ6 - Opportunities for improvement
EQ8 - Engagement and empowerment	EQ11 - Community needs	EQ12 - Health and wellbeing	EQ13 - Demand

# Indicator framework

## Latrobe Health Advocate



### MO30: Latrobe Valley communities and stakeholders understand how systems change can improve health outcomes

#### Impact Area: 3

Process indicators	Data source	Data collection timing
Latrobe Valley community members identify what they need to be healthy	Community survey (Q14)	Ongoing (Push Oct-Dec)
Stakeholders identify what supports community health	SSIs Community based visits	Dec-Jan Nov-Dec
Developmental indicators		
Number of Latrobe Valley community members who understand the role of the Advocate	Community survey (Q26)	Ongoing (Push Oct-Dec)
Number of Latrobe Valley community members who understand what the Advocate does once she has gained community perspective	Community based visits	Nov-Dec
Number of stakeholders who understand the role of the Advocate	Organisation survey (Q14) Community based visits	Ongoing (Push Oct-Dec) Nov-Dec
Number of stakeholders who understand how their business can impact health outcomes	Community based visits	Nov-Dec
Outcome indicators		
Number of Latrobe Valley community members who understand that services and stakeholders can adapt to meet their communicated health needs	Community based visits	Nov-Dec
Number of stakeholders who identify that new ways of working can better meet the health needs of Latrobe Valley communities	Community based visits SSIs	Nov-Dec Dec-Jan

#### Evaluation Themes

EQ1 - Justification	EQ5 - Celebrating success	EQ6 - Opportunities for improvement	EQ7 - Awareness and understanding
EQ8 - Engagement and empowerment	EQ11 - Community needs	EQ12 - Health and wellbeing	EQ13 - Demand

# Indicator framework

## Latrobe Health Advocate



### LO23: Stakeholders within the Zone have shared health and wellbeing goals for Latrobe Valley

#### Impact Area: 1

Outcome indicators	Data source	Data collection timing
Number of organisations who communicate, publicly, that their goals are shared with other specific organisations in the Zone	Subject to future evaluation	N/A

# Indicator framework

## Latrobe Health Advocate



**LO24: Stakeholders within the Zone prioritise the health and wellbeing of Latrobe Valley communities when making decisions**

### Impact Area: 1

Outcome indicators	Data source	Data collection timing
Number of organisations whose strategic plans reflect values and priorities of the Charter	Subject to future evaluation	N/A

# Indicator framework

## Latrobe Health Advocate



### LO25: Latrobe Valley communities have greater capacity to advocate for their health and wellbeing needs

#### Impact Area: 2

Outcome indicators	Data source	Data collection timing
Accessibility of capacity building opportunities within programs provided to Latrobe Valley community members		
Number of leadership opportunities within programs reserved for Latrobe Valley community members	Subject to future evaluation	N/A
Accessibility of leadership opportunities within programs reserved for Latrobe Valley community members		
Number of leadership opportunities within programs held by Latrobe Valley community members	Subject to future evaluation	N/A
Number of programs led by Latrobe Valley communities		



# Indicator framework

## Latrobe Health Advocate



### LO26: Stakeholders within the Zone embed community voice in their decision making

#### Impact Area: 2

Outcome indicators	Data source	Data collection timing
Number of organisations whose strategic plans reflect values and priorities of the Charter	Subject to future evaluation	N/A
Number of organisations who create a feedback loop, allowing Latrobe Valley communities to provide input on how the organisation meets needs, ongoing	Subject to future evaluation	N/A

# Indicator framework

## Latrobe Health Advocate



### LO27: Health and wellbeing services are designed in response to community needs

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Existing and emerging evidence is used to identify gaps in service accessibility and provision		
Number of feedback opportunities allowing Latrobe Valley communities to provide input on identified community health and wellbeing and service priorities, ongoing	Subject to future evaluation	N/A
Number of service developments implemented that reflect community identified health and wellbeing issues and gaps in services		

# Indicator framework

## Latrobe Health Advocate



**LO28: “No wrong door” – Latrobe Valley communities are put in touch with the service they need regardless of who they contact first**

### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Collaboration strategies of services reflect the values and priorities of the Charter	Subject to future evaluation	N/A
Governance structures for collaborating services reflect the values and priorities of the Charter		
Extent of service integration in Latrobe Valley		
Number of service providers collaborating with others		
Collaboration strategies of services reflect the values and priorities of the Charter		
Ease of access to specific services in Latrobe Valley		
Specific services meet Latrobe Valley community member needs		

# Indicator framework

## Latrobe Health Advocate



**LO29: Systemic health prevention and intervention is supported by Latrobe Valley communities and service provider behaviour**

**Impact Area: 3**

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley communities accessing primary or preventive healthcare		
Number of primary or preventive healthcare providers		
Number of primary or preventive healthcare attendances		
Number of Latrobe Valley community members who report accessing primary or preventive healthcare when a health or wellbeing issue arises, as a first port of call	Subject to future evaluation	N/A
Number of Latrobe Valley community members who report improved protective health behaviours since accessing primary or preventive healthcare		



# Indicator framework

## Latrobe Health Advocate

### LO30: Latrobe Valley community members and stakeholders proactively work together to systems change to improve health outcomes in the Zone

#### Impact Area: 3

Outcome indicators	Data source	Data collection timing
Number of Latrobe Valley community members who give feedback to stakeholders on how they can better support community health outcomes	Subject to future evaluation	N/A
Number of Latrobe Valley community members who consider how they can better support community health outcomes	Subject to future evaluation	N/A
Number of Latrobe Valley community members who meet with other stakeholders to discuss how they can better support community health outcomes, together	Subject to future evaluation	N/A
Number of strategic plans that reflect systems thinking to support health in the Zone	Subject to future evaluation	N/A



# Appendix D: References

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