

Advice for public health and wellbeing planning in Victoria: planning cycle 2017-21

April 2017

This document will assist councils and funded prevention and health promotion organisations with health and wellbeing planning and implementation for the 2017-21 cycle. It outlines Victorian policy directions, supplements the [Guide to municipal public health and wellbeing planning](#) for councils, and provides information on the requirements and expectations of funded prevention and health promotion organisations. This shared advice for councils and funded agencies emphasises the importance of collaboration to improve the health and wellbeing of local populations.

Victorian prevention policy

The [Victorian public health and wellbeing plan 2015-2019](#) (the Plan) guides the work of state and local governments, health services and providers, businesses and employers, and the wider community to improve the health and wellbeing of all Victorians. It outlines Victorian Government public health strategic directions to improve health and wellbeing at every life stage, including six key priorities:

- healthier eating and active living
- tobacco-free living
- reducing harmful alcohol and drug use
- improving mental health
- preventing violence and injury
- improving sexual and reproductive health.

These priorities are based on three criteria; the most significant preventable causes of poor health and wellbeing, the areas that contribute significantly to unequal health and wellbeing outcomes, as well as those where we can make changes that will make a difference to communities and individuals.

The Plan uses place-based, people-centred and healthy and sustainable environments as the key platforms to support action to address health and wellbeing priorities.

A place-based approach recognises that people and places are inter-related and that the places where people spend their time play an important role in shaping their health and wellbeing. Local context is critical. A place-based approach focuses on local needs and local priorities, engages the community as an active partner in developing solutions, and maximises value by leveraging multiple networks, investments and activities to deliver the best outcomes for communities.

The Department of Health and Human Services (DHHS) has commenced a discussion with funded prevention and health promotion organisations and councils on how Victoria can best deliver place-based primary prevention to improve health outcomes in local communities. The discussion paper - *Delivering place-based primary prevention in Victorian communities* – focuses on better aligning existing funding and efforts across organisations and across a geographic area to deliver a collective impact on health and wellbeing. The discussion paper can be accessed through DHHS Operational Divisions.

The proposed place-based prevention approach to address health and wellbeing priorities in Victorian communities intersects with, supports and builds on the many actions underway across government to deliver better outcomes, including:

- [Health 2040: Advancing health, access and care](#)
- [Ending Family Violence: Victoria's Plan for Change](#), including the family violence prevention strategy
- [Roadmap for Reform: strong families, safe children](#)
- [Education State](#)
- [Victoria's 10-year mental health plan](#) and *Victorian Suicide Prevention Framework*
- [Aboriginal Social and Emotional Wellbeing Framework](#)
- [Safe and Strong – Victoria's Gender Equality Strategy](#).

Planning alignment

To ensure a coordinated local prevention effort, it is expected that prevention and health promotion funded organisations and councils work together with DHHS and other local partners to establish a common approach to the preparation of health and wellbeing plans.

Municipal Public Health and Wellbeing Plans (MPHWPs) ideally form the base building blocks for planning at a local level, although there may be some local variations with other entities leading planning across particular catchments.

MPHWPs are a legislated requirement and provide the 'line of sight' between local and state policy. MPHWPs include goals and strategies for helping to achieve maximum health and wellbeing, details of how the community will be involved and how the plan will be executed in partnership with relevant agencies.

The alignment of prevention and health promotion planning to MPHWPs will strengthen collaborative efforts in local communities.

Partnerships are crucial to this approach and it is expected that local organisations will capitalise on existing resources by working with local partners. Organisations are encouraged to pool resources and effort where appropriate to maximise impact and investment.

Additional information for councils

The information on current policy directions provided in this document supplements the [Guide to municipal public health and wellbeing planning](#), replacing information on Victorian policy in part 1; section 1.1.

The legislation and requirements for councils under the *Public Health and Wellbeing Act 2008*, and key elements for effective planning identified in the [Guide to municipal public health and wellbeing planning](#) **have not changed** and remain relevant for the 2017- 21 planning cycle.

Additional information for prevention and health promotion funded organisations

This document provides an overview of planning and reporting expectations for organisations funded to implement prevention and health promotion initiatives under funding activity 28085 and Small Rural Health Services that are implementing health promotion/prevention activities.

Funded organisations will be required to submit a four year strategic prevention plan, annual action plans and an annual outcomes-focused report incorporating a financial statement to DHHS. Strategic plans should be high level reflecting agreed priorities of the MPHWP/agreed catchment plan, while annual action plans should be more focused on implementing the strategic priorities. All documentation should be concise.

The minimum requirements for planning and reporting are outlined in **Table 1**.

Local DHHS Divisions may provide complementary or additional requirements relevant to particular local characteristics and priorities.

Primary Care Partnerships are expected to align their prevention initiatives and contributions to a coordinated local prevention approach, however they are not required to meet the minimum requirements.

Victorian public health and wellbeing resources

- The [Victorian public health and wellbeing plan 2015-2019](#) identifies priorities for public health and wellbeing in Victoria. *Implementing the Victorian public health and wellbeing plan 2015-2019: Taking action the first two years* - summarises the major initiatives commenced or due to commence across the Victorian Government and agencies during the first two years of the health and wellbeing plan (until 2017).
- [Victorian public health and wellbeing outcomes framework](#) provides a new approach to monitoring and reporting on our collective efforts to improve health and wellbeing over the long term and reduce inequalities
- [Victorian Population Health Survey 2014](#) provides information about the health status of the Victorian population to inform policy development and assist planning efforts
- *For Discussion: Delivering place-based primary prevention in Victorian communities* promotes discussion around a new approach for place-based primary prevention and is accessible via Operational Divisions
- [DHHS Local Government Area Statistical Profiles](#)
- Additional references to support prevention and promotion of key priorities can be found on the department's website at [Preventive Health](#), [Health Strategies](#), and [Mental Health](#) and at the [prevention.health](#) website.

Role of the Department of Health and Human Services

Informing the planning and implementation approach for this cycle is an ongoing process to develop a place-based approach to primary prevention. It is important that prevention and health promotion funded organisations and councils work closely with their local DHHS contact to develop this approach and undertake strategic planning and annual reviewing processes.

You can contact your Population Health and Planning Team at your nearest [DHHS office](#).

To receive this publication in an accessible format phone 9096 0676, using the National Relay Service 13 36 77 if required, or email prevention@dhhs.vic.gov.au

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Available at www2.health.vic.gov.au/public-health/population-health-systems

Table 1: Minimum requirements for prevention and health promotion funded organisations

Funded prevention and health promotion organisations should work closely with councils, local partners and DHHS to establish and agree on the approach to the planning and reporting arrangement that is most appropriate for the local area. At a **minimum**, these requirements must be met:

Four year strategic prevention plan		
	Requirements	Reference
Due 31 October 2017	<ul style="list-style-type: none"> Should consider the Victorian public health and wellbeing plan 2015-2019 in identifying and agreeing on priorities for the municipal public health and wellbeing plan (MPHWP) / agreed catchment plan (note: a catchment plan should build on and be closely connected to local MPHWP). Should be a statement clarifying the organisations' focus over 4 years based on and aligned with the MPHWP / agreed catchment plan. Should use the data analysis and any other information (eg community consultation) developed collaboratively for MPHWP Should allow for flexible and responsive implementation 	<i>Victorian public health and wellbeing plan 2015-2019</i> Municipal public health and wellbeing plan / agreed catchment plan
	<ul style="list-style-type: none"> Should enable action to achieve improved population level health outcomes for the catchment/area Should be guided by the <i>VPHWOF</i> Should incorporate local level indicators and measures into the measurement section of the four year strategic prevention plan 	<i>Victorian public health and wellbeing outcomes framework (VPHWOF)</i>
	<ul style="list-style-type: none"> Total funding allocated by the department should be committed to implement the four year strategic prevention plan 	Funding and service agreement with DHHS
	<ul style="list-style-type: none"> Organisations should contribute to discussions/engagement activities with Operational Divisions regarding place-based primary prevention in Victoria Draft principles for place-based primary prevention should be incorporated during this planning cycle 	<i>For discussion: Delivering place-based primary prevention in Victorian communities</i> incorporating the principles (Table 2)
Annual Action plans		
	Requirements	Reference
Due 31 October	<ul style="list-style-type: none"> Include key initiatives to be undertaken, aligned with MPHWP/agreed catchment plan (including settings, approaches, target groups, indicators of success and timeframes) Clearly identify the total budget allocated to implementation of the annual plan 	<i>Municipal public health and wellbeing plan (MPHWP)</i> <i>Four year strategic prevention plan</i>
	<ul style="list-style-type: none"> Identify local indicators and definitions of success that guide implementation and assist with shorter term decision-making 	<i>VPHWOF</i> *, <i>MPHWP</i> <i>Four year strategic prevention plan</i>
	Funded organisations must use existing state wide infrastructure including: <ul style="list-style-type: none"> The Achievement Program quality frameworks if working with children's and workforce settings, the Healthy Eating Advisory Service and Healthy Choices guidelines 	State program infrastructure: Achievementprogram.health.vic.gov.au Heas.health.vic.gov.au (healthy choices)
Annual reporting to DHHS		
	Requirements	Reference
Due 31 August	<ul style="list-style-type: none"> Clearly state key results against indicators of success outlined in the implementation plan Incorporate evaluation reports, case studies/ stories to illustrate results. Include a Budget Acquittal identifying EFT and number of staff employed through prevention and health promotion funding provided by DHHS(at a minimum) Identify and advise of changes in the approach to be taken in the next annual plan The report on the final year of the cycle (due 31 August 2021) should clearly state key results against indicators of success outlined in the MPHWP / four year strategic prevention plan / statement 	Annual Action plan Strategic Prevention Plan

* Further work on defining progress measures associated with the Victorian public health and wellbeing outcomes framework is planned for 2017.

Table 2: DRAFT - Place-based primary prevention principles

DRAFT place-based primary prevention principles	
Transparent line-of-sight Local actions are aligned with the Municipal Public Health and Wellbeing Plan, which gives regard to the Victorian Public Health and Wellbeing Plan, providing a transparent view from state policy through to local action.	Prevention at scale Prevention initiatives are developed and delivered at a scale that can impact on the health and wellbeing of large numbers of the population in the places where they spend their time.
Leadership at every level A commitment to leadership for prevention and health promotion is evident at all levels, and developed and supported across multiple organisations to drive population change.	Whole of community, whole of systems approach Efforts are focused on changing the local context for the long term, addressing the underlying causes of ill health across the communities, and delivering multiple interventions, 'joined-up' action and cross-sector efforts.
A focus on equity Equity is addressed through a combination of universal approaches that impact on the structures and environments that influence our health, alongside targeted approaches to strengthen and support particular populations.	Emphasis on multi-risk factor approaches Initiatives that focus on addressing multiple risk factors are prioritised, recognising that many health issues share underlying determinants.
Culture of action, reflection and experimentation Prevention efforts are focused on taking action, experimenting to provide insight where the evidence base is lacking, and an ongoing process of reflection and adaptation to ensure strategies are effective, timely, relevant and sustainable.	Mutually reinforcing activities Activities are coordinated and mutually reinforcing across organisations to avoid duplicated or isolated efforts and generate the greatest improvements in the health of the community.
Outcomes focused Prevention efforts are focused on delivering long term outcomes for local communities, with shared local indicators established to assess progress.	<i>Note: These principles align with the guiding principles outlined in the Public Health and wellbeing Act 2008 (Sections 5 – 11)</i>