Role of Health Services

Health services are well placed to deliver prevention initiatives as they are seen as an authoritative and credible voice in the community, and are often one of the largest employers in a community. Health services have the policy line of sight that make clear links between health services strategic actions and the Municipal Public Health and Wellbeing Plan, which gives regard to the Victorian public health and well-being plan 2015-2019, providing a transparent view from state policy through to local action. This guidance outlines the policy context, prevention definitions, primary prevention principles and examples for health services to consider within this role.

Policy context

Health 2040: Advancing health, access and care, sets out the Victorian Government’s strategic directions and policy priorities to improve health outcomes for all Victorians. ‘Better Health’ is one of the key priorities listed in Health 2040, and captures health services’ capacity to address population health and wellbeing, and develop a system geared to prevention as much as treatment.

The 2017-18 Statement of Priorities requires health services to respond to Better Health (Goal 1. under Health 2040). As such, health services have been asked to align their 12 month strategic and operational priorities with Health 2040. Integrated health services and community health are also funded by the Department of Health and Human Services through Health Promotion funding to deliver primary prevention activities in their local communities aligned with local Municipal Public Health and Wellbeing plans.

Collective planning

In order to improve the health gains of patients, staff and the community, health services can employ a collective planning approach to their local priorities.

The Department of Health and Human Services Policy and Funding Guidelines 2017-18 envisages health services to continue reorientating their planning and implementation of activities to align with the legislated Municipal Public Health Wellbeing Plans in local catchment areas. As per the Health Services Act 1988 (Victoria), all metropolitan and regional Victorian public health services have a Primary Care and Population Health Advisory Committee which provides a mechanism to oversee and enhance planning for the local community. Health services that do not have a Primary Care and Population Health Advisory Committee deliver this responsibility through the relevant Executive Director within the organisation.

Health services are encouraged to engage with local councils and align their prevention initiatives with the community’s priorities outlined in the council Municipal Public Health and Wellbeing Plan. Health services can also share relevant community engagement findings across agencies within the local catchment, and where available, use statewide infrastructure relevant to the initiative to capitalise on existing resources. Health services can partner with other organisations and pool resources and effort where appropriate to maximise impact and investment.

Place-based approach

The Victorian public health and well-being 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 the Victorian Government’s public health strategic directions to improve health and wellbeing at every stage of an individual’s life course, and has six key priorities: healthier eating...
and active living, tobacco-free living, reducing harmful alcohol and drug use, improving mental health, preventing violence and injury, and improving sexual and reproductive health.

The Plan uses a place-based approach, people-centred and healthy and sustainable environments as 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 places where people spend their time play an important role in shaping their health and wellbeing. A place-based approach focuses on local needs and local priorities, engages the community as an active partner in developing initiatives and maximises value by leveraging multiple networks, investments and activities to deliver the best outcome for communities (Primary prevention principles Attachment 1).

Definitions and key concepts

The World Health Organization (2004) defines prevention as:

‘approaches and activities aimed at reducing the likelihood that a disease, injury or disorder will affect an individual, interrupting or slowing the progress of the disorder or reducing disability’.

1. **Primary prevention** aims to prevent problems occuring in the first place by eliminating or reducing underlying causes, controlling exposure to risk, and promoting factors that protect health and wellbeing, safety and social outcomes.

2. **Secondary prevention** aims to stop, interrupt, reduce or delay the progression of a problem through early detection and early intervention. *Source: World Health Organization (2004).*

Supporting resources

Table 1. outlines examples of preventive health initiatives under the [*Victorian public health and wellbeing plan 2015-2019*](#) six priority areas that can be undertaken in health services. Also, see Attachment 2 for five case studies that describe the variety of approaches health services can take to implement preventive health initiatives.

Health services are encouraged to share their prevention case studies on Department of Health and Human Services Prevention.Health website. For further information, visit the website or email prevention@health.vic.gov.au.
### Table 1. Examples of practical local activities that can be undertaken by health services

| Priority area                        | Examples*                                                                                                                                  | Resources and relevant policy links                                                                                                                                 |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------____________________________________|
| **Healthier eating and active living** | • Implement the [Healthy Choices policy](#) for hospitals and health services and the [Healthy Workplaces Achievement Program](#) in order to receive state recognition.  
  • Review the health service’s food and drink environment (including vending machines, catering and retail) through [FoodChecker](#) and the [Healthy Eating Advisory Service](#). Use this review to inform planning to create a healthy food and drink environment for visitors and staff.  
  • Engage food retailers on site to address the food and drink environment, developing contracts that meet the [Healthy Choices policy guidelines](#). The [Healthy Eating Advisory Service](#) and the [Achievement Program](#) can support health services to modify existing long-term contracts with food retailers.  
  • Ensure a [breast feeding policy](#) is in place.  
  • Review funding/sponsorship requirements and the gift giving process to align with Healthy Choices.  
  • Start the conversation with patients (i.e. brief intervention activities around nutrition and physical activity), systematically identify patient weight and BMI category and provide at least a brief intervention response to prevent and manage health risks.  
  • Review staff access to active travel (i.e. ensure that adequate end-of-trip facilities are available such as bike parking facilities for staff and visitors.)  
  • Reduce staff sedentary work environments (i.e. implementing sit to stand ergonomic products)  
  • If relevant, utilise [healthy by design](#) principles for design capital works. Where relevant, consider [Plan Melbourne and 20-minute neighbourhoods](#) when building new infrastructure. | • [Healthy Choices policy](#) provides a framework for increasing healthier foods and drinks available through food and drink retail outlets, vending machines and workplace catering.  
• [Healthy Eating Advisory Service](#) for support implementing a whole of organisation approach to healthy eating  
• [Healthy Workplaces Achievement Program](#) for a whole of organisation approach and state recognition for achievements.  
• [Healthy Active by Design portal](#) The new portal focuses on the Victorian environment and provides practical guidance, evidence, checklists and case studies to support healthier, more liveable neighbourhoods. Planners, urban designers, developers, transport engineers, health professionals and sport and recreation officers will all find this resource useful.  
• [Alfred Health drinks trial infographic](#)  
• [Plan Melbourne 2017-2050](#) provides an overview of how to make the 20-minute neighbourhood a reality for every Melburnian. |
| **Tobacco-free living**            | Employ a multi-strategic approach towards tobacco control. This should include:  
  • Implementing organisational policies to create a smoke-free health service.  
  • Meeting with local council to discuss approaches to manage smoking at hospital entrances in contravention of the [Tobacco Act 1987](#).  
  • Implementing the ABCD approach to support patients who smoke:  
    - A: Ask all patients about their smoking status  
    - B: Brief all patients about the harms of smoking  
    - C: Refer patients to the [Smokefree Victoria](#) the Victorian Network of Smoke-free Health Services  
    - D: Provide support and encouragement | • [Smokefree Victoria](#) the Victorian Network of Smoke-free Health Services  
• An extensive range of smoking cessation support options are available via [Quit Victoria](#).  
• [Start the conversation](#) challenges health professionals to raise the topic of smoking with their patients.  
• [Quit online learning module](#) for |
- **B**: Provide a brief intervention, for example advising all smokers to quit, providing written information, offering Nicotine Replacement Therapy (NRT) and referral to relevant supports (i.e. Quitline, smoking cessation clinic, General Practitioner)
- **C, D**: Communicate patient smoking status and action taken in their discharge documentation
- Implementing guidelines for the clinical management of nicotine dependency based on best available evidence (among patients and individuals living in residential care facilities).
- Actively support staff and volunteers to quit smoking.
- Making NRT available for staff and patients to increase timely access to minimise withdrawal symptoms and support patients to quit smoking by streamlining referral pathways to primary care services.
- Commit and work towards receiving state recognition for the Healthy Workplaces Achievement Program smoking benchmark.
- Joining the Victorian Network of Smoke-free Health Services to share best practice approaches to address smoking systematically throughout health services, and build capacity for effectively reducing the health impact of tobacco and smoking.

### Reducing harmful alcohol and drug use
- Start the conversation with patients (i.e. brief intervention activities around alcohol and drug use).
- Review workplace drug and alcohol policies and include harm reduction/prevention related to the provision of alcohol at work events.
- Commit and work towards receiving state recognition for the Healthy Workplaces Achievement Program alcohol benchmark.

### Improving mental health
- Build a culture that fosters staff mental health. This includes:
  - Monitoring workloads and working hours
  - Clarifying job roles and expectations
  - Fostering an open culture for staff to discuss work stressors with their managers
  - Ensuring a zero tolerance approach to bullying and harassment
- Support staff with mental health conditions by tailoring work plans that helps them stay or return to work
- Provide awareness, resources and training to staff (i.e. mental health first-aid).
- Commit and work towards receiving state recognition for the Healthy Workplaces Achievement Program mental health and wellbeing benchmark.

### Health professionals
- A 15 minute course supporting patients to become smokefree using the ABCD approach.
- An ABCD approach to supporting people who smoke: a guide for health services
- Pharmacotherapy for smoking cessation
- Hear how other large organisations created a smoke-free organisation through the Achievement Program.

### Reducing harmful alcohol and drug use
- Healthy Workplaces Achievement Program
- Alcohol and other drug workforce strategy resources

### Improving mental health
- Video clip - what is the healthy workplace Achievement Program
- Healthy Workplaces Achievement Program
- Beyondblue national workplace program - Heads up.

*Early 2018, the new WorkHealth initiative will be launched providing an integrated approach to workplace mental health. A free mental health navigator will link Victorian workplaces to quality tools and resources to help them drive improvements and make changes in their workplace to promote, prevent and address mental health and wellbeing.*
Guidance for Health Services implementing preventive health initiatives

| Preventing violence and injury | Provide access to [training](#) to build staff knowledge and skills in identifying and responding to family violence, including education to managers. |
|                               | Implement human resource arrangements for employees impacted by family violence. |
|                               | Support initiatives that builds a respectful and gender equitable workplace. |
|                               | Partner with local initiatives to deliver education and awareness programs relating to child safety (i.e. falls, poisoning and sports injuries) and abuse/neglect. |
|                               | Improve the physical and social environment of health service residential aged care facilities, especially to prevent falls. |
|                               | Continuously improving strategies to better manage behaviours of concern among patients and visitors to improve patient safety and reduce occupational violence. |
|                               | If relevant, consider infrastructure and building design to make further improvements through Healthy by Design and/or [Safer Design Guidelines](#). |
|                               | Eliminate manual handling injury ([WorkSafe](#) resources). |
|                               | **KidSafe Victoria** |
|                               | **Healthy Active by Design portal** |

| Improving sexual and reproductive health | Provide contemporary reproductive health advice and clinical services to women, including in relation to contraception, termination of pregnancy, endometriosis, polycystic ovary syndrome and menopause. |
|                                          | Support primary care providers in delivering sexual and reproductive health services to women. |
|                                          | Ensure Victorian health professionals have the knowledge to provide current and accurate advice on primary prevention options for blood borne viruses and sexually transmissible infections. |
|                                          | Increase access to and uptake of high-quality, safe and appropriate blood borne virus and sexually transmissible infections testing services that facilitate early diagnosis and rapid linkage to treatment. |
|                                          | Reduce the time between diagnosis and treatment initiation by streamlining and strengthening linkages between testing, treatment and support. |
|                                          | Address and reduce organisational and structural stigma and discrimination in community and healthcare settings for people with living with blood borne viruses. |

*stay up to date on the development of WorkHealth, health care services are encouraged to register their interest at [http://workhealth.vic.gov.au/](http://workhealth.vic.gov.au/).*

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**Women’s sexual and reproductive health: Key priorities 2017–2020**

**Policy and legislation for sexual health and viral hepatitis:**

- **Victorian HIV strategy 2017-2020**
- **Victorian hepatitis B strategy 2016-2020**
- **Victorian hepatitis C strategy 2016-2020**
• Work in partnership with local governments to ensure consistency and support prevention at a scale to impact local community.

Advice for public health and wellbeing planning in Victoria

Additional resources 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.

- Health 2040: Advancing health, access, and care
- The Victorian public health and wellbeing plan 2015-2019 identifies priorities for public health and wellbeing in Victoria.
- The Victorian public health and wellbeing outcomes framework provides a new approach to monitoring and reporting on collective efforts to improve health and wellbeing and reduce inequities in health outcomes.
- The Victorian Population Health Survey 2015 provides information about the health status of the Victorian population to inform policy development and assist planning efforts.
- 2015 DHHS Local Government Area Statistical Profiles
- VicHealth’s 2015 Local Government Area Profiles
- Health system design, service and infrastructure planning
- Plan Melbourne: 20 minute neighbourhoods

* Alfred Health has been funded to provide health services with support to implement prevention initiatives. For further information, contact Alfred Health’s Population Health and Health Promotion unit at prevention@alfred.org.au

* Four of the priority health areas may be addressed as part of the Healthy Workplaces Achievement Program which has best practice benchmarks for: healthy eating; physical activity; smoking; alcohol; and mental health and wellbeing. Working through the Achievement Program will also provide healthcare services with a systematic way to record their efforts that can be used for reporting purposes and applying for state recognition for their achievements.

References


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

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

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Attachment 1

<table>
<thead>
<tr>
<th>Place based primary prevention principles</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Transparent line-of-sight</strong></td>
</tr>
<tr>
<td>Local actions are aligned with the Municipal Public Health and Wellbeing Plan, which gives regard to the Victorian public health and well-being plan 2015-2019, providing a transparent view from state policy through to local action.</td>
</tr>
<tr>
<td>2. <strong>Leadership at every level</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>3. <strong>A focus on equity</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>4. <strong>Culture of action, reflection and experimentation</strong></td>
</tr>
<tr>
<td>Prevention efforts are focused on taking action, experimenting to provide insight where the evidence is lacking, and an ongoing process of reflection and adaptation to ensure strategies are effective, timely, relevant and sustainable.</td>
</tr>
<tr>
<td>5. <strong>Outcomes focused</strong></td>
</tr>
<tr>
<td>Prevention efforts are focused on delivering long term outcomes for local communities, with shared local indicators established to assess progress.</td>
</tr>
<tr>
<td>6. <strong>Prevention at scale</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>7. <strong>Whole of community, whole of systems approach</strong></td>
</tr>
<tr>
<td>Efforts are focused on changing the local context for the long term, addressing the underlying causes of ill health across the communities, and delivery multiple interventions, ‘joined-up’ action and cross-sector efforts.</td>
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<tr>
<td>8. <strong>Emphasis on multi-risk factor approaches</strong></td>
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<tr>
<td>Initiatives that focus on addressing multiple risk factors are prioritised, recognising that many health issues share underlying social determinants of health.</td>
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<tr>
<td>9. <strong>Mutually reinforcing activities</strong></td>
</tr>
<tr>
<td>Activities are coordinated and mutually reinforced across organisations to avoid duplicated or isolated efforts and generate the greatest improvements in the health of the community.</td>
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*Note: These principles align with the guiding principles outlined in the Public Health and Wellbeing Act 2008 (Sections 5 – 11).*
Attachment 2

Case studies

Tobacco-free living

Alfred Health was the first major metropolitan health service to become a smoke-free environment in 2008. Several years later, Alfred Health has developed and implemented a best practice, pharmacy led model for clinically managing nicotine dependency among patients. The organisation has also established a systematic approach to identifying smoking, assessing the level of dependency and making an offer of support including all forms of nicotine replacement therapy (NRT). This has seen Alfred Health patients becoming four times more likely to successfully quit smoking. The inclusion of smoking status and action taken within discharge communication has also driven the continuation of this support into the primary care sector.

Within Alfred Health’s Smokefree Clinic, a more intensive intervention approach has been adopted for outpatients where the most medically and socially complex patients achieve cessation rates of approximately 42%. This is remarkably higher than in other like services.

This best practice support has been extended into the preadmission setting with trials of NRT combined with ‘stop before the op’ communication materials quadrupling the number of quit attempts and doubling their effectiveness among patients prior to surgery. Employees of Alfred Health and its major partners are also being actively supported to quit smoking with more than 65% of participants successfully quitting in the long term.

* Achievement Program recognised.

Mental Health

Barwon Health is helping business and organisations across the Geelong region become mentally healthy workplaces via the Achievement Program. A diverse range of industry workplaces across the region (education, retail, legal, health and construction) were invited to a forum at Barwon Health to learn how to practically apply mental health and resilience concepts in a workplace setting. Attendees also had the opportunity to learn how to personally apply mindfulness and grounding concepts in their daily work life.

Healthy Choices

In 2016, thirteen health services across southwest Victoria, including Barwon Health and Hamilton’s Western District Health Service, took steps to make the healthy food choice easier for staff and visitors. This saw the health services banning the sale of sugary drinks and the removal of all sugary drinks, including fruit juices and sports drinks from fridges across all sites.

Rural Northwest Health’s YarriYak café has created a menu where close to 70% of the items on sale are in the healthiest ‘green’ category. This exceeds the 50% minimum ‘green’ Healthy Choices requirement. The café also ensures that ‘green’ items are highly visible and that ‘red’ items are available in smaller portion sizes, with the café only offering water and hot beverages.

Alfred Health is one of the first health services to comprehensively implement the Victorian Government’s Healthy Choices: food and drink guidelines for Victorian public hospitals across its retail, vending and catering services achieving 52% ‘green’ compared with 30% in 2010 and reducing red items to 19% compared with 30% in 2010. Alfred Health has also included Healthy Choices requirements within its vending tender and contractually requires its provider to ensure at least 50% availability of ‘green’ foods and drinks and no more than 20% ‘red’. Alfred Health has also removed access to ‘red’ foods and drinks from its catering practices.

In a series of behavioural insights trials, Alfred Health showed how removing ‘red’ rated drinks from display in its cafes, increasing the price of ‘red’ drinks in its convenience store and vending machines and applying ‘nudge’ messaging at the point of sale for food items achieved an immediate and sustained change in consumer behaviour while maintaining financial viability for retailers. As a result of these strategies 36,500 fewer ‘red’ drinks and 30,000 fewer ‘red’ lunches are sold at The Alfred each year. *Achievement Program recognised.

* Achievement Program recognised.
Physical activity

Alfred Health worked in partnership with Bicycle Network and its cohort of more than 8,000 employees to undertake a comprehensive travel planning process. The resulting commitment was investment in a major capital project – the Active Travel Zone. The new facility which opened in September 2015 includes 300 secure bike parks, lockers, showers and change facilities to support both health and environmental gains through active forms of travel.

In response to growing evidence regarding the harmful effects of prolonged sitting, Alfred Health has showed strong leadership through its early investment in sit to stand solutions within its work environment. In 2017, more than 900 sit-to-stand workstations are in use at Alfred Health.

* Achievement Program recognised.

Collective planning

Monash Health is working in partnership with three local governments to ensure consistency and support prevention at a scale to impact thousands of local residents. As part of this, they are delivering contemporary, place-based health promotion via the Achievement Program. They have supporting over 280 education settings and 120 workplaces to make long-term change to their policies, environment and culture to make it easier for people to be healthy. To enable this, Monash Health is also leading a ‘Prevention Leadership Group’ to drive contemporary health promotion practice and prioritise regional responses to issues in the South East. They have also:

- Developed and facilitated network meetings/clusters to link organisations together and create supportive communities of practice (e.g. local business network and local healthy children’s network)
- Linked organisations to existing support services that are aligned with key health priority areas
- Used existing local professional development networks to build momentum and encourage collaboration

Alfred Health are tackling multiple priority areas by focusing on three areas:

1. Achieving an environment which supports health by being smoke-free, increasing access to healthy foods and drinks, and providing facilities to support active travel.
2. Supporting smoking cessation among inpatients, outpatients and in the pre-admission setting, and introducing new brief intervention approaches to identify and address overweight and obesity and other risk factors through clinical interactions.
3. Supporting the health of their workforce through physical activity opportunities and providing active support to quit smoking.

With support from the Department of Health and Human Services, Alfred Health will now be helping other Victorian hospitals and health services to support healthy populations.