

Ballarat City Council

Directions in wellbeing—a project of Ballarat City Council

Project justification

The original aim of the project was to provide an integrated, comprehensive, inclusive and dynamic approach to municipal health and wellbeing planning in Ballarat, based on principles of equity, diversity and sustainability. When the project commenced, there were additional expectations that it should:

- be clear and meaningful to the council organisation
- provide a method of wellbeing assessment that is practical and leads to both general and specific strategic direction
- focus on priorities
- influence other strategies, including the corporate plan and the Municipal Strategic Statement
- assist with World Health Organisation Healthy Cities accreditation.

Method

The project followed a dual action research approach, with one strand focusing on content while the other focused on structure. It might have been more desirable if the structure had been resolved first, but the dual process enabled some level of dynamic development of the Municipal Public Health Plan. The action research approach focused on internal consultation with specific business and staff units on triple bottom line aspects or issues. This consultation was mostly initiated with background papers based on theory and/or current research.

Partners

The project was largely an internal process involving council business units.

Outcomes

- The original wellbeing matrix approach was revised in favour of a dynamic triple bottom line model of wellbeing.
- Indicators of wellbeing developed in the project have been adopted in principle to provide greater meaning to the corporate plan structure.
- Some council business units have used the Municipal Public Health Plan in funding applications.

Where to now?

- The council is yet to formally adopt this Municipal Public Health Plan. An internal and external education phase is planned to communicate how the council provides for wellbeing, thereby improving integrated planning approaches.
- The wellbeing indicators may be adopted as a means for council business units to describe their business plans and identify cross-council issues and tasks.

- Issues identified in the Municipal Public Health Plan are to be compared with corporate plan and Municipal Strategic Statement issues, to define priorities.

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Banyule City Council

Partnerships in Health Planning Evaluation – a project of Banyule City Council

Project Justification

This health evaluation project focussed on the values of partnerships and an integrated approach in health planning. It was designed to evaluate outcomes and effectiveness of an integrated approach to council's health planning during the second year of the Banyule Health Plan (2001-2004). In recognition of the ambitious nature of this task, the evaluation limited its scope to a single objective of the Health Plan – "Encouraging Physical Activity". This theme was chosen because of the potential council and external partnerships.

Method

An action learning approach was used through the development of indicators of a good partnership and the progressive application and review of those indicators. Key tasks included:

- Literature/best practice review regarding partnership and integrated planning
- Identification of service partnerships with respect to the Health Plan objective of Encouraging Physical Activity in Banyule. This included an audit of the 2002-03 Action Plan re environmental dimensions (using the *Environments for Health Framework*)
- Development of indicators for partnership and integration and establishment of data gathering mechanisms for each indicator
- Data gathering and analysis, working with partners to "reflect in practice" and identify opportunities for improved partnering and integration
- Review of partnership and integrated planning indicators and monitoring tools

Partners

Banyule City Council, (Leisure & Recreation Services, Youth Services, Leisure Facilities, Open Space Planning, Community Safety & Health), Banyule Community Health Service, North East Valley Division of General Practice, Banyule Nillumbik Primary Care Alliance and Macleod YMCA

Outcomes

- Documentation of the performance of the Banyule Health Plan and partnership with respect to "Encouraging Physical Activity" against agreed criteria
- Increased ownership & participation in the implementation of the Banyule Health Plan across the environmental dimensions
- Publication of an evaluation framework for use in other municipalities

Where to now?

The project outcomes will be shared with the council's internal and external partners and used to review current partnership and integrated health planning

processes. The learning will also help shape the 2004-2008 Banyule Health Plan. A partnership and integrated planning evaluation framework has been developed and will be shared with other organizations.

Contact

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Baw Baw Shire

Mental health: it's everybody's business—a project of Baw Baw Shire

Project justification

The submission for funding for this mental health project arose from work initiated through the Baw Baw Shire Municipal Public Health Plan. The community consultation in developing the plan identified the following key priorities for the region: (1) mental health, (2) drugs and alcohol misuse, (3) cancer, (4) farm safety and (5) meningococcal C.

The aim of the project was to improve the sense of belonging within the community through advocacy and the engagement of service providers and the whole of council, and through the development and/or promotion of sustainable programs.

Poor mental health has been linked to a variety of illnesses and injuries, including depression, suicide and others that are not so obvious (such as social connectedness). Males in the Baw Baw Shire have the third highest injury rate of all councils across Victoria. This rate includes suicide, road traffic accidents, farm injuries and other unintentional accidents.

The projected burden of disease also indicates that the dementia rate will increase in Gippsland faster than in the general Victorian population. Data indicate that adolescents and adults aged 15–24 years in Baw Baw Shire have a higher prevalence of social phobia. The community consultation for the shire's Municipal Public Health Plan indicated that the lack of support from family and friends is a critical risk factor and that being safe in the home and neighbourhood is an important protective factor for health and wellbeing of this age group.

Method

Our original submission to the Department of Human Services listed the following objectives for the project:

1. to provide a coordinated approach to the management of mental health issues within the community
2. to increase the feeling of belonging to and being part of one's community
3. to promote the impacts of poor mental health on the community

When we applied for funding, the shire's Municipal Public Health Plan's Mental Health Committee had only recently been set up. The new committee reviewed the above objectives and replaced the latter two with the following:

2. to enhance the Koori communities capacity to develop their sense of belonging
3. to identify and develop programs that promote a sense of belonging for young males.

Partners

The Baw Baw Shire Mental Health Committee (since renamed the Baw Baw Health and Wellbeing Advisory Group) consists of representatives from the Baw Baw Shire Council, the West Gippsland Health Care Group, Warragul Community House, Gippsland Child and Adolescent Mental Health, the Department of Education, the Warragul Police, the Central Gippsland Aboriginal Co-op, Primary Mental Health and Early Intervention Services, the Central West Gippsland Division of General Practice, the Warragul and District Ministers Association, the Department of Human Services (Regional Health Promotion) and the Central West Gippsland Primary Care Partnership.

Outcomes

Outcomes of the project have included a facilitator training program, the development of the West Gippsland Indigenous Youth Health Project Leadership Training Course, a Youth Card, 'Just for boys' and 'Helping your child through secondary school' information sessions, a Koori Cultural Day, the Kids Stuff Winter Festival, a rebound wall (for local Koori artists and stories) and a Koori music workshop.

Changes as result of the project have included:

- the development of the Baw Baw Health and Wellbeing Advisory Group
- the implementation of the Municipal Public Health Plan
- capacity building within local community groups, to assist them to undertake health promotion activities.

Where to now?

It is important to build on the enthusiasm and outcomes created from the initial work, so as to retain the momentum and partnerships that have developed during the program. Some objectives are still to be finalised and developed. The shire's Municipal Public Health Plan is a three-year program and requires both annual and three-yearly reviews to ensure it remains relevant to the community.

Contact

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Greater Bendigo City Council

Bendigo Health and Wellbeing Framework—a project of Bendigo City Council

Project justification

Bendigo City Council's Municipal Public Health Plan had reached the end of a three-year interval, and the next three-year period needed to be planned to address key health issues. In addition, for the previous three years, the Bendigo Safe City Forum Inc. had focused on the development and implementation of a community safety plan (*A way forward*), which had been largely implemented and was due for review.

Because the scope of the Municipal Public Health Plan and the community safety plan overlap, it was proposed that the council develop a combined plan, addressing issues in both areas.

Method

A steering committee was established to oversee the development of the project. The steering committee consisted of representatives from the council, the Bendigo Safe City Forum and the Bendigo Loddon Primary Care Partnership. The development process involved extensive research and consultation to determine best practice, the current health and wellbeing status of the community, and strategies to address identified priorities.

Outcomes

As a result, the council has developed the Bendigo Health and Wellbeing Framework. The framework provides the key policy and planning framework for health and wellbeing, in a similar way to how the Municipal Strategic Statement provides the framework for the built and natural environment.

Where to now?

The framework is in draft form and will be put on public exhibition before being adopted by the council.

Contact

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Brimbank City Council

Community leadership consultation resource—a project of Brimbank City Council

Project justification

This aim of this project was to combine Brimbank City Council's Municipal Public Health Planning in 2002–03 with the development of a community leadership consultation resource, so as to:

use Brimbank as a case study, to highlight local learning
draw conclusions about consultation with community leaders.

Method

- A steering committee was established to guide the plan and resource development.
- A Social Health and Wellbeing Forum of Brimbank-wide representatives was held.
- A review of available data was conducted.
- A key issues paper with identified priorities was presented to the steering committee.
- Community leaders at a ward level attended workshops to establish priorities and discuss community leadership issues and consultation techniques.
- Participants established strategies for the identified priorities
- The Community Leadership Consultation Resource was developed.

Partners

- Brimbank City Council
- A steering committee of identified key stakeholders
- Community leaders
- Success Works (consultants)

Outcomes

The Community Leadership Consultation Resource document:

- is interspersed with suggested tools for community leaders or those working with community leaders
- reflects contemporary thinking and modelling on community leadership initiatives
- discusses consultation and community leadership, and provides useful tools for community leaders undertaking consultation
- outlines key lessons that community leaders wish to share as part of this resource.

Where to now?

The Community Leadership Consultation Resource document is available for other councils to apply to their community projects.

Contacts

After 27 October 2003, Carol Julian, General Manager, Human Services,
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Before 27 October 2003, John Cullinan, General Manager, Organisation
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Campaspe and Murray Shire Councils

Campaspe Murray Social Research Project—a project of Campaspe and Murray Shire Councils

Project justification

- To develop a strategic focus for public health
- To undertake social research to identify the health needs of the Campaspe and Murray communities
- To provide an opportunity for Campaspe and Murray shire council staff to develop social research skills by working collaboratively with an external expert
- To identify issues common to both the Shire of Campaspe (Victoria) and the Shire of Murray (New South Wales) as part of the Victorian Municipal Public Health Plan and New South Wales social and community plan development process

Method

- A joint Campaspe/Murray steering committee was formed, consisting of representatives from the two shires, the Campaspe Primary Care Partnership and community members. A brief was developed and Globa Consultants were employed.
- Globa facilitated skills development forums/meetings with shire councillors and staff, demonstrating social research skills, including the 'storyboard' technique of community consultation.
- Community forums were conducted, using existing events/resources/networks in each council ward of the Shire of Campaspe and representative areas in the Shire of Murray. The storyboard technique was used for these forums. Key stakeholders (including agencies and the community) were contacted to obtain information in each local government area.
- Existing documentation was examined and analysed
- With the input of both councils' staff, a framework was developed in which to complete the Campaspe Municipal Public Health Plan and the Murray Social and Community Plan.

Partners

The Shire of Campaspe, the Shire of Murray, the Campaspe Primary Care Partnership

Outcomes

- The Campaspe Municipal Public Health Plan and the Murray Social and Community Plan were completed.
- A cooperative working relationship was established between the Campaspe and Murray shires and the Campaspe Primary Care Partnership.
- The Better Frameworks for Health encouraged all participants to take a far broader view of health and to break down the silo mentality within agencies.

Where to now?

A joint forum is being developed to address the cross-border issues identified within the two health plans.

Contact

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Cardinia Shire Council and the City of Casey

Postnatal depression in the urban growth corridors: better targeting our responses (research report, June 2003)—a project of Cardinia Shire Council and the City of Casey

Project justification

This joint project was an initiative of Cardinia Shire Council and the City of Casey. Both councils are in the outer south east of Melbourne and are experiencing significant residential growth. In 2002, 3003 children were born to mothers living in Casey and 680 were born to mothers living in Cardinia.

The research has the following three main aims:

1. to record the experiences and opinions of women who have suffered from depression following the birth of their children, and who are living in the south east urban growth corridor
2. to identify interventions or responses that the women perceive as being the most appropriate responses for themselves, their families and other families living with the impacts of postnatal depression
3. to serve as the basis for action and advocacy in addressing the needs of families with young children, particularly for preventing or minimising the impacts of postnatal depression for individuals and families.

Method

The research was conducted via focus groups of two to four women, rather than from interviews of individuals. The project used the definition of postnatal depression from the Post and Ante Natal Depression Association (PaNDa): 'Post natal depression is a major depression that occurs after the birth of a baby and may disrupt your ability to carry on day to day functions—the severity and number of symptoms varies between women'.

A pilot focus group was run in December 2002, involving three women. Subsequently, 10 focus groups were held between April and June 2003. Each group included two to four women, with a total of 29 participants. Overall, therefore, 32 women participated in this research.

The project recruited participants by both indirect contact (via posters) and direct contact (via health care professionals). Each participant received an information sheet and the questions to be asked during the focus group session. At the end of each session, the participants were asked to complete a confidential questionnaire, which enabled the development of a participant profile.

Of the women who participated in this research, 97 per cent reside in the designated south east growth corridor of Melbourne. Ninety per cent scored themselves as having moderate to severe depression.

Outcomes

The research revealed a serious lack of awareness about postnatal depression. This poor awareness was across the whole community, including health professionals. The level of awareness appeared to be a key factor in determining whether women sought help, and the level of awareness in a woman's immediate environment often determined the level of acceptance and assistance offered to them in the short term.

Apparent from this research was the concept that the health of the baby is closely linked to the wellbeing of the mother. Public policy and community members must remember this notion.

Where to now?

The following is a summary of the key recommendations of the women.

- 1. Increased resources for the Maternal and Child Health Program.**
Women perceived the local maternal and child health nurses as their first point of contact.
- 2. Resources for more personal and practical in-home support**
- 3. Strategies to increase public awareness of postnatal depression, particularly among pregnant women and their partners.** An increase in awareness among the general community—including a rise in the support services available—may help reduce the stigma and pressure on those women (and families) needing help.
- 4. Additional components in antenatal classes**
- 5. Universal assessments for postnatal depression** (at the six-week medical check, for example)
- 6. More facilitated postnatal depression support groups**
- 7. More accessible parenting training/groups**
- 8. Local children's services**
- 9. Welcoming local meeting places**

Support for women with postnatal depression needs to be highly visible and forthcoming. Having to seek help for themselves proved one of the most difficult things that the women had to do.

Contacts

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Glenelg Shire Council, Corangamite Shire Council, Moyne Shire Council, Southern Grampians Shire Council and Warrnambool City Council

Putting the 'c' back into capacity—a project of Glenelg Shire Council, Corangamite Shire Council, Moyne Shire Council, Southern Grampians Shire Council and Warrnambool City Council

Project justification

The Municipal Public Health Plan plays a crucial role not only in prioritising public health needs, but also in the development and implementation of appropriate strategies to address these needs. To put these strategies into place normally requires both a financial and human commitment. This project has not attempted to address the financial ramifications of municipal public health planning; rather, it has attempted to address the human resources issues facing rural municipalities.

Since the shire amalgamations, professional migration from the cities to the 'bush' has declined. This project looked at an option to reverse this trend by targeting the universities that typically provide the local government professional base. The project considered a number of local government professionals, including planners, engineers and community development officers, but selected environmental health officers because they have a large training base. There was genuine professional commitment within the consortium's environmental health officer group to trial the placement option. In addition, the group had a proven track record in joint programs over the previous two years.

Method

This project focused on the recruitment strategy for rural and regional local government areas. The project trialled undergraduate placements for periods of six to eight weeks. Placements were accepted from students who had completed their second year and before they had undertaken their final year. Students were selected from universities that local government would normally target for recruiting students after they qualify: Flinders University in South Australia and LaTrobe and Swinburne universities in Victoria. All three are within a five-hour drive of the consortium.

Once recruited, students were paid a salary based on 60 per cent of a first-year environmental health officer salary, plus provided with free accommodation. This accommodation was usually four star and located within easy walking distance from both the work placement and the town's social scene. Students were encouraged to put their environmental health theory into practice, and they actively participated in all facets of environmental health work.

At the end of the placement, students were encouraged to use the networks developed in a mentorship capacity if required. Socially, the students were encouraged to participate in the local networks and 'party' as desired. From the consortium's perspective, five shires now have direct access to a future environmental health officer recruitment pool.

Partners

The five shires involved are Glenelg, Southern Grampians, Moyne, Warrnambool and Corangamite—a consortium with a combined population of 100,000, covering 23,000 square kilometres

Outcomes

- Four students were recruited in 2002–03 for a collective placement of 26 weeks.
- One person changed professions and commenced off-campus studies as an environmental health officer.
- An environmental health undergraduate was trained and alternatively recruited as an environmental health officer.
- Presentations were provided at career nights to year 10–12 students.
- The consortium developed a network with the universities for future placements.
- The placement model is transferable to any professional group.

Where to now?

The project continues in 2003–04. Applications have already been received from undergraduates at Latrobe and Flinders universities.

Contact

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Greater Shepparton City Council

Good Practice Project: an effective community development approach to public health planning and promotion—a project of Greater Shepparton City Council

Project justification

This project by the Greater Shepparton City Council had three specific aspects:

1. facilitating community awareness, ownership and participation in public health enhancement
2. promoting a 'whole of council' approach to integrated planning
3. monitoring, reviewing and evaluating performance against year 1 Greater Shepparton public health plan (GSPHP) actions.

Method

- Community awareness of, ownership of and participation in the GSPHP were sought through a series of 'roadshows' (Powerpoint presentations) for community groups and organisations.
- The *Leading the Way* presentation was used as a catalyst for encouraging an organisational culture that embraces integrated planning.
- The Melbourne University School of Rural Health (MUSRH) evaluated performance against year 1 GSPHP actions.

Partnerships

This project has served to strengthen an extremely valuable partnership between the Greater Shepparton City Council and MUSRH. The senior MUSRH student evaluator also personally benefited from a unique opportunity to be involved in positive public health promotion.

Project outcomes

- Thirteen roadshows were conducted over approximately nine months. Evaluation of the roadshows confirmed a reasonably high level of awareness of and support for GSPHP goals, and provided a mechanism for input and feedback by interested community members.
- It is proposed that the council proceed to develop a formal integrated planning policy.
- While evaluation of year 1 GSPHP actions was positive overall, not all desired outcomes were achieved.
- There were many positive 'learnings' from this project, particularly regarding process, and everyone involved has benefited from these learnings.

Where to now?

All three aspects of the project are considered vital to the ongoing promotion of effective public health initiatives and will be continued.

Contact

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Manningham City Council

Health Status Profile—a project of Manningham City Council

Project justification

The Health Status Profile (HSP) is a key strategy of Manningham City Council's Municipal Public Health Plan and corporate plan. It was developed to assist planning by council planners and community organisations, by incorporating the four environments of health: social, economic, built and natural.

Method

- A briefing paper and draft HSP contents were developed and circulated to key stakeholders.
- Consultation was undertaken with the Municipal Public Health Plan steering committee.
- Initial key stakeholder workshops were conducted to determine available data and specific needs.
- Data were collected from all relevant organisations (federal, State, local government and non-government organisations).
- A second workshop was conducted with key stakeholders to review progress.
- Data not received were followed up.
- The HSP was finalised.
- A third workshop was conducted to discuss outstanding issues.

Partners

The council was responsible for the project, with support provided by the Municipal Public Health Plan executive (comprising council officers, the Department of Human Services, community representatives and the Local Area Planning Committee).

Outcomes

- The HSP was based on the *Environments for Health* framework.
- Council planners and community organisations have recognised the interrelationships between health and the four environments.
- Planners from other units of the council have recognised the benefits of the HSP and the value of using an integrated planning approach.
- A cross-unit planning group has been established.
- Additional concerns were identified and areas warranting research were noted.

Where to now?

- The Local Area Planning Committee is determining priorities for further research, and programs will be developed to address concerns.
- Improved planning processes across Council are expected through the cross-unit planning group.
- The HSP will assist the development of social indicators to measure the performance of the Municipal Public Health Plan.

Contacts

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Melbourne City Council

Embedding public health into the business of local government—a project of the City of Melbourne

Project justification

As the last City of Melbourne Municipal Public Health Plan was approaching its termination date, staff who had been responsible for its development identified a need to improve the public health planning process. The ability to participate in the Good Practice Program provided a valuable opportunity to explore new planning processes in preparation for the next plan.

Method

An internal Project Reference Group was established to simultaneously guide the project and provide insight into the development of new integrated public health planning structures and processes. Most members did not have a health related professional background, so the first stage of the project focused on raising the group's awareness of the social model of health by facilitating discussions at monthly meetings and circulating relevant information from national and international sources.

The second stage involved undertaking internal audits of (1) the organisation's capacity to incorporate new integrated public health planning processes and (2) the evidence of any explicit references to health outcomes or the determinants of health in current strategic planning documents.

The final stage culminated in the Project Reference Group proposing recommendations after considering the organisational context and a review of audit findings. These recommendations proposed both short term and long term actions that would progress the integration of public health planning and sustain the changes in planning structures and processes.

Partners

Because this project was internally focused, all partners were staff members of the City of Melbourne. The project management team comprised two health projects coordinators and the team leader in the health services branch. The Project Reference Group was chaired by one of the organisation's five directors and comprised senior managers and officers from units responsible for environment development, strategic planning, parks and recreation, engineering strategic planning, community safety and triple bottom line reporting.

Outcomes

A disparate group of staff from different organisational levels have been exposed to the social model of health by their participation in this public health project. Further, members of the council's public health team now better understand the consequences of the historical separation of public health planners from other strategic planners within the organisation. The lack of explicit references to

health outcomes or health determinants in strategic planning documents and reporting tools is one result of this separation.

A major outcome of the project has been the identification of the synergy between the sustainability and stages of life frameworks and the Environments for Health framework. To avoid potential confusion among staff during the practical application of these planning frameworks, there is a need to develop effective strategies to clarify this synergy.

Where to now?

Senior executives are discussing the proposed recommendations for future collaboration between public health planners and strategic planners, and for the development of a horizontally integrated planning framework and working party. Initiatives are being planned to expose more staff to the concept of the social model of health and to increase workforce capacity to undertake integrated public health planning.

Contacts

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Moonee Valley City Council

Health Incorporated Program—a project of Moonee Valley City Council

Project justification

Although Moonee Valley City Council had led health promotion action within a variety of work areas and community settings, health promotion practice has not been formally recognised within council departments. This project was necessary to link the departmental action that supported health and wellbeing in the community, to municipal public health planning and corporate planning. The project also aimed for departments to consider changing their practices to be consistent with the Ottawa Charter.

Method

Health Incorporated commenced in June 2002 and will continue until June 2004, with a strong focus on long term change. This project requires a longer time period than that required by the Good Practice Program funding, so as to create sustainable change. The project is now entering its second phase.

The project involved staff and councillors completing a questionnaire to determine their understanding of health determinants and their knowledge of health promotion action.

Workshops were held with individual or like departments, focusing on their function and presenting examples of health promotion action within their field. Each department function was then mapped within the Ottawa Charter framework. A *Leading the Way* session was held with senior managers and councillors to support the department workshops. A follow-up workshop was then held with senior managers, at which managers discussed possible ways forward.

Outcomes

Although all the intended outcomes cannot be measured at this stage, the Community Well Being team has been sourced more frequently to contribute to department program planning and consultation. The team also now presents a workshop at all council staff inductions.

Where to now?

- Data collected from the mapping exercise will be used in the action planning phase of the new Municipal Public Health Plan.
- A staff working group will be established to determine the skills and knowledge required to increase the health promotion capacity of the council organisation.
- A staff training package will be developed and included in the corporate training program.

Contact

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Moreland City Council

Health, safety and wellbeing indicators—a project of Moreland City Council

Project justification

This project grew from the council's interest in identifying and linking broad population indicators of community wellbeing with Moreland's Municipal Public Health Plan. The development of indicators has been identified as one important tool for identifying the factors that have an impact on health and wellbeing in a given community, and enabling the community to assess its progress towards local goals. This project will assist the community and the council to identify progress or decline in some indicators of community wellbeing via an easy-to-use and accessible indicators website.

Method

The project was linked with the three-year review of Moreland's Municipal Public Health Plan. Following research and community consultation in 2002–03, the new Moreland plan identified 14 'elements' that are largely based on the determinants of health. Each element was articulated as a broad goal that was then used as the base for developing indicators.

A consultant, in consultation with council officers, wrote a background and framework paper on indicators and a proposed checklist/ criteria for developing the indicators. Cross-council workshops were held to develop a set of draft indicators, which had to be directly relevant to the goals of the Municipal Public Health Plan and consistent with the framework developed. A template was developed to assist this process.

Additional review sessions with key reference groups and individuals were held before the indicators were accepted and endorsed (by the plan's steering committee, the Moreland Leadership Group, council senior management and the council chief executive officer). Ongoing development/review is to be done by an internal working group endorsed by senior management. Desirable, but not yet available, are indicators identified for further work. A brief for a website has been developed.

Partners

Officers from all council departments, staff with expertise in indicators, and the Moreland Health, Safety and Well-being Leadership Group (representing senior managers from various government agencies, local health services and the Hume Moreland Primary Care Partnership).

Outcomes

A key success of the project has been the development of strong internal participation in and ownership of the indicators, along with a strengthened understanding of the Municipal Public Health Plan and its relationship to other

key strategic council plans (such as the Municipal Strategic Statement). The project also directly stimulated action on the council's commitment to developing 'triple bottom line' indicators and to linking these indicators to broad population health and wellbeing. Community engagement and review of the indicators has been agreed as a focus of the next stage of the project.

Where to now?

The indicators are a 'first cut' based on relevance, availability, validity and sustainability. The internal working group will review and develop the indicators as new research/data become available. This work will be linked to the council's other triple bottom line indicators work. The web page design is being finalised, with a view to being on line in November 2004. Community engagement has been highlighted as a key next step.

Contact

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Buloke Shire, Gannawarra Shire and Swan Hill Rural City

Living and Working Together: A Public Health Plan for Buloke Shire, Gannawarra Shire and Swan Hill Rural City

Project justification

The project had two main strands:

1. With limited planning resources, participating agencies wanted to develop a single planning framework and an amalgamation of existing plans; and
2. Participating agencies wanted to develop a set of social indicators to measure the health and well-being outcomes that frame their plans.

Method

Evolving Ways was engaged as an external consultant to facilitate the project. A number of strategies were employed including:

- Information sessions to key participating agencies;
- Discussion forums to outline and agree upon planning cycles;
- Research of social indicators;
- Information and educative sessions to further people's understanding and knowledge of Indicators;
- Workshops to explore, develop and refine indicators;

The project experienced several set backs, with consequent changes to the methodology. Another significant change was a change in focus from a Southern Mallee-wide approach to one focused on the three separate local government areas.

Partners

The project involved member agencies of the Southern Mallee Primary Care Partnership (SMPCP), with Swan Hill Rural City Council as the fund holder and the SMPCP as the project manager and driving force.

Outcomes

The project was ambitious and has had varied results. Amalgamation of the Community Health Plan and the Municipal Public Health Plan has been achieved for each of the three municipalities. We also achieved commitment to a single planning cycle and process. A number of deferrals and changes to the project have meant that the agreed cycle and process are yet to be practically tested and refined. One municipality, Buloke Shire, has developed a suite of social indicators and agreed upon a data gathering process. That municipality has also made links between this project and the Learning Community project being undertaken through the Local Learning and Education Network (LLEN). We believe this will sustain the work.

The evolutions of this project show yet again the importance of keeping the ultimate outcome in mind, while constantly being flexible enough to adjust

processes to match the ever-changing circumstances of municipalities, agencies and groups.

Where to now?

Each municipality has set itself a planning timetable for the coming year. Buloke Shire agencies plan to trial a data gathering and reporting process to explore practical ways to use the social indicators. A number of agencies in the other two municipalities are interested to discuss how the work developed in Buloke might be used in their own municipality.

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Wodonga Rural City, Towong and Indigo Shire Councils

Environments for Health—Walking in their Shoes—a project of Wodonga Rural City, Towong and Indigo Shire Councils

Project justification

This project builds on earlier, collaborative external planning work that the Shires of Indigo, Towong and the City of Wodonga, have undertaken (such as the Primary Care Partnership Community Health Plan and the Older Persons Planning Project.) This project has provided an opportunity for the three municipalities to apply an integrated planning approach using the social model of health as the framework, to their internal planning processes.

This project has a focus on the needs of young people.

Method

The project used a literature scan to inform the development of a workplace toolkit as well as interviews and a training workshop with internal staff and focus groups with young people. The workplace toolkit was developed and then trialed in the workplace using a desktop exercise – the feedback from the exercise was then incorporated into the final draft. Evaluation included reflections on the project process through interviews with staff involved, and on the project impact through use of an opinion sheet and an email survey of staff about their level of knowledge of integrated planning and the social model of health.

Partners

The Shires of Indigo, Towong and the City of Wodonga.

Outcomes

There is evidence of an increase in the level of understanding of the social model of health and planning for the needs of a specific group in the community by senior and middle management in each of the municipalities.

Where to now?

The project is in the final stages of completion. The toolkit will need to be adopted by each municipality (which includes a policy on the social model of health and integrated planning, a planning process format and a range of resources such as checklists and formats) and recommendations from the final report will be considered for adoption, or be used to inform other relevant developments within the organisations.

Contacts

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Yarra Ranges Shire Council

Waste water management—a project of Yarra Ranges Shire Council

Project justification

Significant areas of Yarra Ranges Shire rely on septic tanks as a key means of waste water management. These systems are old and most are poorly maintained, posing significant environmental and public health issues for the immediate and broader community. Although sewerage infrastructure has been provided to parts of the shire, plans for its expansion are not scheduled for 30 years.

Unless proactive action is taken, sensitive areas such as the Dandenong Ranges will have to rely on an old and failing waste water management system even while there is rising community concern about the appropriateness such systems. In addition, traditional infrastructure solutions such as large scale pipe trenching are not appropriate in all situations.

The impact of failing waste water management cuts across social, environmental, economic and built environment concerns. Based on growing community concern and a need to preserve a Melbourne icon, an integrated planning project was developed to bring together all relevant stakeholders to find sustainable solutions.

Method

A project management team coordinated the project. The team consisted of senior managers from Community Development and Partnering, Environment, Sustainable Futures, and Planning and Corporate Strategy.

The following stages were the key components of the project.

- Inform the key stakeholders of the project and its objectives, and seek input on the clarification of roles and responsibilities (via a project information filer).
- Seek council endorsement of the project and its objectives.
- Seek the support of stakeholders to actively be engaged in the project (members of project team meeting with senior level stakeholder representatives).
- Hold a full-day stakeholder workshop to work through the issues and agree on a way forward.

Partners

State Government agencies, water authorities, community and local environment groups

Outcomes

- Increased awareness of the issues
- Improved clarity of the roles and responsibilities of stakeholders

- Improved working relationships with project team members and external stakeholders
- Council endorsement and committed funding to continue the project in 2003–04

Where to now?

As a result of the 12-month funded project, a significant profile has been developed around the issue of waste water management within the shire. New initiative funds (\$35,000) have been approved to develop a strategic plan for waste water management in conjunction with other related water management issues.

Contacts

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