

# 1997 Awards for Innovation and Excellence in Primary Health Care - Management Initiatives

## Health Promotion Plan for Darebin Community Health Centres Collaboration

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### The Program

East Preston and Northcote Community Health Centres committed themselves to producing a Health Promotion Plan for Darebin (HPP) for 1997 and beyond. The HPP is based on an analysis of Darebin's health data and demographics, current health promotion thinking, and analysis of best practice examples of health promotion in Community Health Centres and other settings, and on consultation with the staff and Boards of both Centres, other key agencies and the local community.

The program consisted of three stages and was initiated and completed during 1995-1996.

These stages were:

- Darebin Health Needs Study - completed February 1996;
- Development of a strategic framework for Health Promotion on Darebin - completed June 1996;
- Health Promotion Plan for Darebin for 1997 - completed December 1996.

The program was a 'management initiative' and will be followed by the implementation of the HPP in 1997 with continued evolution into plans for future years. The program was developed with the close co-operation of the City of Darebin, the local GP Divisions and the North Eastern Healthcare Network.

### *The aim of the program*

The aim of the program is to improve the health of the residents of the City of Darebin, in particular by targeting four health priority areas for health promotion programs. The priority areas are: mental health, heart health, Aboriginal peoples, and recently arrived refugees and migrants. Each of these priority areas have their own stated goals, rationale, background, objectives, strategies and recommendations.

### *The target group*

The broad target group are residents of the City of Darebin. More specific target groups are specified under each of the priority areas.

### *Why the program was undertaken*

The Centres believed that an essential part of their role was to provide appropriate well targeted health promotion programs for Darebin residents.

The project was undertaken to provide a foundation for health promotion activities in Darebin during 1997 and beyond. The Centres felt that their efforts in health promotion had been spasmodic and ad hoc.

Evidence was available from Deakin University, the Centre for Development and Innovation in Health, and other organisations, that a systematic approach to health promotion brought results.

More players were becoming involved in health promotion at the local level and their

efforts required co-ordination to maximise their effectiveness. The players were Community Health Centres, General Practice Divisions, City of Darebin Council and the North Eastern Healthcare Network.

### **The Strategies**

The strategies were as follows:

- the commissioning of the Darebin Health Needs Study in 1995;
- the appointment of a joint Health Promotion Taskforce that involved staff and Committee members which guided the development of 'A Strategic Framework for Health Promotion in Darebin' and a 'Darebin Health Promotion Plan';
- the adoption of the outlined priorities, endorsed by the Joint Committee of Management with an identified expenses budget;
- the appointment of a Joint Health Promotion Manager;
- the appointment of a Joint Health Promotion Committee, to replace the Taskforce, whose role is to continue to co-ordinate and encourage health promotion across Darebin;
- the adoption of joint health promotion policy and planning documentation;
- liaison with the City of Darebin throughout the project. The City of Darebin jointly developed the Darebin Health Needs Study with the Centres. The Health Promotion section within their municipal plan was based on the project's Darebin Health Promotion Plan; and,
- liaison with the General Practice Division throughout the project resulting in several joint health promotion programs in 1997, e.g. Heart Health - Factory Outreach, Health Needs of Newly Arrived Immigrants and Refugees, and the Adolescent SunSmart Program.

### **Community Participation**

All priority areas of the Darebin Health Promotion Plan have been identified through community participation during the Health Needs Study. The Plan allows for

additional health promotion activities to occur where there has been a demonstrated or requested need from the community.

### **Value for Money**

The Plan was costly in terms of start up expense. Consultancy fees, meetings and policy planning, however, have produced a solid plan from which to proceed and budgetary documentation has been incorporated into each priority area. Literature shows that a systematic approach to health promotion provides better value than an ad hoc approach.

### **Collaboration**

The strongest points of the Plan are the recognition and importance of, and continued collaboration with, the community and specialised agencies. Within the priority area collaboration is taking place with agencies such as: the Victorian Foundation for the Survivors of Torture, the Migrant Resource Centre, the Divisions of General Practice, the City of Darebin, Secondary Schools, and the Darebin Community Health Centre.

### **Outcomes Achieved**

The Plan has achieved:

- a new focus for Health Promotion in Darebin has been achieved. The HPP has been endorsed by all key agencies and its strategies and programs incorporated into key documents such as the Darebin Municipal Health Plan, and the GP Divisions' proposals for their 1997 funding round;
- East Preston Community Health Centre and Northcote Community Health Centre are committed to delivering the HPP from January 1997 and beyond;
- evaluation of the outcomes of the Plan has been incorporated into the Plan.

### **Management Initiatives**

The Darebin Health Promotion Plan is an example of 'continuous quality

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improvement programs and planning and evaluation activities'. It has brought together the two community health centres in the City of Darebin and has provided a framework for health promotion in the area. This has provided a focus for health promotion activities based on the needs of the community.

#### **Key achievements**

The programs key achievements to date include:

- the Darebin Health Needs Study;
- a Health Promotion Framework for Darebin;
- the formal adoption of a priority area based on the Darebin Health Needs Study, by Committees of Management and Staff members;
- the appointment of the Joint Health Promotion Manager and Health Promotion Committee;
- the endorsement and identification of a health promotion budget;

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- the creation of a common joint policy, planning and evaluation document;
- the endorsement and encouragement of collaboration between the two community health centres;
- the Darebin Health Promotion Plan

#### **Evaluation**

To date, health promotion activities within the health centres have been uncoordinated and largely ad hoc. Valuable time and resources have been spent on programs with little or no collaboration between the centres, and at times, between disciplines within individual centres and with other agencies involved in health promotion. This plan has highlighted what staff are currently doing in the area of health promotion and enabled them to 'join forces' and develop programs based on an analysis of health data, demographics, and best practice. The plan has also provided a future direction for health promotion programs which has increased enthusiasm from centre staff and specialised agencies.