

Action for a healthier Latrobe

Annual Community Health –
Health Promotion Action Plan

2021-2022 YEAR 1



ACKNOWLEDGMENT OF COUNTRY

We acknowledge the traditional owners of the land, the Gunai Kurnai people. We pay our respects to their Elders past, present and future, and acknowledge the living culture of the Gunai Kurnai people and the important contribution they make to Gippsland.



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Introduction

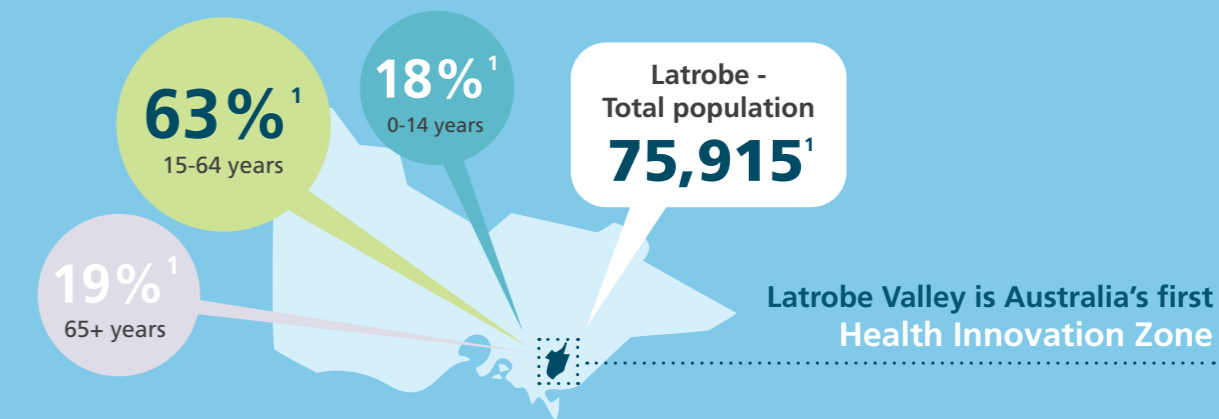
Latrobe Community Health Service is a local community health service that provides health promotion services to the Latrobe Valley. We are beginning a new four-year cycle, 2021-2025, with our strategic statement and 2021-2022 action plan, Action for a healthier Latrobe. Our vision for health promotion is 'Latrobe is a healthy and vibrant place for all'. We plan to achieve this through collaborative systems practice and innovative and sustainable initiatives that improve the health and wellbeing outcomes of our community.

Our year one action plan details all activities to be undertaken with Community Health- Health Promotion funding from Department of Health. It outlines our settings based, systems thinking approach to practice and highlights how we will measure change over time.

Action for a healthier Latrobe highlights the strong and varied partnerships we have in the region. We will continue to invest time and resources into these partnerships to deliver beneficial initiatives to the community. Our major partners in the region include; Latrobe City Council, Latrobe Health Advocate, Latrobe Health Assembly, Central West Gippsland Primary Care Partnership and We are Latrobe.

Our action plan is flexible and dynamic as we recognise we are in a time of rapid change. We look forward to working with our partners and community as we work towards better health in Latrobe.

Snapshot of Latrobe



STATISTICS FROM VICTORIAN POPULATION HEALTH SURVEY (2017)²

55% of adults in Latrobe meet the physical activity guidelines, compared to 50.9% Victorian average

13.9% of adults in Latrobe consume sugary drinks on a daily basis, compared to 10.1% Victorian average

1 in 3 (33%) adults in Latrobe have 2 or more diagnosed chronic diseases, compared to 25% Victorian average

1 in 3 (33%) adults in Latrobe have been diagnosed with anxiety or depression, compared to 27% Victorian average

6.6%* of adults in Latrobe have experienced food insecurity with hunger within the past year, compared to 3.6% Victorian average³

Only **6.7%** of adults in Latrobe eat the recommended serves of vegetables each day, compared to 9% Victorian average

Systems thinking

Over the next four years, we will continue to expand and consolidate our systems thinking and settings based approach, utilising a systems thinking framework, tools and practice to achieve a healthier community. We will build our workforce capacity and act as leaders in the application of systems thinking in health promotion.

A systems thinking approach to health promotion has proven a relevant and adaptable approach during the coronavirus pandemic. Over the last two years, we witnessed a rapid change in the system. For example, learning and working remotely for schools and workplaces, restricted operation and trading for food outlets and an overall shift in priorities for the community sector. These changes resulted in positive, negative and unintended consequences across the system. This caused us to challenge our practice and further highlighted the need for innovative thinking when implementing prevention and health promotion work within our settings.

As we transition to COVID normal, we recognise we are in a unique period in time. We acknowledge the need to be responsive to community concerns while continuing to work in adaptive and innovative ways. As a result, our action plan is flexible and dynamic, and continues to work across the system to create sustainable change.

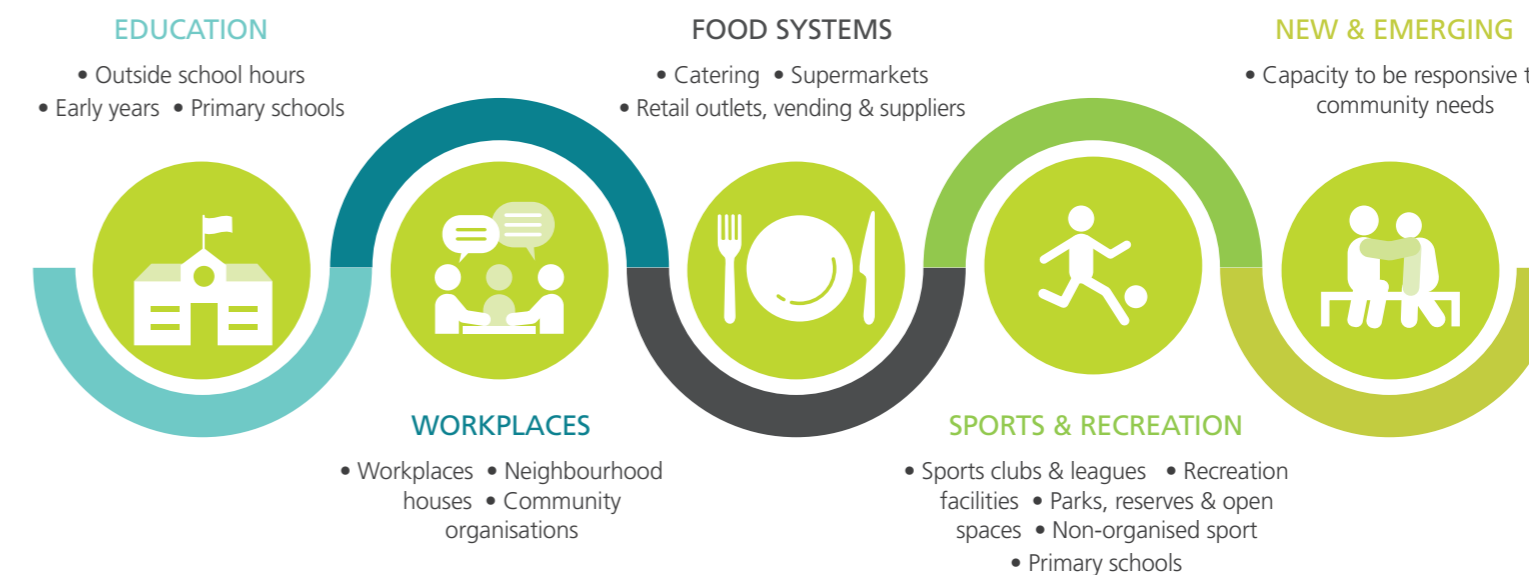
SYSTEMS FRAMEWORK⁴



Adapted from: Coffman, J. (2007, August). Build Strong Foundations For our Youngest Children – A Framework

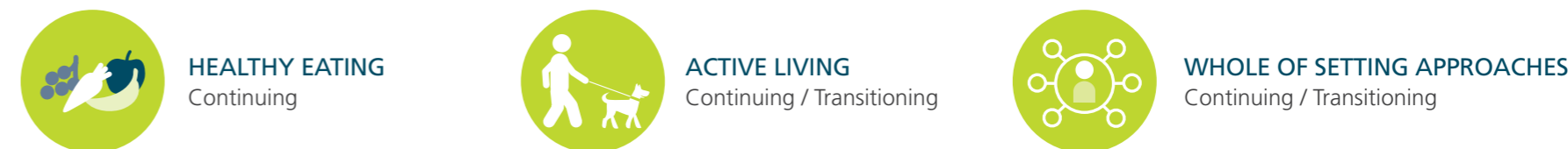
Settings-based approach

Places we live, learn, work, connect and play act as settings for change. Settings-based approaches mobilise places and partners to work collectively to improve health and wellbeing, while actions address the determinants of health to create system change. Our settings for the year one action plan are education, workplaces, food systems, and sport and recreation. The New and emerging places setting encourages us to respond to change. There are currently no actions in this setting, however we anticipate there will be actions in the next three years, as we respond and adapt to priorities, leverage and momentum.



Priority areas

Primary prevention is about changing the conditions which enable illness or injury, before they occur in the first place. In order to take a primary prevention approach to health promotion, we will address the following priority areas:



Guiding principles

Our guiding principles were informed by the Community Health- Health Promotion Draft Program Guidelines 2021-2025 and have been adapted to reflect our local context and practice.

→ EQUITY & RESPECT

We recognise the health inequities within the system and address these fairly with respect throughout all stages of our practice.

→ WHOLE OF COMMUNITY, WHOLE OF SYSTEMS APPROACH

Interventions and initiatives address multiple social determinants at various levels of the systems, where people live, work and play.

→ PARTNERSHIPS, COLLABORATION AND GOOD COMMUNICATION

Strong partnerships and good communication form the foundation of our work, allowing us to strengthen collaborative efforts, to achieve maximum health and wellbeing benefits for the community.

→ SYSTEMS PRACTICE

By making sense of complex environments we are able to address the dynamics that have the greatest potential for impact in our community.

→ TRANSPARENT LINE OF SIGHT

Local actions and outcomes are aligned, where possible, to LCHS Client Outcome Measures, Latrobe City Council's Municipal Public Health and Wellbeing Plan and the Victorian Public Health and Wellbeing Plan and Outcomes Framework.

→ APPLICATION OF CLIMATE CHANGE, HEALTH AND GENDER EQUITY LENSES

We actively utilise different lenses over our work and throughout all stages of our practice, ensuring we consider factors such as climate change, health equity and gender equity.

→ PREVENTION AT SCALE

Initiatives are delivered at scale to impact on the health and wellbeing of large numbers of the population and in the places where they spend time.

→ INNOVATE, EXPERIMENT, REFLECT AND ADAPT

To address complex systems, we problem solve and engage in continuous action learning. We push the boundaries and experiment.

→ LEADERSHIP AT ALL LEVELS

We are committed to primary prevention leadership where everyone at every level has power to make change.

→ MUTUALLY REINFORCING ACTIVITIES

We align our efforts and initiatives with our partner organisations to harness our unique strengths, working as part of a larger team to enable collective impact.

→ OUTCOMES FOCUSED

We deliver initiatives and interventions that achieve strong health outcomes for our community and measure these against the system change framework.

Health and wellbeing outcomes

LINE OF SIGHT

Our work aligns with the *Victorian Public Health and Wellbeing Plan*, *Latrobe City Council's Municipal Public Health and Wellbeing Plan* and *Latrobe Health Assembly's Strategic Plan* and uses state-wide strategic frameworks such as the Achievement Program, Healthy Choices Guidelines and Vic Kids Eat Well.

OUTCOMES

Our commitment to a transparent line of sight is evident through our use of the Victorian Public Health and Wellbeing Plan indicators as our four-year outcomes.

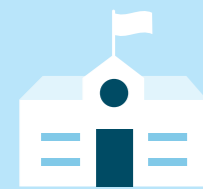
IMPACTS

In the medium term, we hope to see local intermediate changes. We will track these impacts over time to show progress towards our outcomes. Impacts are measured through state-wide indicators so we can track our progress against an average.

SYSTEMS CHANGES

As we implement activities across a systems framework, we will track our systems change indicators; *context, policy and commitment, components, partnerships and engagement, foundations and scale*. These indicators are the pre-conditions for local change, which create and strengthen environments and systems that are conducive of health. Additionally, the indicators seek to build a narrative of multiple interventions and will be explored with experts in the field and other community health services in the coming twelve months.

Latrobe 4 year outcomes					
In the long term we align and contribute to state-wide, population outcomes...					
Increase in healthy eating	Increase in active living	Increased physical and mental health in settings			
Impacts					
by achieving local intermediate changes...					
Increase in number of children and adults consuming sufficient fruit and vegetables	Increase in the number of children and adults who are sufficiently active	Increase in the number of health enabling settings			
Increase in mean serves of fruit and vegetables in adults	Decrease in the number of adults sitting for seven or more hours on an average day				
Decrease in number of children and adults who consume sugar sweetened beverages					
Measures					
that are measured...					
Proportion of children and adults who consume sufficient fruit and vegetables	Proportion of children and adults who are sufficiently physically active	Number of settings implementing the Achievement Program			
Mean serves of fruit and vegetables in adults	Proportion of adults sitting for seven or more hours on an average day	Number of settings meeting Achievement Program benchmarks			
Proportion of children and adults who consume sugar sweetened beverages		Total number of Achievement Program benchmarks met			
		Reach of the Achievement Program in settings			
Activities					
and improved through systems changes.					
Context	Policy & commitment	Components	Partnerships & engagement	Foundations	Scale



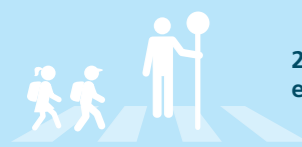
Education settings

Out of Hours School Care, Early Years Services, Primary Schools, Secondary Schools

RATIONALE

Having the best start to life is crucial to future health, wellbeing and potential. It is therefore vital to expose children and young people to positive environments (such as early years services and schools) and healthy behaviours (such as healthy eating and active living) to foster healthy growth and development.

Education settings are powerful institutions, which can influence health and wellbeing at a local level and nationwide. By implementing school-based health initiatives, such as the Achievement Program, we can support and nurture not only young people, but also staff and families.



22 actively engaged education settings

10 schools identified as the most socially disadvantaged to be targeted in our support



Estimated reach ~ 8,700 children and their families

GOAL

To create supportive and healthy education environments

OBJECTIVES

By June 2025,

- Increase the number of settings registered/engaged in the Achievement Program
- Increase the number of health priority benchmarks achieved
- Increase the number of settings working towards/achieving physical activity and movement benchmark
- Increase the number of settings working towards/achieving healthy eating and oral health benchmark
- Increase the number of settings working towards/achieving climate and health benchmark
- Increase access, availability and promotion of healthy foods and drinks in education settings
- Decrease access, availability and promotion of unhealthy foods and drinks in education settings
- Increase the number of children utilising active travel at least three times per week
- Create a workforce skilled in healthy eating and growing food
- Support settings to transition to COVID-19 normal

INITIATIVES

Leading

- Achievement Program (AP) & supported programs
- Menu planning guidelines for long day care
- School canteen and other food services policy
- Vic Kids Eat Well (VKEW)
- Let's Grow Food
- FOODcents Facilitator training

PARTNERS

Latrobe City Council, HEAS, Department of Education and Training, Cancer Council Victoria, Healthy Eating Advisory Service.

Education settings

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
CONTEXT				
1. Education settings recognise their role in creating healthy, supportive and sustainable education environments through a whole of settings approach	1.1 Education settings have a strong understanding and awareness of their capacity to improve healthy eating, physical activity and sustainable environments	1.1 Reengage with education settings	1.1 Education settings are engaged	1.1 # relationships with education settings
		1.2 Promote the benefits of health and wellbeing initiatives, including the Achievement Program	1.2 The number of education settings registered for health and wellbeing initiatives is maintained	1.2 # early years services and schools registered to the Achievement Program
	2. The Health Promotion Team have a strong understanding of the education system and the unique dynamics, demographics and opportunities for leveraging	2.1 The Health Promotion Team have a strong understanding of the education system	2.1 Scope current education frameworks and policies (e.g. Framework for Improving Student Outcomes and National Quality Framework)	2.1 Frameworks and leverage points within these are identified
2.2 Scope current health promotion actions of education settings, including food and physical activity environments			2.2 Environmental scan is completed and utilised	2.2 # qualitative and quantitative data sets gathered
2.3 Determine the need for Early Years Cook's Network			2.3 The need for Early Years Cook's Network is determined	2.3.1 qualitative and quantitative data from early years services 2.3.2 # expressions of interest received for Early Years Cook's Network
POLICY AND COMMITMENT				
3. Education settings commit to sustainable health and wellbeing practices through leadership, policy development and actions	3.1 Education settings commit to health and wellbeing in charter, policy or similar	Support education settings in the development and implementation of their health and wellbeing policies	1 Education policies, procedures and strategic documents include health and wellbeing	3.1.1.1 # policies developed and reviewed 3.1.1.2 # policies approved
		3.1.2 Demonstrate the role of education settings in creating healthy, supportive and sustainable education environments through the development of action plans and policies	3.1.2 Education settings have actions plans and policies	3.1.2 # schools with action plans or policies
		3.1.3 Seek commitment from schools to implement Vic Kids Eat Well	3.1.3 Schools commit to implementing Vic Kids Eat Well	3.1.3 Schools commit to implementing Vic Kids Eat Well
		1.4 Seek commitment from schools for staff to undertake FOODcents facilitator training	3.1.4 Schools sign up to FOODcents facilitator training	3.1.4 # schools registered for FOODcents facilitator training
		3.1.5 Seek commitment from schools to implement Let's Grow Food project	3.1.5 Schools sign up to Let's Grow Food project	3.1.5 # schools registered for Let's Grow Food project
		3.1.6 Support education settings to embed relevant healthy eating guidelines and policies into policies, tenders, contracts and agreements	3.1.6 Relevant healthy eating guidelines and policies are embedded	3.1.6 # policies, tenders and contracts developed or reviewed

Education settings

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
COMPONENTS				
4. Education settings implement a whole of setting approach to health and wellbeing	4.1 Education settings are supported in implementing the Achievement Program and relevant healthy eating policies and guidelines	4.1.1 Promote the Achievement Program, Foodchecker and Healthy Eating Advisory Service by developing and/or distributing materials and resources	4.1.1 Materials and resources have been developed and distributed	4.1.1 # and reach of materials/resources developed and distributed
		4.1.2 Build capacity for education settings to implement the Achievement Program and healthy eating policies and guidelines, through one on one support, resourcing and training	4.1.2 Education settings progress through the Achievement Program and/or healthy eating policies and guidelines	4.1.2.1 # training sessions held 4.1.2.2 # participants in training 4.1.2.3 % increase in understanding of the Achievement Program and healthy eating policies and guidelines 4.1.2.4 # settings implemented Achievement Program 4.1.2.5 # settings implemented healthy eating policies and guidelines 4.1.2.6 # schools implemented Vic Kids Eat Well
		4.1.3 Complete baseline menu assessments and work towards re-assessment	4.1.3 Baseline menu assessments are completed and progress is made towards reassessment	4.1.3.1 # and results of baseline menu assessments 4.1.3.2 # and results of menu reassessments
	4.2 Schools are supported in implementing healthy and sustainable food initiatives	4.2.1 Support schools in implementing Vic Kids Eat Well	4.2.1 Schools progress through Vic Kids Eat Well	4.2.1 # schools implementing Vic Kids Eat Well
		4.2.2 Provide resources and support to schools to implement Let's Grow Food project	4.2.2 Schools implement Let's Grow Food project	4.2.2 # schools implemented Let's Grow Food project 4.2.3 # resources developed and distributed
	4.3 Education settings are supported in implementing active travel initiatives	4.3 Support education settings to implement active travel initiatives such as Walk to School Month	4.3 Education settings implement active travel initiatives	4.3.1 # implemented active transport initiatives 4.3.2 # children within settings using active travel
5. Marketing and communication builds momentum and leads to healthy change	5.1 Education settings celebrate their health and wellbeing successes through marketing materials, events, social and local media platforms	5.1 Develop new and use existing resources and marketing materials to promote success	5.1 Resources and materials are developed	5.1 # and list of resources
		5.2 Support education settings in celebrating their successes	5.2 Case studies are developed and promoted	5.2.1 # and reach of media/social media opportunities supported

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
PARTNERSHIPS AND ENGAGEMENT				
6. Strong and effective partnerships exist between education settings, local organisations and state peak bodies	6.1 Relationships are established, maintained and strengthened with relevant stakeholders and peak bodies	6.1 Explore opportunities to engage with local networks (e.g., Department of Education and Training, Latrobe City Council Early Years Network)	6.1 New relationships with networks are formed	6.1 List of new networks engaged with
		6.2 The Health Promotion Team participate in partnerships, networks and clusters	6.2 New and existing networks and clusters are attended	6.2 List of meetings and events attended
		6.3 Build relationships with education settings	6.3 Education settings report relationships with the Health Promotion Team are meaningful	6.3 Qualitative feedback on strength or usefulness of relationship
FOUNDATIONS				
7. Education settings are health promoting environments	7.1 Education settings implement, embed and commit to actions that align with relevant state-wide programs, guidelines and policies	7.1.1 Support education settings to create healthy environments through the Achievement Program	7.1.1 Advance the progression of education settings enrolled in the Achievement Program	7.1.1.1 # and type of benchmarks achieved 7.1.1.2 # education settings achieved at least one benchmark
		7.1.2 Support education settings to implement relevant healthy eating policies and guidelines	7.1.2 Education settings implement healthy food and drinks changes	7.1.2.1 # early years services meet the menu planning guidelines 7.1.2.2 # schools meet the menu planning guidelines 7.1.2.3 proportion of G/A/R in overall school menus 7.1.2.4 % change of proportion of G/A/R in overall school menus 7.1.2.5 # small bites and big bites
		7.1.3 Identify funding opportunities for education settings to implement initiatives	7.1.3 Funding opportunities are identified and collated	7.1.3.1 List of potential funding opportunities and grants
		7.1.3 Identify funding opportunities for early years services and schools to implement initiatives	7.1.3 Funding opportunities are identified and collated	7.1.3.1 List of potential funding opportunities and grants
	7.2 Models of sustainability are implemented for initiatives such as FOODcents	7.2 Create a skilled workforce of trained FOODcents facilitator	7.2 FOODcents facilitators are trained	7.2 # FOODcents facilitators trained
	7.3 Health promotion staff build prevention skills and knowledge by undertaking professional development	7.3 Health Promotion staff continue professional development	7.3 Professional development is attended	7.3 # professional development sessions attended



Workplaces

Workplaces, Neighbourhood Houses, Community Organisations

RATIONALE

Working Victorians spend around one-third of their waking hours in workplaces, making them an ideal setting to promote health and wellbeing to a large proportion of the population. Research shows that 90.8% of people in a thriving workplace are committed to reaching organisation goals and 85.9% have job satisfaction⁵.

In Latrobe:

47% of adults are in an occupation where they are mostly sitting each day, compared to 49.6% for Victoria²



17% of adults have high or very high psychological distress (Vic 13%)⁶

In the Latrobe local government area there are currently 28 workplaces registered to the Victorian Government's Achievement Program for Healthy Workplaces, with an estimated reach of 7800 employees.

Working in partnership with community organisations to collaborate on initiatives strengthens opportunities for systemic change, benefitting the health and wellbeing of the community and its most vulnerable members.

GOAL

To promote healthy lifestyles and create supportive environments in places where we work and gather

OBJECTIVES

By June 2025,

- Increase engagement in whole of settings initiatives
- Increase availability and access to healthy food and drinks in workplaces and community organisations
- Increase mental health and wellbeing in the workplace
- Create supportive environments that facilitate increased physical activity and decreased sedentary behaviour
- Support workplaces to transition to COVID normal
- Strengthen collaborative partnerships to implement health and wellbeing initiatives

INITIATIVES

Leading

- Achievement Program (AP)
- Healthy choices guidelines
- Latrobe Workplace Health and Wellbeing Network
- Active living challenges
- Vic Kids Eat Well (VKEW)
- FOODcents facilitator training
- Social marketing campaigns
- Incentive for Healthy Workplaces

Supporting

- Make your Move (Gippsport)

PARTNERS

Cancer Council – Achievement Program and Vic Kids Eat Well, Latrobe City Council – Economic Business Development Team and Active and Liveable Communities Team, GippSport, WorkSafe Victoria – WorkWell, Latrobe Valley Authority, Latrobe Health Advocate, Latrobe Health Assembly, Headspace

Workplaces

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
CONTEXT				
1. Workplaces and community organisations understand their role in the whole systems approach to preventative health and lead the way in a shared vision with their workforce	1.1 Workplaces and community organisations are proactive in working towards a healthier community using a whole systems approach	1.1 Reengage with existing AP workplaces	1.1 Workplaces previously registered for the Achievement Program are engaged	1.1 # workplaces engaged in the Achievement Program
	1.2 Workplaces and community organisations are empowered through preventative actions on their pathway to COVID-19 recovery	1.2 Investigate workplaces and community organisations' need for health and wellbeing support to progress to COVID-19 normal	1.2 Workplace health and wellbeing needs are identified and supported	1.2 List of responsive actions
POLICY AND COMMITMENT				
2. Workplaces and community organisations commit to health and wellbeing at the highest leadership level	2.1 Workplaces and community organisations commit to implementing health and wellbeing initiatives	2.1.1 Seek commitment from workplaces to progress through the Achievement Program and/or Healthy Choices guidelines	2.1.1 Workplaces and community organisations sign up to initiatives	2.1.1.1 # workplaces registered for Achievement Program 2.1.1.2 # foundations benchmark achieved
		2.1.2 Strive for commitment from neighbourhood houses to implement Vic Kids Eat Well	2.1.2 Neighbourhood houses commit to implementing Vic Kids Eat Well	2.1.2 # neighbourhood houses registered for Vic Kids Eat Well
		2.1.3 Seek commitment from community organisations for staff to undertake FOODcents facilitator training	2.1.3 Community organisations commit to FOODcents training	2.1.3 # community organisations registered for FOODcents training
	2.2 Workplaces document their commitment to health and wellbeing in charter, policy (or similar) or action plans	2.2 Support workplaces to develop a health and wellbeing charter, policy or similar, or to embed in existing policies	2.2 Workplace policies, procedures and strategic documents have health and wellbeing embedded	2.2 # new or updated policies, procedures and strategic documents with health and wellbeing embedded
2.3 Workplaces commit to action plans that work towards a healthier working environment	2.3 Assist workplaces in action plan development	2.3 Assistance provided to develop action plans	2.3 # Action plans developed	
2.4 Commitment and shared vision from partners to collaborate on health and wellbeing initiatives	2.4 Engage with key partner organisations to collaborate on health and wellbeing initiatives	2.4 Partnerships are formed and commit to collaborative initiatives	2.4 # partners/partnerships delivering collaborative initiatives	

Workplaces

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
COMPONENTS				
3. Workplace health and wellbeing initiatives are mutually reinforcing and are aligned with local, state and national government guidelines	3.1 Workplaces and community organisations are supported in health and wellbeing initiatives	3.1.1 Re-engage and support workplaces to progress through the Achievement Program	3.1.1 Workplaces progress through the Achievement Program	3.1.1.1 # and list of benchmarks achieved 3.1.1.2 # Workplaces meeting benchmarks
		3.1.2 Promote initiatives to Latrobe Workplace Health and Wellbeing Network, e.g., Latrobe 10,000 Steps Challenge	3.1.2 Initiatives are promoted to Latrobe Workplace Health and Wellbeing Network	3.1.2 # and list of initiatives promoted
		3.1.3 Support workplaces and neighbourhood houses to implement Healthy Choices Guidelines/Vic Kids Eat Well	3.1.3 Workplaces and neighbourhood houses have completed menu assessments through Food checker	3.1.3.1 # baseline assessments 3.1.3.2 # re-assessments
4. Initiatives value add or fill the gap in the system and address workplace and community needs	4.1 Collaborative health and wellbeing initiatives with partners are implemented	4.1.1 Map current initiatives in workplaces and explore new opportunities to promote, including partner initiatives	4.1.1 Workplace health and wellbeing initiatives are mapped and relevant initiatives are promoted	4.1.1 # and list of initiatives promoted
		4.1.2 Develop and implement collaborative initiatives with partners	4.1.2 Workplace health and wellbeing initiatives are delivered and implemented in partnership	4.1.2 # and list of collaborative initiatives developed and implemented
5. Marketing materials, events and media are used to raise awareness and success of workplaces and community organisations' health and wellbeing initiatives	5.1 Workplaces and community organisations leverage marketing materials, events and media to raise awareness and promote success of their health and wellbeing initiatives	5.1 Assist in the development of marketing materials, event planning and media promotion to raise awareness and promote success of initiatives	5.1 Marketing materials, media activities and case studies are developed	5.1.1 List and reach of marketing materials developed 5.1.2 # and reach media activities 5.1.3 # and reach of case studies
PARTNERSHIPS AND ENGAGEMENT				
6. Effective and engaging connections are created with stakeholders and partners to increase workplace and community health and wellbeing	6.1 Latrobe Workplace Health and Wellbeing Network is reinvigorated	6.1 Reconnect meetings with Latrobe Workplace Health and Wellbeing Network stakeholders to understand their needs	6.1.1 Latrobe Workplace Health and Wellbeing Network review conducted	6.1.1 Latrobe Workplace Health and Wellbeing Network review report
			6.1.2 Latrobe Workplace Health and Wellbeing Network meetings recommenced	6.1.2 # Latrobe Workplace Health and Wellbeing Network meetings held
	6.2 Collaborative partnerships are established	6.2.1 Investigate opportunities for cross-system training	6.2.1 Cross-system training investigated	6.2.1 List of cross-system training
			6.2.2 Investigate opportunities to collaboratively work with partners in the prevention space	6.2.2 Collaborative opportunities identified

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
	6.3 Latrobe HP staff better understand the goals and plans of partner organisations	6.3 Actively engage in networks supporting prevention to further understand shared goals, data and impacts	6.3 Health Promotion team participate in events, networks and meetings	6.3 # events, networks and meetings attended
	6.4 Partners collaborate to better understand ways to take action on climate health	6.4 Establish climate health community of practice to share resources and ideas, and participate in training and workshops	6.4 Climate health community of practice established	6.4.1 # and reach of training and workshops
FOUNDATIONS				
7. Workplaces and community organisations are health-promoting environments with well-developed infrastructure to guide and support their workforce	7.1 Community organisations build a skilled workforce in healthy eating initiatives	7.1.1 Create a skilled workforce of trained FOODcents facilitators	7.1.1 FOODcents facilitator training implemented	7.1.1.1 # community organisations completed FOODcents facilitator training 7.1.1.2 # trained FOODcents facilitators
		7.1.2 Create healthy food environments through the Healthy Choices Guidelines/Vic Kids Eat Well	7.1.2 Workplaces and community organisations implement healthy food and drink changes	7.1.2.1 # settings compliant with Healthy Choices guidelines 7.1.2.2 # settings with at least 50% GREEN 7.1.2.3 # settings with no more than 20% RED 7.1.2.4 # settings with at least one small bite 7.1.2.5 # small bites/big bites 7.1.2.6 proportion of green, amber, red in overall menus 7.1.2.7 % changes in G/AVR in overall menus 7.1.2.8 Proportion of green, amber, red in drinks fridges 7.1.2.9 % changes in G/AVR in drink fridges
	7.2 Health promotion staff build skills and knowledge by actively engaging in professional development	7.3 Continue to complete professional development	7.3 Professional development undertaken	7.3 # professional development undertaken
		8.1 Funded partnerships enable collaborative health and wellbeing initiatives to be delivered	8.1 Jointly develop project plans and submit funding applications with partners	8.1 Project plans developed and funding applications submitted
8. Joint funding submissions and resource investment with partners strengthens prevention	8.2 Shared resources with partners enable collaborative health and wellbeing initiatives to be delivered	8.2 Share resources with partners during planning, implementation and evaluation of initiatives	8.2 Joint investment in resources	8.2 List of resource investment



Food systems

Catering, Supermarkets, Retail Outlets, Vending and Suppliers

RATIONALE

Poor diet and obesity are 'wicked problems' with significant health consequences⁷⁻⁹. It is well recognised that the causes of poor diet and obesity are beyond the individual's control, rather a result of the current obesogenic environment in which we all live¹⁰.

The food system involves the production, processing, transport, marketing, sale, consumption and disposal of food¹¹. The food system plays a critical role in influencing dietary behaviours and the food choices we make. A whole-of-systems approach is required to drive change for better health and environmental outcomes.

Food environments, including supermarkets, retail outlets, vending, catering (and indirectly, suppliers) are an interface between the food system and consumers, and will be the main focus of our work. Changing the 4 Ps of marketing (product, placement, promotion and price) has the potential to positively influence the purchasing and therefore consumption of healthy foods and drinks.



Only 6.7% of adults in Latrobe eat the recommended serves of vegetables each day, compared to 9% Victorian average²

Poor diet is a leading cause of avoidable chronic disease and premature death in Australia⁷



During the first COVID-19 lockdown, 1 in 3 Victorians ate takeaway foods less often, while a similar number cooked dinner more¹²

14% of adults in Latrobe consume sugary drinks on a daily basis, compared to 10.1% Victorian average²



GOAL

To work towards a healthier and sustainable food system for all

OBJECTIVES

By June 2025,

- Increase purchase of healthier foods and drinks
- Increase access, availability and promotion of healthy food and drinks
- Decrease access, availability and promotion of unhealthy food and drinks
- Increase capacity to prepare and consume healthier foods and drinks
- Increase health promotion staff knowledge of the co-benefits of population and climate health

INITIATIVES

Leading

- The Healthy Choices guidelines
- Healthy Supermarkets Latrobe 'Reach for the Stars'
- Healthy Catering Guide: Latrobe Region
- Healthy Vending project (TBC)
- Water as the drink of choice (TBC)
- Food For All Latrobe Valley
- INFANT Program (TBC)

Partnering

- VicHealth's Local Government Partnership project – Building better food systems for healthier communities
- Mood and Food workshops

PARTNERS

Healthy Eating Advisory Service, Latrobe City Council, Latrobe Health Assembly, Food For All Latrobe Valley

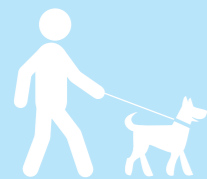
Food systems

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
CONTEXT				
1. The community demands healthy food and drink options	1.1 The community is receptive to healthy food and drink options	1.1 Demonstrate community's receptiveness to healthy food and drink options	1.1 Community's receptiveness to healthy food and drink options demonstrated	1.1.1 Qualitative data 1.1.2 Quantitative data
2. Food providers understand their influence and are engaged in creating healthy food environments	2.1 Demonstrate the role of food providers in creating healthy food environments	2.1.1 Engage with food providers	2.1.1 Food providers are engaged in initiatives	2.1.1 # food providers engaged
		2.1.2 Scope current food environments	2.1.2 Environmental scan completed	2.1.2 Environmental scan completed
3. The health promotion team has a strong understanding of the food system, the drivers of poor diet and opportunities to leverage for change	3.1 The health promotion team has a strong understanding of the food system and opportunities to leverage for change	3.1.1 Scope INFANT program (in partnership with LCC)	3.1.1 Scoping completed and recommendations are provided	3.1.1 # and list of recommendations
		3.1.2 Scope opportunities to leverage climate health co-benefits	3.1.1 Scoping completed and recommendations are provided	3.1.1 # and list of recommendations
POLICY AND COMMITMENT				
4. Food providers commit to healthy food environments through leadership, policy and actions	4.1 Food providers commit to participating in/implementing healthy eating initiatives	4.1 Seek commitment from food providers to participate in healthy eating initiatives	4.1 Food providers commit to initiatives	4.1 # sign ups to initiative
	4.2 Food providers are signatories to the Latrobe Valley Food Declaration	4.2.1 Promote the Latrobe Valley Food Declaration	4.2.1 The Latrobe Valley Food Declaration is promoted	4.2.1 # of food providers the Latrobe Valley Food Declaration is promoted to
4.2.2 Seek commitment from food providers to sign Latrobe Valley Food Declaration		4.2.2 Food providers sign Latrobe Valley Food Declaration	4.2.2 # signatories	
COMPONENTS				
5. Food providers create healthy food environments	5.1 Food providers implement the Healthy Choices guidelines (and/or similar)	5.1.1 Promote the Healthy Eating Advisory Service and Foodchecker	5.1.1 Marketing materials are developed and distributed	5.1.1 # and reach of marketing materials
		5.1.2 Complete menu assessments through Foodchecker	5.1.2 Menu assessments are completed through Foodchecker	5.1.2.1 # baseline menu assessments 5.1.2.2 # menu re-assessments
		5.1.3 Support food providers to implement the Healthy Choices guidelines (and/or similar)	5.1.3.1 Food providers increase their understanding of the Healthy Choices guidelines	5.1.3.1.1 # training sessions held 5.1.3.1.2 # participants 5.1.3.1.3 % increase in understanding of Healthy Choices guidelines

Food systems

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
			5.1.3.2 Food providers implement the Healthy Choices guidelines	5.1.3.2 # Food providers implementing Healthy Choices guidelines 5.1.3.3 # Action plans developed
		5.1.4 Develop resources for Healthy Catering Guide, Healthy Vending project and others, as applicable	5.1.4 Marketing materials are developed and distributed	5.1.4.1 List of marketing materials and resources developed and/or distributed 5.1.4.2 # and reach of marketing materials and resources
	5.2 Food providers participate in/ implement healthy eating initiatives (other)	5.2 Implement Healthy Supermarkets project	5.2 Healthy Supermarkets project is in progress	5.2 Program evaluation
6. The health promotion team advocates for and contributes to a healthy and sustainable food system	6.1 The health promotion team contributes to a healthy and sustainable food system	6.1.1 Review Healthy Choices guidelines implementation with climate health lens	6.1.1 Recommendations are made for Healthy Choices guidelines implementation to reduce impacts on climate	6.1.1 # and list of recommendations
		6.1.2 Support LCC to implement VicHealth's Local Government Partnership project – Building better food systems for healthier communities module	6.1.2 The health promotion team support the implementation of the Building better food systems for healthier communities module	6.1.2.1 # impact streams in progress 6.1.2.2 # impact streams completed
		6.1.3 Support actions of Food For All Latrobe Valley	6.1.3 Food For All Latrobe Valley actions are supported	6.1.3 # FFALV actions supported 6.1.4.1 # Mood and Food workshops
		6.1.4 Implement Mood and Food workshops	6.1.4 Mood and Food workshops are held	6.4.1.2 # participants
	6.2 The health promotion team advocates for a healthy and sustainable food system	6.2.1 Use media and marketing to advocate for food systems change	6.2.1 Marketing materials are developed and distributed	6.2.1.1 List marketing materials developed 6.2.1.2 # media cheat sheets developed/reviewed
		6.2.2 Use media and marketing to promote healthy eating	6.2.2 Media releases and activities are completed	6.2.2.1 # of media releases 6.2.2.2 # and reach of media activities
		6.2.3 Use media and marketing to promote the climate and mental health co-benefits of healthy eating	6.2.3 Media and marketing materials include co-benefits messaging	6.2.3 Messages used Y/N
		6.2.4 Food providers celebrate their success through media and marketing	6.2.4 Case studies are developed and promoted	6.2.4 # case studies developed and promoted

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE	
PARTNERSHIPS AND ENGAGEMENT					
7. Strong relationships, partnerships and networks exist between partners, settings and food providers	7.1 Collaborative partnerships exist with partner organisations	7.1.1 Explore opportunity to establish steering group for VicHealth's Local Government Partnership - Building better food systems for healthier communities module	7.1.1 Steering group established	7.1.1.1 # partnerships/steering groups 7.1.1.3 # meetings held	
		7.2 Settings and food providers have working groups to lead implementation of healthy eating initiatives	7.1.2 Develop a strong governance structure 7.2 Lead/participate in working groups with food providers	7.1.2 ToR is developed 7.2 Health Promotion team participates in working groups	
	7.3 The health promotion team participate in networks or communities of practice to strengthen practice	7.2.1 # working groups established 7.2.2 # working groups attended	7.2.1 # working groups established 7.2.2 # working groups attended	7.3 Health Promotion participates networks or CoPs	7.3 # events, networks and CoPs attended
		7.3 Participate in networks or CoPs	7.3 Health Promotion participates networks or CoPs	7.3 # events, networks and CoPs attended	
FOUNDATIONS					
8. Food providers are healthy eating environments	8.1 Food providers create healthy food environments through the Healthy Choices guidelines (and/or similar)	8.1.1 Support food providers to implement healthy food and drink changes	8.1.1 Food providers implement healthy food and drink changes	8.1.1.1 # food providers compliant with Healthy Choices guidelines 8.1.1.2 # food providers with at least 50% GREEN 8.1.1.3 # food providers with no more than 20% RED 8.1.1.4 proportion of green, amber, red in overall menus 8.1.1.5 % changes in G/A/R in overall menus 8.1.1.6 proportion of green, amber, red in drinks fridges 8.1.1.7 % changes in G/A/R in drink fridges	
		8.1.2 Evaluate business outcomes	8.1.2 Sales and customer satisfaction data collected	8.1.2.1 Sales of healthy products (\$/units) 8.1.2.2 Proportion of healthy sales 8.1.2.3 Customer satisfaction	
9. Healthier food systems are built	9.1 Food system change occurs	9.1.1 Food For All Latrobe Valley actions are achieved	9.1.1 Food For All Latrobe Valley actions are in progress/achieved	9.1.1.1 # actions in progress 9.1.1.2 # actions achieved	
		9.1.2 VicHealth's Local Government Partnership - Building better food systems for healthier communities modules are achieved	9.1.2 VicHealth's Local Government Partnership - Building better food systems for healthier communities modules are in progress/ achieved	9.1.2.1 # module in progress 9.1.2.2 # module completed Program evaluation	
	9.2 The health promotion team are supported to work in food systems	9.2.1 Apply for funding for healthy eating initiatives (as required)	9.2.1 Funding applications submitted	9.2.1.1 # funding applications 9.2.1.2 # successful funding applications	
		9.2.2 Continued professional development	9.2.2 Professional development undertaken	9.2.2.1 # professional development events/ activities	



Sports & recreation

RATIONALE

Insufficient physical activity is a major risk factor for chronic conditions. Sports and recreation participation plays an active role in improving the physical and mental health and wellbeing of the community.

These settings are in a position to influence the provision and marketing of healthy foods. Sports sponsorship also has an effect on children's food preferences. An Australian study of 10-14 year olds involved in local sport found the majority of children thought their club's food and beverage sponsors were cool and liked to buy their products¹³. This highlights the need to reduce unhealthy sponsorship in sport clubs.



A little over half the population in Latrobe meet the daily physical activity guidelines²

Parents exposed to unhealthy food and drink sponsorship at children's sporting activities are nearly twice as likely to choose unhealthy products when asked to select a preferred food brand¹⁵



More than two-thirds of the community would like to increase their physical activity⁶

55% of Australian adults do not meet the physical activity guidelines¹⁴



Systems thinking mapping has identified 27 potential future projects to increase physical activity in Latrobe Valley

GOAL

To strengthen partnerships and explore ways of improving health and wellbeing in sports and recreation settings

OBJECTIVES

By June 2025,

- Increase and strengthen partnerships with relevant stakeholders and specialist organisations
- Create supportive environments that facilitate physical activity and decrease sedentary behaviour
- Increase availability, access and promotion of healthy food and drink options and decrease availability, access and promotion of discretionary food and drinks
- Reduce barriers for participation for targeted cohorts with low levels of physical activity
- Increase opportunities for all community members to be active

INITIATIVES

Leading

- Vic Kids Eat Well
- Healthy Choices guidelines

Partnering

- VicHealth's Local Government Partnership project – Building active communities
- Make Your Move Latrobe

Supporting

- Gippsland Street Games
- Gippy Girls Can
- Good Sports
- GippSport Club Champion program
- Kiddo Gippsland GippSport

PARTNERS

GippSport, Latrobe City Council, Latrobe Leisure, Latrobe Health Assembly, Vic Kids Eat Well, Healthy Eating Advisory Service, Sports and Recreation Victoria, sporting leagues and associations, clubs

Sports & recreation

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
CONTEXT				
1. The Partners and sport and recreation settings understand the complexity and context of health in sport and recreation places	1.1 The Health Promotion team continues to seek to understand our role in the context and complexity of the sports club and recreation system, through mapping, feedback and reflection	1.1.1 Review existing mapping	1.1.1 Mapping is reviewed and recommendations are made	1.1.1 # and list of recommendations
		1.1.2 Develop relevant databases	1.1.2 Databases are developed and maintained	1.1.2 Up to date database
	1.2 Demonstrate the role of sports and recreation settings in creating healthy and inclusive environments	1.2 Engage with sporting clubs and recreation settings	1.2 Sports and recreation settings are engaged in initiatives	1.2 # sports and recreation settings engaged
POLICY AND COMMITMENT				
2. Sports and recreation settings commit to healthy and supportive environments through leadership, policy and actions	2.1 Partners are committed to working collaboratively to improve physical activity options	2.1 Commit to formalised partnerships	2.1.1 Terms of reference are developed	2.1.1 # ToR
			2.1.2 Collective action plans are developed	2.1.2 # action plans
	2.2 Sports and recreation settings commit to participating in/ implementing healthy eating initiatives	2.2 Seek commitment from sport and recreation settings to participate in healthy eating initiatives	2.2 Sport and recreation settings commit to healthy eating initiatives	2.2 sign ups to VKEW/Healthy Choices guidelines
COMPONENTS				
3. Physical activity initiatives are mutually reinforcing and aligned with national, state and local (Council and Latrobe Health Assembly) government guidelines and strategies	3.1 Sports and recreation settings participate in health promotion initiatives	3.1 Support LCC to implement VicHealth's Local Government Partnership project – Building active communities module	3.1 The Health Promotion team support the implementation of the Building active communities module	3.1.1 # impact streams in progress 3.1.2 2 # impact streams completed
		3.2 Promote existing local health promotion initiatives	3.2 Marketing materials are distributed	3.2 List and reach of marketing materials and resources developed and/or distributed
4. Settings create healthy and supportive environments	4.1 Sports and recreation settings are aware of the Healthy Choices guidelines or VKEW (and/or similar)	4.1.1 Promote the Healthy Choices guidelines or VKEW (and/or similar)	4.1.1 Marketing materials are developed and distributed	4.1.1 List and reach of marketing materials and resources developed and/or distributed

Sports & recreation

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
	4.2 Heart Foundation walking groups are sustainable and self-sufficient	4.1.2 Support settings to progress through the Healthy Choices guidelines or VKEW	4.1.2 Settings progress through the Healthy Choices guidelines or VKEW	4.1.2.1 # settings implementing Healthy Choices guidelines 4.1.2.2 # settings implementing VKEW
		4.2.1 Co-design a sustainable model	4.2.1 A co-designed model is developed	4.2.1 Model completed
	4.3 The Latrobe 10,000 steps challenge is implemented, evaluated and alternative programs explored	4.2.2 Support Heart Foundation walking groups to transition to self-sufficient model	4.2.2 Heart Foundation walking groups have independence	4.2.2 # walking groups successfully transitioned
		4.3.1 Implement the 10,000 steps challenge	4.3.1 The 10,000 steps challenge is implemented	4.3.1 # of participants/workplaces engaged in Latrobe 10,000 Steps Challenge
		4.3.2 Evaluate the 10,000 steps challenge	4.3.2 The 10,000 steps challenge is evaluated and recommendations are made	4.3.2 # and list of recommendations
	4.3.3 Scope alternative programs or implementation	4.3.3 Alternate programs or implementation strategies are identified and selected	4.3.3 List of alternative programs/ implementation strategies	
5. Marketing and communication activates community participation and awareness of health conducive places	5.1 Sport and recreation settings leverage marketing materials, events and media to raise awareness and promote success of their health and wellbeing initiatives	5.1 Assist in the development of marketing materials and media promotion to raise awareness and promote success of initiatives	5.1 Marketing materials, media activities and case studies are developed	5.1.1 List and reach of marketing materials developed 5.1.2 # and reach media activities 5.1.3 # and reach of case studies
PARTNERSHIPS AND ENGAGEMENT				
6. Strong connections exist within the sports and recreation setting	6.1 Collaborative partnerships exist with partner organisations	6.1 Identify relevant partners	6.1 Relevant partners are identified	6.1 # and list of partners engaged
		6.2.1 Explore opportunity to establish or attend a steering group for VicHealth's Local Government Partnership – Building active communities module	6.2.1 Steering group established	6.2.1 # steering group meetings held
	6.2.2 Participate in networks or CoPs	6.2.2 Health Promotion participates networks or CoPs	6.2.2 # events, networks and CoPs attended	

FOUR YEAR INDICATOR	CHANGE STATEMENT	ONE YEAR ACTION	ONE YEAR INDICATOR	MEASURE
FOUNDATIONS				
7. Sport and recreation settings are healthy and inclusive environments	7.1 Sport and recreation settings create healthy and inclusive environments through meeting requirements of state wide programs and local initiatives such as Healthy Choices guidelines or VKEW	7.1 Support sport and recreation settings to meet state wide program or local objectives such as Healthy Choices guidelines or VKEW	7.1 Sport and recreation settings meet statewide and local objectives e.g. Healthy Choices guidelines met, VKEW guidelines met	7.1.1 # of sport and recreation settings compliant with Healthy Choices guidelines 7.1.2 # sport and recreation settings with at least 50% GREEN 7.1.3 # sport and recreation settings with no more than 20% RED 7.1.4 # settings with at least one small bite 7.1.5 # small bites/big bites 7.1.6 # sport and recreation settings with at least one small bite 7.1.7 Proportion of green, amber, red in overall menus 7.1.8 % changes in G/A/R in overall menus 7.1.9 Proportion of green, amber, red in drinks fridges 7.1.10 % changes in G/A/R in drink fridges
		7.2 Health Promotion staff build skills and knowledge by actively engaging in professional development	7.2 Continue to complete professional development	7.2 Professional development undertaken
8. Joint funding submissions and resource investment with partners strengthens prevention	8.1 Funded partnerships enable collaborative health and wellbeing initiatives to be delivered	8.1 Jointly develop project plans and submit funding applications with partners	8.1 Project plans developed and funding applications submitted	8.1.1# of funding applications 8.1.2 # of successful funding

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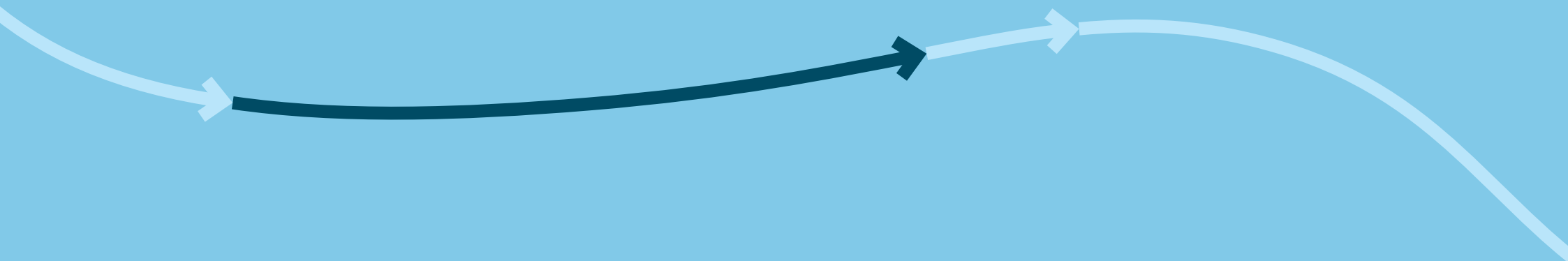
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Appendix 1: System Change Indicators

The *System Change Indicators* (developed by Monash Health Health Promotion Team (2018) and are based upon BUILD Framework (2007), Healthy Together Victoria’s System Change Logic, and the World Health Organisation’s System Building Blocks and Ottawa Charter.

The *Indicators* will measure local system change (impacts and outcomes). Local level environmental and system change create places that are conducive of health and wellbeing and will contribute to population health and wellbeing outcomes.

CONTEXT	POLICY AND COMMITMENT	COMPONENTS	PARTNERSHIPS AND ENGAGEMENT	FOUNDATIONS	SCALE
<p>Context, complexity, and leverage points are understood through:</p> <ul style="list-style-type: none"> • System mapping • Intelligence gathering <p>Community is engaged and mobilised</p> <p>Community demands change</p> <p>Communication & marketing activates readiness & leadership for change</p> <p>Places, influencers & partners understand the importance of their contribution to prevention:</p> <ul style="list-style-type: none"> • Readiness & leadership for change • Problem recognition or reframing • Vision setting • Assessments & ratings • Benchmarking 	<p>Places, influencers & partners formally commit to prevention through:</p> <ul style="list-style-type: none"> • Policy, strategy, standards, shared vision or actions • Prevention embedded in strategic & operational plans • Alignment or influencing policies & procedures • Action plans & quality improvement plans <p>Coordinated & shared prevention language</p>	<p>Places, influencers & partners participate in prevention through:</p> <ul style="list-style-type: none"> • New initiatives • Capacity building • Rewards, resources & incentives • Accessing services <p>Existing components are modified, improved & leveraged</p> <p>Resources, marketing & communications collateral developed</p> <p>Media coverage</p> <p>Components aligned to match community need & demand</p> <p>Initiatives are mutually reinforcing</p>	<p>Collaborative relationships & networks are strengthened to leverage change through:</p> <ul style="list-style-type: none"> • Participation in shared decision making (collaboration) • Development of shared competencies & skills • Sharing of data & systems • Participation in networks & events • Connecting partners & places • Partners are connected outside of the health sector <p>Communities of practice established or continued</p> <p>Place, influencers & partners lead local prevention action</p>	<p>Allocation of new or redistribution of assets & funding to meet prevention needs, including:</p> <ul style="list-style-type: none"> • Allocation of internal & external staffing • Key performance indicators developed • Investment in resources & incentives • Links created to external funding <p>A skilled workforce built through professional development</p> <p>Policy, components & action embedded in places</p> <p>Healthy options are available & environments are health promoting:</p> <ul style="list-style-type: none"> • Place changes • Healthy & unhealthy options 	<p>A comprehensive system is available to as many people as possible, through:</p> <ul style="list-style-type: none"> • System spread • System depth • System sustainability • Shifts in system ownership • Outcomes precede impacts



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