



Latrobe Health  
Assembly

Shaping  
The Valley

# Annual Report.

2019-20

The Latrobe Health Assembly proudly acknowledges Victoria's Aboriginal communities and their rich culture and pays respect to their Elders past and present.

We acknowledge Aboriginal people as Australia's first peoples and as the Traditional Owners and custodians of the land and water on which we rely.

We embrace the spirit of reconciliation, working towards the equality of outcomes and ensuring an equal voice.

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# OUR VISION, PRIORITY AREAS, VALUES & HOW WE WORK

*The Latrobe Health Assembly is a community-led organisation that seeks to positively shape and facilitate new ways of working to improve health and wellness in Latrobe. This is achieved by facilitating and enabling collaboration among the local communities, local organisations and statewide agencies and government.*

As part of the evolution process, the Latrobe Health Assembly has undergone a number of restructures and changes in operation since establishment in 2016. This has reflected a commitment to growth and adaptability, and has been responsive to Assembly feedback and the Deloitte evaluation.

The Latrobe Health Assembly has four key priority and focus areas which underpin all initiatives and activities. As voted by the full Assembly, the priority areas for 2020 are:

1. **ACTIVE LIVING,**
2. **EARLY CHILDHOOD DEVELOPMENT AND LEARNING,**
3. **COMMUNITY CONNECTEDNESS AND VULNERABILITY, AND**
4. **MENTAL HEALTH**

## PRINCIPLES

Drawing on the principles in the Latrobe Health and Wellbeing Charter, the Latrobe Health Assembly will:

1. Enable and support the community-led approach to ensure all people, including those who are marginalised and underrepresented, have choice, control and a voice in developing the supports and services they need in their lives.
2. Work with First Nations communities and health service providers to improve health and wellbeing.
3. Do something different, try new

approaches and learn from mistakes to create new and innovative health and wellbeing models and programs.

4. Be fair and transparent and follow through on commitments to Latrobe Valley communities.
5. Communicate in plain language to build trust and respect among individuals, families, communities and service providers.
6. Work to improve the lives of everyone, especially the most vulnerable and disadvantaged people in the Latrobe Valley community.
7. Develop equitable access to the most appropriate supports and services for all people in Latrobe Valley.
8. Grow and nurture collaboration and coordination between agencies to develop new ways of delivering services that cut across boundaries to best meet the needs of each person.
9. Use a co-design model to reshape and reimagine health services in the Latrobe Valley, and create innovative approaches to their design and delivery.

## VALUES

The Latrobe Health Assembly adheres to the core values identified by the Latrobe Valley community in the Latrobe Health and Wellbeing Charter. These values are:

- Collaborative enablement of engagement,
- Integrity,
- Innovation,
- Access,
- Inclusion, and
- Equity

## WAYS OF WORKING TOGETHER

In addition to these values, a number of defining principles were identified by stakeholders. The Assembly works in ways that are:

- Responsive, dynamic and agile; as well as Sustainable.
- Sustainability needs to be considered in two ways: the first being that programs that the Assembly implement need to be sustainable in the future after the initial funding has finished; the second being that the Assembly also need to consider environmental sustainability and impact in program design and adaptation.



**WORKING TOWARDS A  
HEALTHIER FUTURE FOR  
LATROBE VALLEY**

# A BRIEF LOOK AT OUR JOURNEY

*In response to the Hazelwood Mine Fire Inquiries, the Victorian Government designated the Latrobe Valley as a Health Innovation Zone, the first of its kind in Australia.*

## 2014

### THE HAZELWOOD MINE FIRE

A fire burned in the Hazelwood coal mine for 45 days in February and March 2014. This fire had significant impacts on the Latrobe Valley community.



## 2016

### DESIGNATION OF THE LATROBE HEALTH INNOVATION ZONE

Following the Hazelwood Mine Fire Inquiry, the Victorian Government designated the Latrobe Valley as a Health Innovation Zone in 2016 to improve health outcomes in this region.



## 2018

### LAUNCH OF THE LATROBE HEALTH INNOVATION ZONE CHARTER

The Charter was written in collaboration with Latrobe Valley communities and organisations dedicated to improving health and wellbeing in the Latrobe Health Innovation Zone.



## 2014-15

### THE HAZELWOOD MINE FIRE ENQUIRY

In 2014 and 2015 the Victorian Government held the Hazelwood Mine Fire Inquiry. The Victorian Government committed to all 246 actions resulting from the inquiry.



## 2016

### THE LATROBE HEALTH ASSEMBLY IS FORMED

The formation of the Latrobe Health Assembly is a key component of the Health Innovation Zone and is a mechanism for increased community engagement leading to health improvement and integration of services.



**2018**

**APPOINTMENT OF THE LATROBE HEALTH ADVOCATE**

Reporting directly to the Minister for Health, Ms Anderson plays a critical role in providing independent advice to the Victorian Government on behalf of the Latrobe Valley community issues affecting their health and wellbeing.



**2020**

**RESTRUCTURE OF THE LATROBE HEALTH ASSEMBLY**

Following the departures of the founding Chair and founding Executive Officer, a new structure has been implemented to drive the organisations agenda with the appointment of Ellen-Jane Browne as Executive Officer and Tanya Rong as Chair.



**2018**

**LATROBE HEALTH ASSEMBLY ADOPTS LONG TERM GOAL**

Working with community to reach the goal of 10,000 more people with better health and wellbeing in 10 years.



**2017-2020**

**OVER 130 PROJECTS HAVE BEEN IMPLEMENTED FOR THE LATROBE VALLEY**

Within our short three year period of operation, the Latrobe Health Assembly has delivered over 130+ projects to the community of Latrobe.



# STATEMENT FROM THE CHAIR

*Latrobe Health Assembly Chair, Ms Tanya Rong*

Dear Members,

It is with pleasure that I present the Annual Report for 2019-2020. This annual report reflects a lot of change for the Latrobe Health Assembly. Firstly, we had a change in leadership. I would like to take the opportunity to express gratitude and acknowledge the wonderful work and contribution of Executive Officer Ian Needham and founding Chair John Catford in setting the Latrobe Health Assembly on the path for success. We welcomed Ellen-Jane Browne to the Assembly as the Executive Officer, and myself as the Independent Chair. A restructure of the internal staffing group has followed as we welcomed Josephine Manco, Damen Francis, Robyn Jennings and Chloe Benson to the team this year.

At the beginning of the year, we launched a new operating model, there were summits planned for the nominated four key themes and there was a lot of positivity and possibility about a new model and the opportunities it presented for community engagement. However, this all changed when we were hit by COVID-19 and a global pandemic. It has changed our world in ways we could never have imagined. It has tested and challenged us all and forced us to adapt, be creative, and to be agile in our ever-changing environment.

The staffing team commenced working remotely in March, and they were quick to adapt to a rapidly evolving situation. Given that the majority of our work is in community engagement, the way we work had to change.

I am proud of the flexibility and resilience of the staff and our community members in response to this pandemic. The Latrobe Valley community have been enriched by the work of the Latrobe Health Assembly, and more broadly, the work of the Latrobe Health Innovation Zone. Our unique existence within the community has allowed us to respond to community need, to identify gaps in support services, to co-ordinate a localised communications group in response to COVID-19, and to provide a variety of initiatives to promote physical and mental wellbeing, and to create social connection.

Our performance over the past financial year reflects the impact of the COVID-19 pandemic, with many community engagement activities having to be postponed, current projects either majorly impacted in terms of delivery, or having to adapt to a smaller delivery model. This has resulted in many of our projects needing to be extended and supported in order to reach their deliverables.

**OPPORTUNITY:** This year has been difficult and unprecedented for our community. It has also provided opportunity for diversification of our work in testing and trialling online and virtual engagement activities as well as the opportunity to lead activities in Latrobe Valley that centre on social connection, caring for our community and communication through COVID-19.

**CONNECTION:** As the global pandemic progressed and lockdown restrictions were enforced, the Latrobe Health Assembly recognised the need for our community

to stay socially connected while we were physically distant. We have demonstrated creativity and innovation in providing a diverse range of opportunities for connection, recognising that not everybody has access to technology. We have produced a COVID-19 booklet that has been delivered to every household in Latrobe Valley which outlines services and resources that may be needed at this time. The Extra-Time Newsletter is now celebrating over 150 editions and has been a wonderful example of connection. It provides articles, tips, tricks and fun activities for readers as a response to lockdown, and is a great source of COVID-19 specific information. There have been virtual coffee chats, kindness posters, an ISO film festival and many other creative examples of connection.

**COLLABORATION:** The increased need to come together to support our community has strengthened relationships with many of our foundation agencies, community groups and members of the community. The Health Assembly has worked alongside local and state government, the Latrobe Health Advocate, and key organisations to provide timely initiatives and strategies that best suit our community needs during the pandemic.

**INNOVATION:** The global pandemic has driven us to embrace new and emerging technology and explore futuristic and innovative project design. Innovation has been showcased in every aspect of the Assembly's way of working, and recovery from the COVID-19 pandemic will need innovation and creativity.





As I look forward to the next year, I am optimistic and excited to work with a team and assembly of people who are passionate about the health and wellbeing of the Latrobe Valley community, and committed to our strategic vision to shape and facilitate new ways of working to improve health and wellness in Latrobe.

On behalf of the Board, I thank the staff and Assembly members for their ongoing commitment to testing and trialling new ways of working, and for their dedication to our work and community.

The first six months with our new leadership model has been highly productive, with the development of a new strategic plan, the strengthened collaboration within our community, and the implementation of new programs as well as continued work in existing ones. I am confident that we are in a fantastic position to not only support our community, but as an organisation, that we can lead the Latrobe Valley during recovery from COVID-19 and beyond, to be a community that is healthier, more resilient, and a place that everybody is proud to call home.

**TANYA RONG**

Chair, Latrobe Health Assembly

# STATEMENT FROM THE EXECUTIVE OFFICER

*Latrobe Health Assembly Executive Officer, Ms Ellen-Jane Browne*

The past twelve months have been a period of significant change for the Latrobe Health Assembly with a new Chair and Executive Officer building on the foundations laid by Professor John Catford and Ian Needham over the preceding three years. To Ian and John must go our sincere thanks for the time and energy they gave to the Assembly, it was deeply appreciated.

But Ian and John did not build the Assembly alone and so to the Board, the Assembly members and the staff must go much thanks. Collectively you have built something that is unique in an Australian context and for this the Assembly and its members can be very proud. As you will discover when you read through this report much has been achieved and the range of projects and initiatives that have been completed is to be commended.

What is even more amazing is the fact that much of this work has been completed in the most difficult of years. It would be fair to say that 2020 has been a year of uncertainty with massive bushfires earlier this year impacting on the lives of many of our neighbouring towns, and this in turn impacted on many within our own community. And no sooner had the bushfires ceased and we all thought life could return to normal... COVID-19 arrived.

It's arrival brought changes to our lives which we could never have imagined, with all of you learning the new world of Zoom, Microsoft Teams and the like, and meetings and social connection taking on entirely new forms as a consequence. The way we worked also changed, I suspect forever, and so the team

at the Assembly found themselves working from home from early March and they are yet to return.

Having joined the Assembly in early May it has been wonderful to watch everyone adapt so readily to this new world and to see the incredibly initiatives that have emerged... the Extra Time newsletter, the COVID-19 Challenge, the COVID Community Resource booklet, the virtual seminars, and the webinars to name but a few.

COVID 19 has required all of us to be creative and without exception the Board, the Assembly and the staff have worked together to ensure that the work of the Latrobe Health Assembly has kept going. Surprisingly COVID 19 has also provided the Assembly with the opportunity to better connect with our communities and our partners.

As the lead for the Latrobe COVID-19 Communications and Engagement Steering Group it has been an incredible experience to work with the Department of Health and Human Services, Latrobe Health Advocate, Latrobe City Council, Latrobe Community Health Service, Latrobe Regional Hospital, Gippsland Primary Health Network and the Central and West Gippsland Primary Care Partnership. Together this group has ensured consistency of messaging across Latrobe and as a group we have been able to inform the work of others working not just in the Latrobe Valley, but also across the rest of Gippsland and the State more broadly.

In this regard COVID 19 has afforded the Latrobe Health Assembly the opportunity

to show firsthand the power that sits with community and the importance of placed based approaches to managing complex health issues in timely and informed ways. The Assembly can be justifiably proud of having played a small role in ensuring that our community is part of the solution to this most insidious of diseases.

2020 has also been a time to press the refresh button on many of the processes that sit behind all we do. Thus as the team has been confined to quarters we have been able to write and have approved a new Strategic Plan, develop a work plan that for the first time describes in full what we do and how we might go about it, and, at the time of writing, have in place a draft of a strategic communications and engagement plan. Going forward each of these will help us better engage with each other and will also help guide us as we reengage in a post COVID-19 world.

At the same time, a whole swathe of operational processes and systems have been either refreshed and/or implemented. Much of this work is invisible to the broader community, but it will mean that going forward we have support mechanisms sitting behind everything we do that are robust and which will ensure that we meet our obligations for reporting and accountability to community, government and the Assembly. Strengthened Project Control Groups are part of these changes and will ensure that all Assembly members have the opportunity to fully contribute to programs for which they may be interested.



Pressing refresh also afforded us the opportunity to restructure the team so that we now have clear leads for Programs and Innovation, Communications and Engagement and Research and Planning. This also resulted in all staff members being given greater security in their employment and provides the opportunity for team members to work better across areas.

I have only touched the surface of what has been achieved this past year, but it does provide a brief insight into the incredible efforts of all involved in our work. To the Assembly members, the Board and the staffing team of Chloe, Kate, Richard, Jo, Damen, Carey, and Robyn (and not to forget our two work experience students Julia and Orli) my sincere thanks. To the Latrobe Regional Hospital team and the team at DHHS must also go our thanks... your support and assistance is very much appreciated. And finally, to our Chair, Tanya, thank you... your support and enthusiasm makes my job so much easier.

**ELLEN-JANE BROWNE**

Executive Officer, Latrobe Health Assembly

## MEMBERSHIP CAPACITY

# 74.29%

The current Latrobe Health Assembly membership sits at 26 out of a possible 35 members.

Our members community connections include:

- Multi-cultural communities
- Health
- Local Primary/High Schools
- Regional service providers
- Industry

# LATROBE HEALTH ASSEMBLY MEMBERS

Members of the Latrobe Health Assembly include community members, directly invited representatives from key service providers within the Latrobe Valley and a Board of Directors which comprises of CEO's/Directors of the five Foundation Agencies, four elected Community Board members and an independent Chairperson.

## COMMUNITY MEMBER

### 2019-20 FINANCIAL YEAR

ALLAN CROSTHWAITE

AMINA KHATUN

ANDREA (ANGE) GORDON

ANDI WALTERS

ARFA KHAN

BELINDA CAROLAN

BRENDAN BOWLER

DANNY O'DONNELL

DAN POYNTON

DARRYL MAYBERRY

DEN LIM

DENISE STRANGER

DIANE WILKINSON

ILONA LAURIE-RHODES

JANE BARR

JOANNE PARKER

JONATHAN ARMSTRONG

KATHRYN BARTLETT

KRISTINE TRAVERS

LEN CAIRNS

LEANNE POTTER

LINDA REID

LYNDA BERTOLI

MARK MUNNICH

SHAUN MALLIA

TANYA RONG

TONY BAILEY

WENDY FARMER

## COMMUNITY MEMBER RESIGNATIONS

### 2019-20 FINANCIAL YEAR

COURTNEY SMITH

PAM PATTISON (DEC)

## DIRECT INVITE MEMBERS

### 2019-20 FINANCIAL YEAR

CLAIRE AMIES

Worksafe Victoria

Delegate: Barbara Hill

DANNY O'KELLY

Department of Health & Human Services

JERRIL RICHTER

VIC Health

Delegate: Kellie Horton

KAREN CAIN

Latrobe Valley Authority

Delegate: Andrew Waller

RONI BEAUCHAMP

Heart Foundation

ANDREW EASTCOTT

Department of Education & Training

Delegate: Nicola Stuart

NIAL FINEGAN

Environment Protection Authority Victoria

Delegate: Stacey Clarke

ELIZABETH PEARSON

Quantum Support Services

SHANE CASHMAN

Victoria Police

# BOARD OF DIRECTORS

The Latrobe Health Assembly is governed by a Board of Management. Board members are appointed by the Victorian Minister For Health. The Board comprises an independent Chairperson, five Directors drawn from foundation organisations and four elected community members.



**TANYA RONG**

Chair, Latrobe Health Assembly



**PROF. JOHN CATFORD**

Chair, Latrobe Health Assembly  
*Resigned: February 2020*



**BEN LEIGH**

Chief Executive Officer, Latrobe  
Community Health Service



**PETER CRAIGHEAD**

Chief Executive Officer, Latrobe  
Regional Hospital



**AMANDA PROPOSCH**

Chief Executive Officer, Gippsland  
Primary Health Network



**STEVEN PIASENTE**

Chief Executive Officer, Latrobe  
City Council



**SHARON FISHER**

Director, Disability & NDIS, South  
Division, Department of Health &  
Human Services

*Resigned: February 2020*



**MERRIN BAMERT**

Director, Population Health and  
Health Protection, Department of  
Health & Human Services



**LINDA REID**

Community Board member



**ANGE GORDON**

Community Board member



**JONATHAN ARMSTRONG**

Community Board member

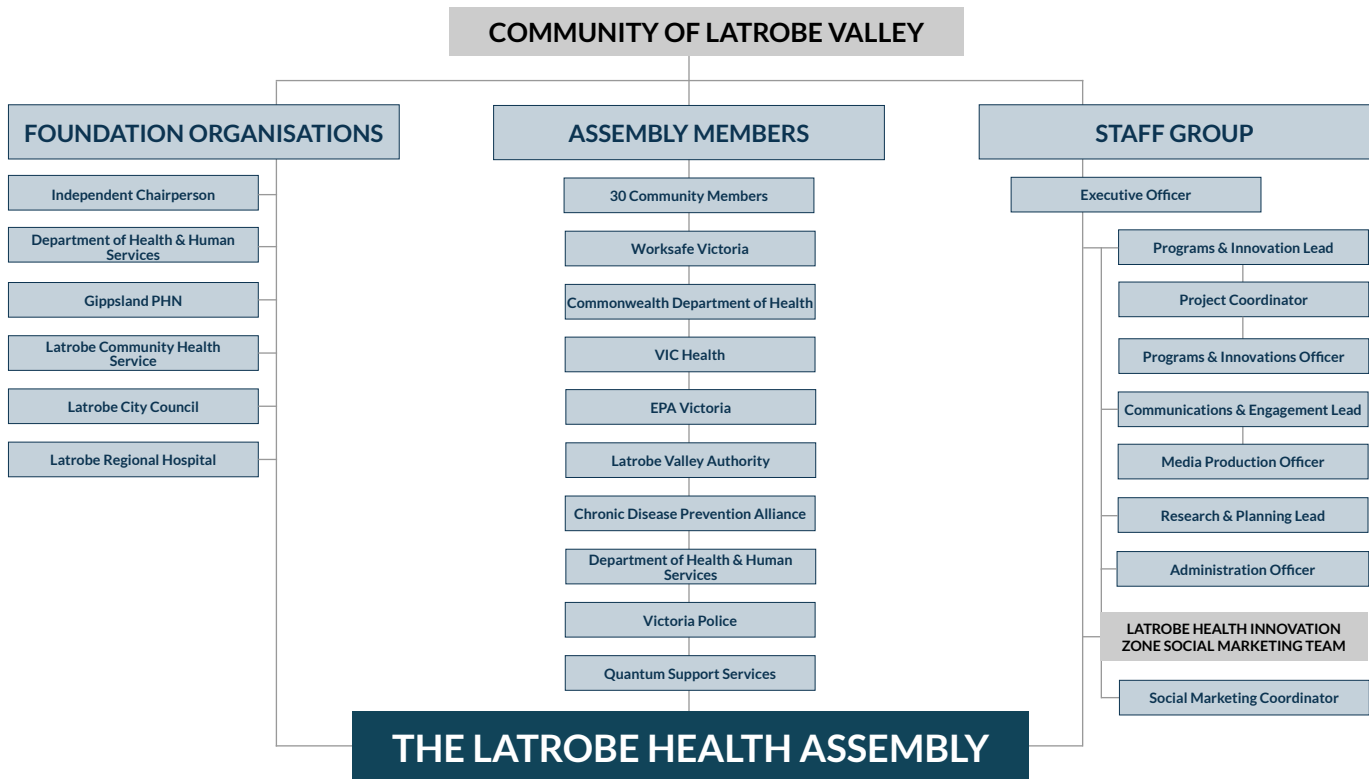


**LEN CAIRNS**

Community Board member

# ASSEMBLY STRUCTURE

We are one assembly... But we all have different roles to play.



# MEETING ATTENDANCE

## BOARD MEETINGS

2019						2020					
JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
8	9	9	7	9	9		8	8	8	7	8

## ASSEMBLY MEETINGS

2019						2020					
JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
		58		42			24		23		29

# PROJECTS WE HAVE UNDERTAKEN IN 2019-20



## HELLO CAMPAIGN

The Hello campaign is encouraging people to say hello to each other to help create a better sense of friendliness and highlight the importance of social connections in the Valley.

In October 2019, the Department of Health and Human Services supported the Latrobe Health Assembly’s recommendation to allocate funding for implementation of the Hello Campaign project for 12 months, as part of the mental health investment of the Latrobe Health Innovation Zone.

Damen Francis was subsequently employed as Hello project coordinator who is joined by Chloe Benson in the role of Social Marketing Team Coordinator.

Late in 2019, the Hello campaign hosted pop-up cafés at Claudia’s Café in Morwell (November 22), the Baw Baw Latrobe LLEN’s Chit Chat Coffee Cart at Moe Library (November 27) and Raw Harvest in Newborough (December 11). These

events were conducted in a manner consistent with previous Hello Pop-up Café events, with similar data and responses recorded.

The Hello Campaign was also represented at the Morwell Neighbourhood House Christmas party (December 10) and Lions Club of Morwell’s Christmas Day Lunch at St Peter’s Café (December 25). The latter achieved media coverage with WIN News and the Latrobe Valley Express, which featured interviews and visual representation for the campaign through photos and footage.

The global COVID-19 pandemic has severely affected the face to face community engagement efforts of the Hello campaign however the project moved with relative ease to the virtual environment by offering daily Hello Virtual-Cafes, moving to twice-weekly following the end of the “first-wave”.



Other community connectedness initiatives within the Hello campaign included a wide-spread poster campaign highlighting the need to say Hello and remain connected while in isolation along with Hello check-in cards delivered to partnering cafes to provide to patrons.

The Hello campaign is a joint Latrobe Health Innovation Zone initiative between We Are Latrobe, Latrobe Health Assembly and Lifeline Gippsland and funded by the Victorian Government.

### COVID-19 IMPACT: HIGH

## SCARFIE - ASTHMA AWARENESS CAMPAIGN

The prevalence of asthma in the Latrobe Valley area is comparable to that observed in metropolitan Melbourne and the rest of the state. However, the rates of admission to hospital and episodes requiring emergency care surpass the state average.

This suggests that although the number of cases in the Latrobe Valley region is not overly high, these cases are not being managed in such a way that prevents their acute exacerbation. This highlights a need for better asthma management, rather than asthma prevention.

In June 2018, the Latrobe Health Assembly

launched the #Scarfie campaign, an awareness campaign to promote the importance of having an up to date asthma management plan. This project was continued across the months of July/August 2019.

During the four-week period, eight community pop-up stalls were held across the four major towns. During this period, the respiratory nurse engaged with 113 community members at shopping centres. At the pop-up stall at Federation University the respiratory nurse engaged with many medical and nursing students more than 100 interactions. Due to the overwhelming

numbers and student schedules the respiratory nurse was unable to complete detailed evaluations.

Of the 113 community members that completed the survey, only one person said that they did not find the session useful. Just over half (63) of the people that we spoke to reported not having an asthma plan.

Of the people that reported not having a current asthma management plan 45 people (70%) said that they would make a booking with a GP to create or update their asthma management plan.

### COVID-19 IMPACT: N/A



## STREET FRUIT TREES

With the work being undertaken within the Food Security space in the Latrobe Valley, an initial concept of harvesting fruit from existing community trees developed into a project that would activate homeowners, volunteer fruit pickers and food bank resources alike.

The idea of developing a tree planting program to support the community was raised at the Great Place Pillar Group in late 2018.

At the same time, related suggestions were

raised during Health Assembly community consultation and through the Food For All Latrobe Valley program. One suggestion related to the “possibility of planting fruit trees on streets or parks for public use.” Further investigation had identified reluctance to proceed with this concept due to liability concerns.

The project refocused on two possible delivery streams. Apple trees were professionally planted in all Latrobe City Kindergartens across the region to provide easy access to free fruit in the coming years.

The second avenue of this project focused on developing a volunteer group to pick unwanted fruit from registered residential premises.

While this initiative produced wide-spread support. Several key stakeholders within the project withdrew their support due to liability concerns and changes in corporate landscapes. Some aspects of this project concept have been well supported by the Food For All Latrobe Valley project with investigations currently underway looking at running a small town based trial.

**COVID-19 IMPACT: N/A**

## FOOD FOR ALL LATROBE VALLEY

Food security can be defined as ‘when all people, at all times, have physical and economic access to sufficient, safe and nutritious food that meets their dietary needs and food preferences for an active and healthy life’.

Recent data released through the Victorian Population Health Survey found that 6.6% of the population within Latrobe Valley experience food insecurity with hunger. This is significantly higher than the Victorian average of just 3.6%.

In response to this growing issue a local Food Security Coalition, known as Food For All Latrobe Valley (FFALV), was established to increase access to fresh nutritious food across Latrobe Valley. The Coalition is an

initiative of the Latrobe Health Innovation Zone, and is supported by the Latrobe Health Assembly, Central West Gippsland Primary Care Partnership and many other organisations and community members.

Food For All Latrobe Valley aims to strengthen local partnerships and work collaboratively to support local organisations, community groups and community members to deliver effective, place-based solutions to address this complex issue.

The Coalition has been in operation since 2018 and to date has achieved the following collective impacts:

- Two years of collaboration



- 78 organisations, community groups and schools engaged
- 273 interventions delivered
- 15,101 people participating in interventions
- 75% estimated population reach of interventions and FFALV food messaging

**COVID-19 IMPACT: MEDIUM**

## GIPPSLAND ARCHIVE AND INTERPRETIVE DISCOVERY CENTRE FEASIBILITY STUDY

The Gippsland Region has a rich history influenced by numerous cultures, multiculturalism, and industrialisation. The region is one of Australia's major resource regions with a range of natural assets including agriculture, forestry, mining, and energy production.

Federation University, Powerworks, RMIT Centre for People, Organisations and Work and supported by the Latrobe Health Assembly and Latrobe Valley Authority have jointly proposed to explore the feasibility of establishing a Gippsland Archive and Interpretive Discovery Centre. To develop this concept, the group appointed SED Advisory to undertake the feasibility study.



As part of this process a significant level of community and stakeholder engagement has been undertaken to better understand the region's heritage, archives, culture, and demand for the potential development of the Gippsland Archive and Interpretive Discovery Centre.

Further reporting on the progress of this feasibility report and possible outcomes will be made available in the near future.

**COVID-19 IMPACT: LOW**

## GRADUATE TRAINEESHIP PLACEMENTS

There is increasing evidence that available workforce in the Latrobe Valley is limited across a range of sectors, including health and wellbeing.

In April 2019 the board of the Latrobe Health Assembly approved funding for the development and delivery of up to four internships/traineeships with a health focus. Following significant engagement with local service delivery agencies, the Latrobe Health Assembly in partnership with the Pharmacy Guild of Australia -Victorian Branch have embarked on a pilot Traineeship Program to assist with employment and career pathways for the Latrobe Valley community.

The qualification currently being undertaken by five participants is SIR30116 Certificate

III in Community Pharmacy. This pilot is conducted with the assistance of local organisations including Latrobe Local Learning Employment Network (LLEN), Latrobe Valley Authority and Latrobe Community Health Services.

The delivery of this project has been severely affected by the global COVID-19 pandemic due to education provider closures. Plans are being developed for a COVIDsafe return to training.



**COVID-19 IMPACT: HIGH**

## INCENTIVES FOR HEALTHY WORKPLACES

Latrobe Community Health Service (LCHS) works in partnership with organisations within the Latrobe City to support prevention at a scale to impact thousands of local residents. As part of this, LCHS delivers settings-based health promotion through the Achievement Program for Healthy Workplaces.

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.

LCHS have been supporting 30 workplaces using the Achievement Program to make long-term change to their policies, environment and culture to make it easier for people to be healthy. Previous LCHS Integrated Health Promotion reports have identified that there are limited incentives for workplaces to participate in or progress through the Achievement Program.

Additionally, it is often observed that workplaces have a lack of funds to support workplace health and wellbeing initiatives.

LCHS has identified a number of workplaces that want to roll out health and wellbeing initiatives and are focusing on beginning with workplaces that have identified funding availability as a barrier.

Due to the global COVID-19 pandemic, this program was significantly impacted.

### COVID-19 IMPACT: HIGH

## MEN'S SHED FIELD OFFICER

Across the Latrobe Valley community organisations and Men's Sheds have become an integral part of local communities and they are continuing to work with men, and at times women, assisting them to re-engage with the community and to feel valued.

The project seeks to employ a Latrobe Valley Field Officer to work with local men, Men's Sheds and other men's groups across Latrobe City to achieve healthier outcomes, both mental and physical. The Officer will

focus on assisting and engaging with men who have been affected by the downturn of employment in the Latrobe Valley, and their families.

The Field Officer will work closely with Men's Sheds in Toongabbie, Traralgon, Traralgon South, Boolarra, Churchill, Moe, Newborough and Morwell. The officer will liaise with Sheds that have had men referred from the Latrobe Valley or who have worked in the Latrobe Valley and been made

redundant or depressed due to the industrial and other changes in the Valley.

Recruitment for the Men's Shed Field Officer began in early 2020 however was immediately impacted by the global COVID-19 pandemic. Due to Men's Sheds being forced to close due to health concerns for many members in the high-risk category, the Field Officer position remains vacant.

### COVID-19 IMPACT: HIGH

## HOPEFULL INSTITUTE

Young people today are faced with a number of pressures in daily life, which can potentially negatively impact on mental health and wellbeing. Factors including studying, family life, working, social media and social life all impact upon an individual if they don't have the skills and techniques to handle pressures in a positive way. Developing such skills will not only make tough times easier to handle but will also help develop self-awareness and build resilience and self-confidence.

This project aimed to deliver the Hopefull Institute's Hope Express and the Addiction seminar to students throughout Latrobe Valley in August 2019.

Sessions were held at Kurnai College, Lavalla College, St Pauls College, the FLO School and two sessions held for students/parents at non-participating schools with



over 500 people in attendance during the series.

Students participated in the Hope Express seminar which is a social and emotional wellbeing program that highlights key concepts such as grit, emotional intelligence, authentic strengths, optimism, empathy, courage, and hope.

The Addiction seminar educated students on the four psychological effects of addiction:

experimentation, misuse, fixation and dependency. Students were shown the emotional states associated with each stage and the behaviour characteristics that accompany them. This gave students a realistic and ‘everyday’ understanding on how easily addiction can progress from one stage to the next.

The 2019 seminars received positive feedback during the evaluation. There were a total of 176 respondents to the

evaluation survey. Of the respondents 140 were students, 23 were parents, four were teachers and nine were unspecified. Participants were from a range of primary and secondary school as well as other health organisations within Latrobe.

**COVID-19 IMPACT: N/A**

## PREMIER AREA FOR AGING WELL

Latrobe City Council has identified what it described as an Aged Care Hub of Excellence as one of the desirable outcomes of a ‘Strength-led Transition’ program, which was developed following community consultation in late 2016. The document notes: “As the home of Australia’s first Health Innovation Zone, the Latrobe Valley is set to become a hub of health innovation, health prevention (activities) and innovative health services.”

The project concept is to develop a whole-of-community system that supports and promotes Latrobe City as a place where people can age well, from transition to retirement through to end of life.

After several meetings with the Aging Well Working (Action) Group, it was decided that

the project needed to be conducted in a number of phases. The first phase has seen engagement of a consultant to define the broad scope of work required and construct a plan required for Latrobe City to be recognised as the premier area for ageing well.

Mach2 consultancy was appointed to undertake the project in March 2019 and progressed with sector engagement activities, recruitment of citizen panel members and gathering of data to inform the project throughout the latter half of 2019.

5,000 households were invited to participate in a citizen’s panel approach with the intent to support decision-making in which citizens consider relevant facts from multiple points

of view. This approach was abandoned due to the recruitment failing to reach the minimum required numbers.

A final report was developed by Mach2 Consulting which included a framework service model to support older people. A number of external projects are looking to work in this space and it is the intention of the Latrobe Health Assembly to share this final report with any organisation looking to develop concepts to improve the regions older community members age well.

**COVID-19 IMPACT: N/A**

## SOCIAL PRESCRIBING

The Latrobe Health Assembly is investigating the development of a social prescribing model, designed to meet the needs of Latrobe City residents.

People present to a GP’s clinic for several different reasons, not all of which are clinical.

Many individuals present to their GP’s with health issues that are essentially a social or welfare problem. In these cases, a GP may only have a limited and short-term impact with traditional clinical means.

Social prescribing, sometimes referred to

as community referral, is a way that enables clinical professionals such as GPs, nurses, nurse practitioners and other primary care professionals to refer people to a range of local, non-clinical services.

Sometimes referred to as community

referral, green prescribing or non-medical prescribing, social prescribing links patients with non-medical supports in the community. GPs, nurses and other primary care professionals can refer people, whose health or mental health is affected by non-medical factors such as housing, financial stress, health literacy, loneliness or social exclusion, to a range of community services that can support these issues. Social prescribing is a way to address social determinants and support individuals to take greater control of their own health.

The “prescriptions” or activities can be provided by voluntary and community sector organisations. Examples include

**COVID-19 IMPACT: N/A**

volunteering, arts activities, group learning, gardening, befriending, cookery, healthy eating advice, luncheon clubs, walking and reading groups, literacy classes, support with housing, employment, debt and legal advice, cooking classes, exercise programs, and many more.

The Social Prescribing project has entered the planning stage of the second phase of the project. The first phase saw a consultant from Larter Consulting produce a feasibility report that presented a number of recommendations about what a Social Prescribing model might look like for Latrobe Valley. The results of the feasibility study were presented back to the working group

who made some alterations to the suggested model. A business case was composed to include the details of a final Social Prescribing model for the Latrobe Valley and was presented and accepted by the Latrobe Health Assembly Executive Board.

The project working group has reconvened and is now working through the fine points of the project along with developing connections with potential organisations that might host a dedicated worker and service providers that would like to be involved when patient referrals commence. The project has received support from Churchill Neighbourhood House and we are currently in discussions with a local GP clinic.

## GARMIN PROJECT 2.0

The aim of the project was to expand on the successful Garmin Project trialled initially with Kurnai College – Churchill campus in 2018. A set of 30 Garmin devices per participating school were allocated to classes of Year 7, 8 or 9 students with varying levels of activity and fitness.

This project focuses on encouraging students of Year 7/8/9 across all Latrobe Valley Secondary schools to engage in more incidental activity by providing them with a Garmin watch for a period of one school term.

Students would be explicitly taught the concept of Australia’s Physical Activity and Sedentary Behaviour Guidelines, including the importance of moving 10,000 steps

**COVID-19 IMPACT: N/A**

per day in order to maintain positive health outcomes, moving with moderate to vigorous intensity for at least 60 minutes per day and choosing to sit less and move more.

Students used the provided devices to record their progress on a weekly basis in order to monitor the number of steps achieved. The devices also recorded minutes of exercise per week, heart rates (intensity of exercise), energy expenditure etc. At the end of the term, students were offered a reward including activity vouchers, class excursions, healthy lunch etc.

Eight schools participated in the Garmin project. The participating schools were Kurnai College – Morwell, Kurnai College – Churchill, Lowanna College; Lavalla Catholic

College, Traralgon College, Baringa Specialist School, St. Pauls Anglican Grammar School Traralgon and Latrobe Special Development School.

Two Schools chose to withdraw from the project and returned their set of Garmins. The schools that withdrew were Latrobe Specialist School and Lowanna College.

## ABC – ADOLESCENTS BUILDING CONNECTIONS

The Adolescents Building Connections (ABC) program, run through Quantum, delivers an intervention-based response to family violence. It is a targeted and responsive program that encourages positive behaviour choices, while supporting young people to form healthy relationships in their lives.

The program seeks to work with young people who display traits of aggression, violence or bullying behaviours. At the moment, individuals are often identified only after they have an interaction with the justice system.

Quantum successfully recruited the two facilitator positions in July of 2019 and both facilitators commenced in August.

The Adolescent Building Connections (ABC) Program has been operating for 12 months and during this time the program has reported:

- A decrease in incidents of physical violence and property damage

- Parents/Carers identified positive changes in decision making and choices with genuine effort being made by participants to make positive choices
- One parent reported a sense of pride in his son with the positive changes and choices he had demonstrated since completing the program, especially as he had sustained this throughout the COVID 19 situation
- Decreased severity of outburst and periods of dysregulation.

Covid 19 has impacted on face to face delivery in 2020 and Quantum has adjusted the delivery model as follows:

- Continued support for current case managed clients through remote case management.
- Secondary consults for practitioners/ case managers and teams, providing strategies and information to assist them to support their clients whilst ABC is unable to provide group work.
- Check in with previous community

group participants to discuss any new concerns or questions.

The ABC Program is progressing with the development of a program which can be provided as a one to one remote delivery system.

With support from the Department of Health and Human Services Agency Performance and System Support (APSS) team, Quantum sought the support of the Latrobe Health Assembly to extend the funding of the program for a further 12 months. This extension is required to allow the agency to finalise the evaluation process, to source other funding stream/s and ensure continued momentum of the program during this time. The Board approved this request for the 2020-21 financial year.

**COVID-19 IMPACT: N/A**

## CONNECT TO CALL - CATCH PROGRAM

Crisis, and the human response to crisis, is unique to the individual. It is generally defined as an unstable and/or dangerous situation that causes a loss of control or routing. It can be life changing and is characterised by a sense of isolation or disconnection.

The Connect to Call Text enables people living in Latrobe Valley to navigate a personal

issue by matching them to a trained Lifeline volunteer (Connect Partner) who provides ongoing support for a period of up to 12 weeks. The support during this time frame will assist the individual to build resilience, contain and alleviate emotional distress, and affirm self-efficacy.

The Connect Partner will assist the service user to explore and strengthen existing and

potential positive coping mechanisms and skills and increase connection with personal and professional supports. The aim is to also encourage and augment existing treatment/ support plans and, where required, develop, and implement a plan to stay safe.

**COVID-19 IMPACT: LOW**

## VOLUNTEERING IN THE VALLEY – HANDSUP LATROBE VALLEY

HandsUp Latrobe Valley aims to build capacity for volunteer-involving organisations to develop appropriate volunteering opportunities and resources to adapt their volunteer engagement to the changing needs and expectations of volunteers in Latrobe City.

The Volunteering Development Officer developed an extensive library of volunteer stories (video and text) that were disseminated via the Latrobe Health Assembly social media channels. HandsUp Latrobe Valley also created and distributed

a Volunteer Management Toolkit which was provided to 13 organisations throughout the region.

The goal of the project was partially met, with barriers to social media, the volunteer card and training sessions postponed due to the pandemic.

The project developed a social media presence with Facebook and Instagram pages and Twitter. This was complimented by face to face and telephone communication. However, the social media presence was discontinued in August

2019, due to administrative reasons. The restrictions placed on social media inhibited the ability to build a stronger social presence, that otherwise may have seen the project become extremely successful.

Some great work has been done, the next step would be for the work to be continued by an auspicing agency that has experience in managing volunteers. The project plan and all promotional material and resources would be handed on for further progression.

### COVID-19 IMPACT: N/A

## MAKE YOUR MOVE LATROBE

GippSport, in collaboration with the Latrobe Health Assembly, is leading the Make Your Move Latrobe project which aims to promote a more vibrant, healthy and active Latrobe Valley work force and community.

Make Your Move Latrobe is seeking to work directly with the Latrobe Valley community, including older people, isolated communities and employees within Latrobe City workplaces with a focus on sedentary and isolated workers.

Phase 1 of the Make your move Latrobe Project is complete. The overarching objectives of Make Your Move Latrobe Phase 1 were;

- Increase physical activity levels of targeted cohorts within Latrobe City and increased community capability to maintain physical activity opportunities.

- Increase social inclusion and social connection for communities through the provision of a diverse program of activity across Latrobe City.

- Increase education and knowledge of physical activity benefits and local initiatives.

Phase 1 delivery participation summary includes:

YEAR ONE	YEAR TWO	TOTALS
1828 total participants	1750 total participants	3578 Participants
24 Community Events	19 Community events	43 Community Events
14 Workplace Trial programs	9 Workplace Trial programs	23 Workplace programs
7 Different community groups	8 Different community groups	15 Community Group programs

In 2020 the program continued to provide tailored, engaging and fun opportunities for active recreation in the community however due to the global COVID-19 pandemic, the project moved to the virtual space

which has seen the project produce weekly workplace exercise and mindfulness videos and adapting parts of the workplace program to be suitable for virtual delivery to local organisations.

### COVID-19 IMPACT: HIGH

## INCREASING ACCESS TO SPORTS

The Increasing Access to Sport Project is an initiative of the Latrobe Health Assembly and Latrobe Health Innovation Zone

The project aims to work with community, clubs and young people between the ages of 12 – 18, to identify reasons preventing them from accessing and participating in traditional sports, as well as help and identify potential solutions to address these barriers.

The 'Increasing Access to Sport' Project has come about as a result of consultation with Flexible Learning Option (FLO)

school students in September 2017 which highlighted that the reason many of the students do not participate in sport relates to affordability and inability to find transport to and from training and games. Consistent with national findings, club participation rates between the ages of 12 and 18 years are significantly low, and there are many reasons for this.

Through this project, GippSport will incorporate creative solutions and review in consultation with the Latrobe City community, that is hoped may see an

increased participation of young people (12 – 18) in sport in the region.

Following extensive stakeholder engagement process, a phase one report has been completed outlining barriers to youth participation in sports. This report also identified a potential solutions plan that was intended to be trialled in 2020 however due to the global COVID-19 pandemic, planned trials were suspended and/or postponed due to Federal and State Government restrictions imposed on local sporting associations.

COVID-19 IMPACT: HIGH

## WATER WORKS PROJECT



WaterWorks was created and trialled by the Gippsland Community Leadership Program and was a community resource package aimed at enabling Gippsland towns to establish (and promote) free tap water refill options in the central business area by utilising existing tap water facilities in local businesses. The trial project was run in the

township of Trafalgar.

The campaign based on the WaterWorks trial was extended to the Latrobe Valley with the project being auspiced to Gippsland Water. Gippsland Water employed a project officer to manage the rollout of the WaterWorks project which saw 54 local businesses sign on

to the program by allowing members of the public to utilise a refill-station within each premises.

Three out of four town-based launch events were undertaken to promote the project in each represented township. The fourth event scheduled for Traralgon was cancelled



due to the global COVID-19 pandemic. The three proceeding launch events met the objectives of announcing the initiative to

local communities via well attended, public festivals featuring educational displays from Gippsland Water, BBQ's provided by Lion's

and Rotary Clubs and hosted by TRFM's Streetcrew featuring multiple live on air coverage

#### COVID-19 IMPACT: MEDIUM

## COMMUNITY HEALTH NURSING IN PRIMARY SCHOOLS

The Nurses in Schools program commenced in 2017 because of a local school Principal experiencing a high number of children with absences due to head lice. He approached the Department of Health and Human Services and requested support.

Latrobe Community Health Service was requested to help the school out. From here a nurse in school was identified as being of value. This was not only to look at the identification and treatment of head lice at that time, but has evolved into a program that addresses health disparities in the school community within Latrobe Valley.

In 2018 the Latrobe Health Assembly supported the expansion of the Community Health Nurses in School Program, initially to four schools and later to 8 schools.

#### COVID-19 IMPACT: HIGH

The expansion was based on the level of disadvantage in the schools and DET identifying schools as the highest priority. The program has funding for 8 schools until 31 December 2020. In the second expansion of the program, LCHS was also funded for a Coordinator.

An evaluation of the program delivery to date was finalised in September 2020. The evaluator recommended Community Health Nursing in Primary Schools continue in schools, and at the same time, the program and support infrastructure strengthened so that Community Health Nursing in Primary Schools can reach its full potential in addressing the health needs of children and families living in disadvantaged communities. The 5 recommendations are:

1. Funding and investment in the

Community Health Nursing in Primary Schools program should continue

2. The gap between Community Health Nursing in Primary Schools program objectives and service delivery should be bridged through a focus on minimum service delivery requirements
3. Nurse outreach data collection and the data collection system should be improved and adapted to measure minimum service delivery requirements
4. There should be greater co-design and collaboration between LCHS and schools in the implementation of the CHNiPS program
5. Process alignment, while a challenge beyond just CHNiPS, should be discussed by all stakeholders

## CREATIVE COMMUNITY CONSULTATION WORKSHOPS IN CHRONIC ILLNESS

This project was initiated by the Latrobe Health Assembly in response to recommendations from the Hazelwood Mine Fire Inquiry Report to improve the health and wellbeing outcomes for residents of the Latrobe Valley.

The aims were to conduct community consultation and engagement with people living with a chronic illness in the Latrobe Valley to:

- Understand their current service knowledge / usage / barriers, and
- Identify ways in which service providers can improve their services to enhance

quality of life of people living with a chronic illness.

After consultations with local health professionals, DHHS, Latrobe Health Assembly and the Latrobe Health Advocate, the following five conditions were selected for inclusion in the project:

- Arthritis,
- Chronic Obstructive Pulmonary Disease (COPD),
- Diabetes,
- Heart Failure,
- Osteoporosis.

Consultation and engagement activities were undertaken between 15 May and 15 October 2019, with a focus on the towns of Moe, Morwell, Churchill and Traralgon. A total of 302 community members were engaged in the project, either through a face-to-face conversation with a Peer Facilitator or completing a hard-copy or online survey.

From the 302 responses, 1,184 comments were analysed and themed. Common themes across all of the conditions fell into five broad categories:

- Shortage of GPs and specialists / difficulty getting appointments /

- continuity of care.
- Communication with and between GPs, specialists, other health professionals and services.
- Access to, cost or availability of support / services / equipment / transport.

- Need for more information and support / isolation and loneliness.
- Need for more disability-friendly local infrastructure.

themes identified through this project will provide a basis for local health services and providers to inform their discussions around future actions and priorities to improve the experience of people living with chronic conditions and help them 'live well'.

It is hoped that the findings and common

COVID-19 IMPACT: N/A

## LATROBE STREETGAMES

GippSport, in collaboration with the Latrobe Health Assembly and a range of community stakeholders have designed and implemented a schedule of activities and marketing strategies with the aim of increasing the physical activity levels and social connectedness of young people in Latrobe City.

Latrobe Streetgames utilises doorstep sport methodology which seeks to remove as many barriers as possible to young people participating in sport and active recreation. The Latrobe Streetgames program is successful when delivered at the right time, in the right place, in the right style and at the right price.

The intent is to complement other sport & recreation programs currently on offer across the Latrobe Valley catchment with a focus on youth not currently involved in any form of sport or active recreation.

Highlighting the successes of Latrobe Valley Streetgames, on 3 December 2019, the program was announced the winner of the VICHealth Awards Improving the Health and Wellbeing of Young Victorians awards.

Highlights of the program to date include:

- Delivered over 630 programs/events across the Latrobe City municipality with attendance over 13,651+
- Provided 17 young people direct



- employment opportunities with the program through GippSport
- Implemented a peer led delivery model of young people supporting young people to participate
- Built local capacity to deliver Victorian Skate Park League series events by providing 5 young people employment & training to achieve SPL event management & Victorian Skateboarding Association accreditation
- Established & currently delivering 'Skate Club' across Latrobe City
- In partnership with YMCA Action Sports, delivered 5 Victorian Skate

- Park League events and 18 skate club programs
- Established a strong online & marketing presence with the target cohort (over 1000 followers on Facebook, Instagram and TikTok)

GippSport's Latrobe Streetgames programs frequently have a large, engaged group of regulars participating and continually

welcomes new people to attend. Alongside its regular schedule of community activities, it is actively seeking to partner with like-minded groups to deliver niche programming opportunities to young people. Examples of these opportunities include: Street Soccer with CMY, Table Tennis with Latrobe Youth

#### COVID-19 IMPACT: HIGH

Space, and All Access Days with Latrobe Leisure & Latrobe City Council.

The global COVID-19 pandemic severely impacted the Latrobe Streetgames delivery method. The project quickly pivoted to the virtual space offering frequent online

activities, posting creative challenges and developing an online community of Latrobe Streetgames participants, providing 85 members with a safe space to interact with each other and share activity outcomes.

## OPEN BOOK

The Open Book Approach project, led by Lifeline Gippsland, works with Latrobe Valley businesses to identify what the current level of mental health perspective is in each workplace. The project works with the employees of the business to understand what is really happening within the business. By using innovative database techniques to shape the story of the mental health capacity and offer continued feedback and support to businesses who partake in the project by resurveying and regularly checking if they are on the right path the project is able to add real value and perspective to the employers.

The project core activities are a workplace

#### COVID-19 IMPACT: HIGH

mental health survey, followed by an employee deep dive workshop and an official report back to the leaders of the business with recommendations from their teams on the improvements that need to be made.

Within the project Lifeline Gippsland developed the community campaign 'Check in with a Friend'. This campaign features leaders in the business community showing community leadership by championing wellbeing. Business leaders spoke about their lived experience and/or encouraged the community to support those struggling with their mental health. The campaign was designed to inform and empower people in the Latrobe community to check in with



those around them and to start a visible groundswell of support through a range of posters and window stickers.

Due to the global COVID-19 pandemic and the subsequent shut-down of businesses, delays in this project have greatly impacted its delivery within the first half of 2020.

## LATROBE ISO FILM FESTIVAL

The Latrobe ISO Film Festival took place over 48 hours, from May 1-3, with participants getting involved remotely. Registrants were provided with a theme at the opening of the festival on Friday evening and had 48 hours to produce a film from home, in accordance with lockdown laws. The event culminated with an online watch party to showcase the entries.

The event endeavoured to improve health outcomes for people of all ages across the

#### COVID-19 IMPACT: MEDIUM

Latrobe Valley by:

- Providing a fun, free and accessible activity that adhered to lockdown laws.
- Facilitating a platform for expression, storytelling and sharing.
- Fostering social connection and sharing.
- Showcasing the strengths and stories of the Latrobe Valley to bolster local pride.

Despite the short lead time (just 16 days between concept initiation and delivery), the festival attracted 26 registrations and



resulted in the production of 15 local short films. The online promotional campaign and watch parties were also a success, with social media posts reaching over 21 000 people and attracting over 1 100 engagements.

## H2WOAH CAMPAIGN

The H2WOAH campaign was developed to tackle sugary drink consumption in the Latrobe Valley. It had two core objectives:

- Increase tap water consumption among 13-18 year olds in the Latrobe Valley
- Decrease consumption of sugary drinks among 13-18 year olds in the Latrobe Valley.

The centrepiece of the campaign was a series of activations in Latrobe Valley High Schools. These sessions aimed to increase students' awareness of the benefits of tap water and the true costs of sugary drinks. Students were also given the chance to complete hands-on activities where they developed

**COVID-19 IMPACT: HIGH**

their own promotional pitches for tap water and personalised a label for their own H2WOAH can (a personalised drink bottle). In addition to these school sessions, the campaign also included a dedicated website, a social media presence and a competition.

6 sessions were run across three schools, engaging 94 students prior to Covid-19 forcing the cancellation of all remaining school sessions.

Despite this interruption, the H2WOAH campaign still met its core objectives. Baselines collected at the start of sessions were compared to attitudes at the end of the

sessions to reveal:

- Students agreed more strongly that they wanted to increase their consumption of tap water after completing the session (Pre session: 70% agreed; 25% were neutral; and 5% disagreed / Post-session: 82% agreed; 14% were neutral; and 3% disagreed.)
- Students agreed more strongly that they wanted to decrease their consumption of sugary drinks after completing the session (Pre-session: 59% agreed; 27% were neutral; and 14% disagreed / Post-session: 67% agreed; 24% were neutral; and 9% disagreed)

## PERMANENT OUTDOOR TABLE TENNIS STRUCTURE

Permanent outdoor table tennis tables are a new and exciting addition that are popping up throughout Europe and scattered across Australia. They have been shown to promote a physical and healthy lifestyle as well as improve mental health and wellbeing. It is a great opportunity for the community to get outside and get active.

The trial stage of the Permanent Outdoor Table Tennis Tables project received the support of the Latrobe Health Assembly Board along with authorisation from Latrobe City Council for a fixed table tennis table to be located in Newman Park, Traralgon.

**COVID-19 IMPACT: HIGH**



The site has been prepared with concrete footings to mount the permanent structure however due to the global COVID-19 pandemic, final installation and launch

events have been delayed. Planning is underway to host a large-scale event to mark the installation once it is safe to do so.

## SMOKING CESSATION ENGAGEMENT

### QUIT Pharmacy Campaign

Gippsland PHN in partnership with Quit Victoria has designed a pharmacy-based project aiming to increase smoking cessation, with a strong focus on best practice utilisation of nicotine replacement therapy and utilising the role of a pharmacist in a smoking cessation attempt. The project is modelled on Quit Victoria project which offered free training for pharmacists, updating their knowledge on 'Best Practice Smoking Cessation'.

The project aims to help pharmacists to identify individuals regularly presenting for specific health conditions, whereby smoking directly increases risk or harm. This is an opportunity for pharmacists to provide smoking cessation interventions specific to the individual presenting. The health conditions will be identified by local pharmacists through pre-training surveys to ensure they are appropriate.

The project will include:

- Delivering accredited training with pharmacists on the 3-step Brief Intervention Model.
- Delivering training with pharmacy assistants and retail staff on smoking cessation.
- Developing resources to support health professionals provide an intervention based off specific existing identified conditions where smoking directly increases risk or harm,
- Developing a community facing promotional campaign, encouraging community to utilise for smoking cessation.

A pre-project survey to inform the localisation aspects of training activities and support for pharmacists has been developed by the Collaborative Evaluation

Unit at Federation University and is ready for dissemination. Additionally, the development of a community facing campaign encouraging use of pharmacists as a trusted source of smoking cessation information has begun.

The COVID-19 pandemic has impacted the timelines for implementation as significant changes to pharmacy workflow and pandemic planning and management were priority during this time. The COVID-19 pandemic has also impacted the delivery methods of training and education within this project. In partnership with Quit Victoria, training has been adjusted to a combination of online sessions and webinar platforms. Gippsland PHN has also sought the guidance of the Pharmaceutical Society of Australia to determine a time for a re-engagement strategy to minimise risk to the project.

### Latrobe Smoking Cessation Clinic Development

Gippsland PHN began to investigate a face to face model for smoking cessation support in Latrobe in early 2019 by facilitating a series of three workshops. It was agreed that while the workshops successfully explored concepts of a smoking cessation model, a more comprehensive model design/proposal was required before proceeding to establishing a service.

In late 2019, Gippsland PHN entered into a short-term contract agreement with LCHS, whereby LCHS employed a Project Officer to develop a service model for a face to face service for smoking cessation support. LCHS were required to present their model to the PCG and submit a final report outlining the model to Gippsland PHN.

Gippsland PHN commissioned MMRResearch to conduct a program of qualitative research with Latrobe smokers to provide community input for the development of the model

proposal for the LCHS Smoking Cessation Clinic.

The overall aim of the research was to gain input from smokers in the Latrobe Valley about their perceptions of the proposed smoking clinic, their interest in using the service and the appeal of the different service elements. The research design comprised a program of three group discussions with smokers, segmented by age (18-24, 25-34, 35-49).

The main findings addressed the following several research objectives:

- Interest in support to reduce and stop smoking
- Smoking Clinic – interest in model
- Smoking clinic – the practicalities
- Smoking clinic – promotion and advertising

On conclusion of the research, there were recommendations put forward to Latrobe Community Health Service for further consideration in designing the model, with a final model provided to Gippsland PHN for assessment.

### Pitch to Quit 2020

In 2020 Gippsland PHN again delivered the Pitch to Quit competition inviting Latrobe community members, with or without graphic design or media experience, to pitch a concept for a localised community facing Quit smoking media campaign. The Pitch to Quit 2020 promotional period was launched on 27 April 2020 (mainly via Facebook) and ran for two weeks prior to entries opening on Monday 11 May 2020, including the launch of the competition website [pitchtoquit.gphn.org.au](http://pitchtoquit.gphn.org.au). Entries for the competition were open for four weeks, closing on Sunday 14 June 2020. During the four-week period that entries were open, various methods were

used to engage the community, following the COVID-19 social distancing requirements at that time.

Gippsland PHN used the following methods to promote the competition and engage the Latrobe Community:

- Latrobe Valley Express Advert
- Latrobe Valley Express Media Release
- Three locally developed promotional videos: Moe, Morwell and Churchill
- Posters for schools, cafes, libraries
- Business cards for distribution across settings

On closing of entries on Sunday 14 June 2020, the finalists attended a workshop with judges for assessment. The next report will include further detail of the assessment and progression of Pitch To Quit into a community campaign.

#### Smoke Free Gippsland

The Smoke Free Gippsland project was first launched in 2018, in which Quit Victoria and Gippsland PHN developed and delivered training for General Practitioners (GPs) around the Ask, Advise, Help model for supporting smoking cessation. The training consisted of two components; a face-to-face session and a follow up plan, do, study, act (PDSA) activity. This training was aimed at clinics in Latrobe Valley (also included some

interested clinics from South Gippsland and Bass Coast) and clinics were offered a financial incentive on completion of the face-to-face session and PDSA activity.

The training showed good attendance for the face-to-face sessions, but minimal completion of the follow-up PDSA activity by GPs. Post the roll out of the training, Quit Victoria converted the training in to an online training video, supported by an online model designed to step GPs through the PDSA activities. The conversion to deliver this training online was to encourage and allow all Gippsland practices and GPs to have access to and complete the training.

A communication package was developed by Quit Victoria with the support of Gippsland PHN. Gippsland PHN was responsible for the dissemination of promotional communications. Promotion was achieved through a media launch, social media posts on Gippsland PHN social media channels (Twitter and Facebook) and a range of promotional collateral shared with Gippsland General Practices. Online modules were launched on World No Tobacco Day, 31 May 2019.

More recently in late 2019, Gippsland PHN, in consultation with Quit Victoria, aimed to again increase the uptake of Smokefree Gippsland through revising

the communication strategy used to promote the training to clinics and GPs across the whole of Gippsland. The revised communication strategy included Gippsland PHN repackaging Smokefree Gippsland to align it with the Australian Government's Practice Incentive Program (PIP) Quality Improvement (QI) Incentive Measure 2; Proportion of Patients with a Smoking Status.

By using the incentive payments available for quality improvement measures that surround smoking, Gippsland PHN aimed to increase the uptake of Smokefree Gippsland within those practices whom register to participation in the practice incentives program. This was to be achieved by:

- Developing and sharing a business case with practices that highlights the alignments between Smokefree Gippsland and the PIP QI Incentive.
- Align outcomes of Smokefree Plan, Do, Study, Act cycles with requirements of PIP QI Incentive.
- Incorporate timelines of the PIP QI Incentive into Smokefree Gippsland.
- Provide support through resources, tools and Regional Support Officers for clinics and General Practitioners whilst completing Smokefree Gippsland.

#### COVID-19 IMPACT: HIGH

## PELVIC PAIN, PERIOD PAIN AND ENDOMETRIOSIS COMMUNITY EDUCATION

Pelvic Pain affects 1 in 5 women and 1 in 12 men at some time in their life – yet it is a condition that is rarely discussed. As most types of pelvic pain cannot be diagnosed with blood tests or scans, it's easy for women and men with this problem to suffer pain for years before finding the help they need.

Pelvic Pain results in 1 in 5 women missing at least one day of school per a month while two in five women said pain affected their concentration or performance in class. Many of these young women run the risk of falling behind during their final years of schooling.

The Latrobe Health Assembly with the support of the Pelvic Pain Foundation of Australia hosted a series of school talks with students titled PPEP Talks. The talks were held at Latrobe Valley high schools throughout February in a pilot project for Victoria.

During the two-week period, a total of 19 sessions were held at 10 schools with the addition of two community sessions. Approximately 965 students and 45 teachers or school workers attended the sessions.

**Key evaluation points following the PPEP Talks include:**

*Pre-session*

- 60% of students thought it was normal for girls to be worried about period pain
- 45% of students thought it was normal to miss school or activities due to period pain
- 81% students had little to no information about endometriosis
- 69% students said that they had no information about where to access help

*Post-session*

- 96% students thought people should seek help if they were worried about their period
- 82% thought it was not normal to miss schools and activities due to period pain
- 90% students said they had medium to high level of information about endometriosis
- 89% students said that had a medium to high level of information about where to access help

The trial of the PPEP Talks was successful, which was represented in the evaluation results. The difference in the pre and post sessions scores is an indication that students had learned valuable information during the session which would help with their

individual health in the future as well as the health of family members that they may be caring for. The improved understanding in the medical information that was provided has improved health literacy levels of the students the attended as they now have a better understanding of the information but also now know where to find reliable sources of health information in the future.



# FINANCIAL REPORT

*All monies directly associated with the operation of the Latrobe Health Assembly are managed by Latrobe Regional Hospital (LRH) under an arrangement established between LRH and the Department of Health and Human Services (DHHS) on behalf of the State Government.*

The Assembly does not hold any monies in its own right. LRH treats any surplus Assembly funds as restricted within its Balance Sheet, meaning these funds are not available to fund LRH operations and purposefully set aside to exclusively fund Assembly operations and activities.

All of the costs associated with the Assembly are formally audited and reported to DHHS and the community as part of LRH's annual reporting requirements.

For the purpose of this report, information on the costs associated with the Assembly are consolidated into an Operating Statement and a Statement of Changes in Equity for the Financial Year Ended 30 June 2020.

As at 01 July 2019, the Assembly had unspent funds of \$739,568. In 2019-2020, the Assembly recorded a surplus result of \$342,324, leaving unspent funds of \$1,081,892 as at 30 June 2020.

These include:

- Operations - funding for the operations of the Assembly, including staffing, administration, rental and other operational costs.
- Innovation Funds - funds provided to the Assembly to support innovative projects and programs decided upon by the Assembly.
- Community Engagement - funds provided to support community engagement activities by the Assembly
- Specified Funded programs - funding provided to support establishment of the Assembly, including costs associated with developing a constitution, governance structures and documents etc.
- Fixed term staffing - funds to support the two-person Latrobe Health Innovation Zone Social Marketing team.

All staff are employed by the Hospital.

## OPERATING STATEMENT FOR THE FINANCIAL YEAR ENDED 30 JUNE 2020

	TOTAL 2020	TOTAL 2019
<b>REVENUE</b>		
Operating Revenue		
Grant Revenue	1,798,076	1,694,153
Other Revenue	12,807	27,782
<b>Total Operating Revenue</b>	<b>1,810,883</b>	<b>1,721,935</b>
<b>TOTAL REVENUE</b>	<b>1,810,883</b>	<b>1,721,935</b>
<b>EXPENDITURE</b>		
Employee Costs		
Human Resources	31,148	54,424



	TOTAL 2020	TOTAL 2019
Long Service Leave	-23,236	19,443
Payroll Costs	905,043	818,015
Superannuation	79,427	73,249
Workcover	8,880	10,322
<b>Total Employee Costs</b>	<b>1,001,262</b>	<b>975,453</b>
<b>Non-Salary Costs</b>		
Administration / Program Grants / Projects	312,313	631,013
Computer Expenses	40,265	59,232
Domestic Charges	7,301	3,612
Food	8,681	8,137
Rental - Buildings	80,964	39,967
Repairs & Maintenance	3,068	18,598
Utilities	14,706	6,992
<b>Total Non-Salary Costs</b>	<b>467,297</b>	<b>767,552</b>
Capital Purchases	0	9,257
<b>TOTAL EXPENDITURE</b>	<b>1,468,560</b>	<b>1,752,262</b>
<b>SURPLUS / DEFICIT</b>	<b>342,324</b>	<b>-30,326</b>

## STATEMENT OF CHANGES IN EQUITY FOR THE FINANCIAL YEAR ENDED 30 JUNE 2020

	TOTAL 2019-2020
Accumulated Funds as at 30 June 2019	739,568
Net result for 2019-2020	342,324
Accumulated Funds as at 30 June 2020	1,081,892

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# NOTES

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Latrobe Health  
Assembly



Shaping  
The Valley



Health  
and Human  
Services

