

Victorian Public Health and Wellbeing Plan

1 July 2015

1. Introduction

The Victorian Healthcare Association (VHA) is the peak body representing the public healthcare sector in Victoria. Our members include public hospitals, rural and regional health services, community health services, aged care facilities and Medicare Locals. Established in 1938, the VHA promotes the improvement of health outcomes for all Victorians, from the perspective of its members.

The VHA welcomes the opportunity to contribute to the development of the 2015-2019 Victorian Public Health and Wellbeing Plan (the Plan). The VHA agrees to this submission being treated as a public document and being cited in any reports that may result from this consultation process.

2. VHA Submission

2.1. What is your opinion of the proposed scope and narrative of the Plan as outlined in the consultation paper?

The scope and narrative are appropriate and reflect both a traditional approach to public health and also one that broadens the narrative to include a focus on, and measures of, social and environmental determinants of health. The VHA supports the broadening of the social determinants of health lens to include the “virtuous circle”, as it is referred to. The consultation paper correctly notes that much of the influences related to social determinants of health will take place outside of the health portfolio and sphere of direct responsibility.

While it may be beyond the scope of this iteration of the Plan, it would be a worthwhile long-term ambition for the Victorian Government to work towards linking public health measures across relevant portfolios (for example planning, transport and education) and introducing a ‘health in all policies’ lens that would include a degree of accountability for health outcomes in these areas.

2.2. What do you see as the pros and cons of articulating long term objectives (ten or more years) and medium term priorities (four years)?

The VHA supports the use of long-term objectives to support accountability and allow the success of interventions to be fairly and appropriately measured. Improvements of indicators of public health do not occur immediately and the use of long-term objectives will allow the Victorian Government to be

ambitious with the scope of the Plan and set long-term goals that are accompanied by strategic changes to public policy, legislation and service delivery.

An additional benefit of including long-term objectives is that they will span electoral cycles. A fair criticism of the political system is that the relatively short terms available to Governments do not necessarily lend themselves to long-term planning. The Plan and its goals should be supported by long-term objectives and a strategic implementation.

Setting medium-term priorities can support a more flexible response to changes in health needs, political cycles and external environments. The VHA notes that while the medium-term priorities proposed in the consultation document will support the objectives of the plan, they provide little detail about the steps required to affect change.

2.3. What is your opinion of the scope of the proposed objectives? Would you exclude or include any?

The VHA considers the scope of the proposed objectives to be appropriate. The focus is sufficiently 'upstream' to allow for the development of an action plan and outcome framework in support of the Plan.

2.4. What is your opinion of the scope of the proposed priorities? Would you exclude or include any?

The VHA considers the scope of the proposed priorities to be appropriate. The inclusion of a focus on coordinated local action to improve health and wellbeing is apt; community health services and public hospitals are well-placed to assist in the coordination, planning and delivery of local action to and on behalf of their local communities and should continue to be engaged throughout the development of the action plan and outcomes framework.

The VHA also applauds the inclusion of a priority that specifically elevates the Department of Health and Human Services' prioritisation of prevention and early intervention.

A potential inclusion could be a continued focus on improving health literacy within the Victorian population. This would involve empowering individuals to better understand their own health, the behavioural and environmental factors that can impact on their health, and the structure of the health system to facilitate appropriate access of healthcare services.

2.5. How do you see your organisation contributing to achieving these proposed objectives and priorities?

The VHA and its members are key partners of the Victorian Government in the development of the Plan, the outcome framework, the action plan and delivering programs and services that will achieve the Plan's objectives. We consider the Plan and its supporting documents to be of high importance and an integral element of the Victorian public health response, and are keen to be a part of its development and on-going review.

2.6. Do the proposed high level risk and outcome measures reflect a healthy and well Victoria? If you had to choose five or six measures, what would they be?

The proposed measures reflect the goal of supporting a healthier Victoria, in particular the measures attached to 'traditional' public health priorities, for example proportions of people who are overweight or obese, daily smoking rates, levels of alcohol consumption and immunisation levels. The risk measures that directly correlate to chronic disease prevention and management are appropriate and should always accompany a public health planning framework, particularly given the burden of disease caused by chronic illness.

The VHA notes that a reduction of community and family violence is a proposed priority for the 2015-2019 Plan, however it is not accompanied by direct risk or outcome measures. Indirect measures relating to psychological distress, trust, crime rates and the feeling of safety are included, and while these may impact on community violence, it is not immediately clear how these relate directly to family violence.

2.7. General comments

The VHA notes the proposed high level measures of health and wellbeing are intended to be applied at a state level. While accountability for the relative success of the Plan is vested with the Victorian Government, it is important that data relating to priorities are available at regional or sub-regional levels. Including this level of information will take into account health and socioeconomic disparities across regions and facilitate accountability and delivery of services and public health interventions to areas of Victoria with the greatest need.

There are now numerous levels of Government and many organisations with requirements to produce public health or population health plans, make reference to population health needs or deliver health promotion programs. For example, Local Governments are required to produce Public Health and Wellbeing Plans, public hospitals and public health services must maintain a population health advisory committee, public hospitals and registered community health services are funded to deliver



health promotion programs, and Primary Health Networks will have a responsibility to undertake population health needs analyses. Given the potential for duplication, overlap and ‘clutter’ in this space, it is essential that the Plan facilitates alignment with other planning processes mandated within the health sector.