

2019–  
2024

# Population Health Strategic Plan



Sydney Local Health District  
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Population  
Health  
Strategic  
Plan

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# Acknowledgement of Country

Sydney Local Health District acknowledges that we are living and working on Aboriginal land. We recognise the strength, resilience and capacity of Aboriginal people on this land. We would like to acknowledge all of the traditional owners of the land and pay respect to Aboriginal Elders past and present.

Our District acknowledges **Gadigal**, **Wangal** and **Bediagal** as the three clans within the boundaries of the Sydney Local Health District. There are about 29 clan groups within the Sydney metropolitan area, referred to collectively as the great **Eora Nation**. *Always was and always will be Aboriginal Land.*

**We want to build strong systems to have the healthiest Aboriginal community in Australia.**

Together under the Sydney Metropolitan Partnership Agreement, including the Aboriginal Medical Service Redfern and in collaboration with the Metropolitan Local Aboriginal Lands Council, Sydney Local Health District is committed to achieving equality to improve self-determination and lifestyle choices for our Aboriginal community.

## **Ngurang Dali Mana Burudi** – A Place to Get Better

*Ngurang Dali Mana Burudi* — a place to get better, is a view of our whole community including health services, Aboriginal communities, families, individuals, and organisations working in partnership.

### **Our story**

Sydney Local Health District's Aboriginal Health story was created by the District's Aboriginal Health staff.

The map in the centre represents the boundaries of Sydney Local Health District. The blue lines on the map are the Parramatta River to the north and the Cooks River to the south which are two of the traditional boundaries.

The **Gadigal**, **Wangal** and **Bediagal** are the three clans within the boundaries of Sydney Local Health District. They are three of the twenty-nine clans of the great **Eora Nation**. The centre circle represents a pathway from the meeting place for Aboriginal people to gain better access to healthcare.

### **The Goanna or Wirriga**

One of Australia's largest lizards, the goanna is found in the bush surrounding Sydney.

### **The Whale or Gawura**

From June to October pods of humpback whales migrate along the eastern coastline of Australia to warmer northern waters, stopping off at Watsons Bay the traditional home of the Gadigal people.

### **The Eel or Burra**

Short-finned freshwater eels and grey Moray eels were once plentiful in the Parramatta River inland fresh water lagoons.

*Source: Sydney Language Dictionary*



### **Artwork**

*Ngurang Dali Mana Burudi* — a place to get better

The map was created by our Aboriginal Health staff telling the story of a cultural pathway for our community to gain better access to healthcare.

Artwork by Aboriginal artist Lee Hampton utilising our story.



# Foreword



The *Sydney Local Health District Population Health Strategic Plan 2019–2024* outlines our vision – Excellence in health and healthcare for all – supported by our CORE values and the Foundational Principles which inform our Strategic Focus Areas. A commitment to health promotion, prevention and equity within the social determinants of health model is the foundation of the *Sydney Local Health District Strategic Plan 2018–2023*. The Population Health Strategic Plan builds on the District’s Strategic Plan and sets out the strategy for Population Health over the next five years.

Sydney Local Health District is growing and changing with rapid urban development and changes to the built environment that have an impact on health and wellbeing. Population Health is committed to providing agile and responsive services to meet these changing population needs.

**Renee Moreton**  
General Manager, Population Health



# Our vision, mission and principles

Our vision
Excellence in health and healthcare for all
Our mission
To work with our communities to promote:
Co-designed and co-produced health policy, plans, new service models and research studies
Improvements in the social and environmental factors that sustain health
A healthcare system that is responsive to equity concerns
Best practice prevention, health promotion and health protection programs and strategies
Care in the community delivered close to where people live
To ensure that the community has equitable access to the highest quality patient/client and family/carer-centred care that is:
Integrated, timely, culturally safe and competent, evidence-based and efficient
Provided by a highly-skilled compassionate workforce who are committed, accountable, supported and valued
Supported by leading-edge research, education and medical and information technologies
Supportive of the healthcare of populations in other local health districts, states and territories across Australia and in other countries

Our principles
Population Health is committed to:
Improving the health of the whole community, with particular emphasis on those with the greatest needs
Working across all five Ottawa Charter for Health Promotion action areas: building healthy public policy, creating supportive environments for health, strengthening community action, developing personal skills, and reorienting health services
Reducing health inequalities, including systematic differences in access, quality of services and programs, and opportunities for health, with a particular focus on inequalities that are unfair and related to socioeconomic and cultural factors
Using and promoting the use of data and evidence to support decision making and service design
Collaboration with: <ul style="list-style-type: none"><li>Population Health units and services to maximise impact and avoid duplication</li><li>the broader health service, especially clinical services, to ensure an integrated approach to improving health outcomes and service access</li><li>priority populations and communities, including through consultation on programs and initiatives, co-designing interventions, and building community resilience</li><li>the Ministry of Health and other Local Health Districts to support a state-wide approach to population health issues</li><li>other partners, including internal partners within Sydney Local Health District, non-government organisations, local government, other state government agencies and universities</li></ul>
A multi-disciplinary approach, which draws on the skills and expertise of a diverse range of practitioners
Ensuring that we have a skilled and sustainable workforce matched to the needs of the community

# Our values

Collaboration	Openness
We work in collaboration with our patients/clients, communities, our colleagues, employees and with other agencies and services.	We have transparent, clear, honest processes which feature strong community consultation processes.
Respect	Empowerment
We value our diverse communities and respect cultural differences. We respect and celebrate the rights and culture of Aboriginal communities, the traditional owners of the land. We treat patients/clients, carers, colleagues and employees compassionately, fairly and positively. We uphold privacy, dignity and social justice. We are committed to employment, human and health rights.	Our communities are empowered to contribute to the health system, to be self-reliant, resilient and to assume greater control over their health and social circumstances. Our patients, carers and families are empowered in decision-making about care. Our staff are supported to participate in the workplace and their views and opinions are valued and influential.

## The planning process

This Strategic Plan has been developed through an inclusive District Executive, Population Health management and employee consultation process. The previous strategic framework, other District enabling plans and relevant NSW policy frameworks were reviewed as well as a review of current population demographics and facility activity. An Aboriginal Impact Statement was completed in consultation with Aboriginal members of the Population Health workforce and the Sydney Local Health District Aboriginal Unit.



# Our priorities



## Our facility

Consolidate population health structure and leadership including the establishment of the diversity programs and strategy hub

Increase visibility and engagement of population health across district services

Deliver NSW population health programs and outcomes at scale for the district's population



## Our community, partnerships, and environment

Develop and strengthen our partnerships and formalise these where appropriate

Strengthen a program of work with local councils with a focus on healthy built environment

Increase investment in place-based work in priority communities with a focus on prevention, equity and the social determinants of health



## Our patients, families, carers, and consumers

Meet increasing demand for health care interpreting services

Provide district leadership for increased culturally and linguistically diverse (CALD) community and consumer engagement in health service planning and delivery, including the development of a District Cultural Diversity Strategic Plan

Enhance consumer input into population health programs and services



## Our services

Ensure our programs and services models are agile and responsive to the changing demographics within our district, and meet the needs of our priority populations

Embed prevention in clinical encounters

Uptake new technology to enhance service delivery and reach



## Our staff

Workforce planning and forecasting demand to service district communities

Continue to develop a strong identity and culture in population health

Identify strategies to attract, retain and develop the slhd population health workforce



## Our research and evaluation

Develop a population health research and evaluation hub

Enhance engagement and inclusion of consumers, particularly people from cald backgrounds in research design and participation

Strengthen and formalise partnerships with universities



## Our education

Support professional development, training and education opportunities for population health staff

Develop, deliver and promote identified education and training for district staff

# Our facility



Population Health is a facility within the Directorate of Clinical Services Integration and Population Health, which includes:

- Population Health
- Community Health Services
- Drug Health Services
- Oral Health Services and Sydney Dental Hospital
- Community Health Centres (Redfern, Croydon and Marrickville)
- Non-Government Organisation (NGO) Program
- Integrated Care
- HealthPathways
- Health Equity Research Development Unit (HERDU).

The Directorate provides an opportunity for strong and integrated relationships to improve the health and wellbeing of the population of Sydney Local Health District (SLHD) and beyond.

The current structure and service make-up of Population Health has been in place since early-mid 2018 and was informed by the mix of services required to best meet the needs of the District and local populations. The next five years will be a period of consolidation and particular areas for development will be the Diversity Programs and Strategy Hub and Population Health research and evaluation.

Population Health consists of the following services:

- Health Promotion Unit
- HIV and Related Programs (HARP) Unit including:
  - HARP Health Promotion Team
  - Pozhet (statewide service for heterosexual people at risk of, or living with, HIV)
- Diversity Programs and Strategy Hub including:
  - Multicultural HIV and Hepatitis Service (state-wide service)
  - Multicultural Health Service
  - Cultural Support Program (in partnership with SESLHD and CESPHN)
- Sydney Health Care Interpreter Service.

The Population Health workforce is drawn from a range of disciplines with expertise and skills in health promotion, health equity, epidemiology, research, program development and evaluation, community development and education and language translation and interpreting.

We have a diverse, evidence-based program of work, with priorities determined by State and Commonwealth policy, the District's Strategic Plan, and local data.

Embracing a multidisciplinary approach, we develop innovative, collaborative responses to meet the District's growing population needs and changing models of care.

Population Health Units work in close collaboration with clinical streams, research partners and community organisations to improve health outcomes and wellbeing of our communities, and to ensure health services are responsive, well integrated, equitable and accessible.





Health Promotion Unit (HPU)

The HPU vision is for a healthy community and environment for all. The HPU program of work is largely determined by NSW population health policy priorities including the NSW Healthy Eating, Active Living (HEAL) Strategy, which includes the Premier’s Priority of reducing childhood overweight and obesity by 5% by 2025, the Healthy Food and Drink in NSW Health Facilities Framework, and the NSW Tobacco Control Strategy and Smoking Cessation Framework for NSW Health Services.

The HPU has a strong commitment to, and history of, research leadership and excellence including via National Health and Medical Research Council (NHMRC) and NSW Health Translational Research Grant Schemes with frequent national and international conference presentations and more than 100 peer-reviewed journal publications. Of particular note is the Healthy Beginnings study and programs developed over 10 years which contributed to the international evidence base to reduce overweight and obesity rates in children. This program is currently being scaled up for NSW rollout via the NSW Health Get Healthy in Pregnancy service.

HIV and Related Programs (HARP) Unit

The HARP Unit provides strategic oversight, planning, performance and business support to a range of HARP services in Sydney Local Health District. The HARP Unit supports services to meet the District KPIs and statewide targets in the NSW HIV/STI, Hepatitis B and C Strategies, including the virtual elimination of HIV and hepatitis C transmission in the NSW population.

HARP Health Promotion Team

The HARP Health Promotion Team is responsible for the planning, implementation and evaluation of health promotion programs and initiatives to increase HIV and blood borne virus prevention, testing and treatment. The Team works closely with a range of internal and external stakeholders including clinical services, NGOs, the CESPHN, and research institutions and has a focus on community engagement of priority populations.

Pozhet (Heterosexual HIV Service)

Pozhet is a state-wide service funded by the NSW Ministry of Health (MoH) and hosted by the District. The service has client-facing programs to support heterosexual people living with HIV, population level HIV prevention and testing promotion, workforce development and capacity building for health care providers. Service re-orientation to reflect the changing NSW HIV prevention, testing and treatment landscape is an ongoing challenge. The service has an important role in ensuring that knowledge of the advances in HIV prevention and treatment reach the NSW heterosexual population, particularly sub-populations at risk of HIV transmission.



Diversity Programs and Strategy Hub (Diversity Hub)

The Diversity Hub has been recently established to support the District to be responsive and adaptive to the changing culturally and linguistically diverse (CALD) population demographics and health issues. The Diversity Hub has a leadership role in the development of a District CALD strategic plan and governance frameworks including facility Multicultural Access Committees. The Diversity Hub supports the core business of clinical and non-clinical services to improve access, appropriateness and equity of health promotion/ prevention and clinical care for our CALD communities. The Diversity Hub provides expertise and guidance to inform health service decision making and program development relevant to CALD initiatives. The Diversity Hub brings together the content expertise, skill sets and community connections of a range of key services, including:

Cultural Support Program (CSP)

The CSP is a newly developed three year funded partnership between Sydney Local Health District, South Eastern Sydney Local Health District and the CESPHN to establish a casual workforce of bilingual Cultural Support Workers from priority language groups. Currently there are 18 identified language groups. These workers will add value to existing health programs and services to enhance access for CALD communities, and improve the capacity of health services to provide culturally responsive care. The CSP will also develop and implement targeted community engagement and in-language health education programs and resources, as well as support research initiatives.

Multicultural Health Service (MHS)

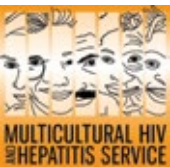
The MHS works to improve health outcomes for priority culturally and linguistically diverse communities in Sydney Local Health District by identifying barriers to access and advocating for the provision of culturally responsive services and programs across the District. The MHS focusses on engaging with priority CALD communities to promote health and assist in the prevention of chronic and complex conditions by delivering a range of programs that foster healthy lifestyle behaviours.

Multicultural HIV and Hepatitis Service (MHAHS)

The MHAHS is a state-wide service funded by NSW Ministry of Health and hosted by the District. The MHAHS works with a range of sector partners and CALD communities to achieve the NSW goals of virtual elimination of HIV transmission and Hepatitis C, and management of Hepatitis B.

MHAHS works with CALD communities implementing a range of health promotion, community development and media initiatives promoting testing, prevention and treatment of blood borne viruses.

The MHAHS also provides specialist bilingual/bicultural psycho-social support to CALD people living with HIV who experience complex co-morbidities and are at risk of treatment disengagement. Client support works with referring agencies and HIV clinicians, co-facilitating client engagement, cultural understanding and appropriate referral pathways.



Employment of a casual pool of bilingual and bicultural Cultural Support Workers allows the MHAHS to provide services across a diverse range of communities and languages and to respond to new and emerging communities and migration trends. MHAHS currently works across 20 languages and maintains a multilingual website – entirely navigable in language.

Sydney Health Care Interpreter Service (SHCIS)

SHCIS provides professional health care interpreting services for patients and health care providers, interpreting services in hospitals, community-based locations, and in the homes of patients. Interpreting is provided on-site and by telephone; and interpreting via videoconference is being developed.

Services are provided to patients and health care providers in the District together with South Eastern Sydney Local Health District (SESLHD), St Vincent’s Hospital Network, the Children’s Hospital (Randwick), Department Forensic Medicine, Justice and Forensic Mental Health Network (Long Bay Hospital), Chris O’Brien Lifehouse and some non-government organisations (NGOs).

In the financial year 2017/2018, SHCIS provided services for 84 language groups including Auslan.

The NSW Health policy *Interpreters – Standard Procedures for Working with Health Care interpreters* (PD2017\_044), must be adhered to by all staff across NSW Health services. It is NSW Government policy that professional health care interpreters be used to facilitate communication between people who are not fluent in English, including people who are Deaf, and the staff of the NSW public health system. The use of professional interpreters allows health professionals to fulfil their duty of care, including obtaining valid consent.

Key priorities for our facility

- 1 Consolidate the Population Health structure and leadership including the establishment of the Diversity Programs and Strategy Hub
- 2 Increase visibility and engagement of Population Health across District services
- 3 Deliver NSW Population Health Programs and outcomes at scale for the District population



# Our community, partnerships and environment



An engaged, empowered and healthy community is the goal of Population Health, as is equitable access to care for our community and a focus on prevention. Partnerships are key to our work, as is the impact of the social determinants of health, and the built environment on health and wellbeing.

## Priority populations

Sydney Local Health District is a richly diverse community: 44% of the population was born overseas and 55% speak a language other than English at home and we have a large GLBTQI population and Aboriginal community.

Our services aim to improve the health of our entire community, with a specific focus on identified priority populations, including:

- Aboriginal people
- People from culturally and linguistically diverse (CALD) backgrounds
- Children, including those above a healthy weight
- People at risk of, or living with, blood-borne viruses:
  - Men who have sex with men (MSM) and gay men
  - People who inject drugs (PWID)
  - People living with HIV and/or Viral Hepatitis
  - Sex workers
  - Heterosexuals at risk of, or living with, HIV
- Young people.

## Partnerships

Population Health has a strong and diverse range of partnerships central to our core business and service delivery.

Clinical services and staff within Sydney Local Health District
Ministry of Health and NSW Office of Preventive Health
Government Departments
Local Councils
Non-government and community-based organisations
Education providers:
Schools, universities, TAFE NSW, English language colleges, etc
Peak bodies and professional associations
Early Childhood Education Services
Aboriginal Medical Service and other Aboriginal community organisations:
Babana, Mudgin-Gal, NCIE, Tribal Warrior
Central and Eastern Sydney Primary Health Network
Research partners
Other Local Health Districts and Specialty Networks

Priorities will be to further develop:

- Programs of work with local Aboriginal communities and organisations
- Strategic and inclusive relationships with CALD community organisations, including an annual Multicultural Leaders Forum and the Connecting Communities Challenge small grants program
- Opportunities to formalise partnerships with universities and research partners.

## Urban development and built environment

The coming five years will see both the continuation of urban consolidation and unprecedented levels of urban development occurring within the District's boundaries. This development creates an opportunity to improve the health of residents.

Our goal is to support healthy urban development, which we define as urban development which supports people to be healthy (including active living and healthy eating), builds community social capital, reduces exposure to environmental hazards and contributes to a healthy natural and built environment.

Priorities will be to further develop our strategic partnerships and program of work with local councils around healthy built environment, including continuing to advocate for the use of the Building Better Health Guidelines developed by Sydney Local Health District .

## Equity and the social determinants of health

The health and well-being of individuals and communities are strongly influenced by social, economic and environmental factors. These factors, the social determinants of health, include variables such as employment, income, housing, education, gender, age and social connection. There is considerable evidence that poverty and disadvantage lead to significantly poorer health outcomes across most health measures but especially chronic disease and mental health.

Population Health is committed to ensuring the equitable reach of our programs across Sydney Local Health District populations, communities and places. Priorities include continuing to support the work of the Health Equity Research Development Unit (HERDU) via the annual EquityFest, implementation of the District's Equity Framework and Health Literacy Framework. We also aim to identify new equity and place-based research and program opportunities with District, university and community partners. In addition, Population Health will participate in planning and service delivery to identified priority areas such as Green Square, Redfern, Waterloo, Glebe, South Strathfield, Lakemba, Canterbury and Riverwood.

## Key priorities for our community, partnerships and environment

- 1 Develop and strengthen our partnerships and formalise these where appropriate
- 2 Strengthen a program of work with local councils with a focus on healthy built environment
- 3 Increase investment in place-based work in priority communities with a focus on prevention, equity and the social determinants of health







# Our patients, families, carers and consumers

Population Health is based on the principle that culturally safe and equitable access to the health system for people from a range of culturally, linguistically diverse and Aboriginal communities requires an understanding of culture and language.

We have a commitment to cross-cultural community-centered care, and recognise that community participation, consumer input and tailored approaches are required to create and support a healthcare system that is responsive to the varying needs of our patients and families.

The Diversity Programs and Strategy Hub is an innovative approach to working with CALD populations. The Diversity Hub will support the District to be responsive and adaptive to changing CALD population demographics, health issues and service utilisation by working with clinical and non-clinical services to improve access to prevention, health promotion and clinical care for CALD communities.

Population Health will further enhance our engagement with patients, families, carers and consumers to provide feedback and meaningful input into our health service planning and delivery via:

- Annual Multicultural Leaders Forum and Connecting Communities Challenge
- The Cultural Support Program
- Direct consumer input into Population Health services and programs such as the Pozhet Consumer Reference Group; co-design and consumer input into health promotion resources, multilingual campaigns and resources; engagement and consultation with the Aboriginal community
- Supporting peer models with partner NGOs and District services.

## Key priorities for our community, partnerships and environment

- 1 Meet increasing demand for Health Care Interpreting Services
- 2 Provide District leadership for increased CALD community and consumer engagement in health service planning and delivery, including the development of a District Cultural Diversity Strategic Plan
- 3 Enhance consumer input into Population Health programs and services

We will also have a role to support the health service by:

- Providing and promoting the use and value of interpreting and translation services across the District
- Convening Multicultural Access Committees with facilities
- Participating in Patient and Family Centered Care committees
- Supporting the SLHD Consumer Advisory Council



# Our services

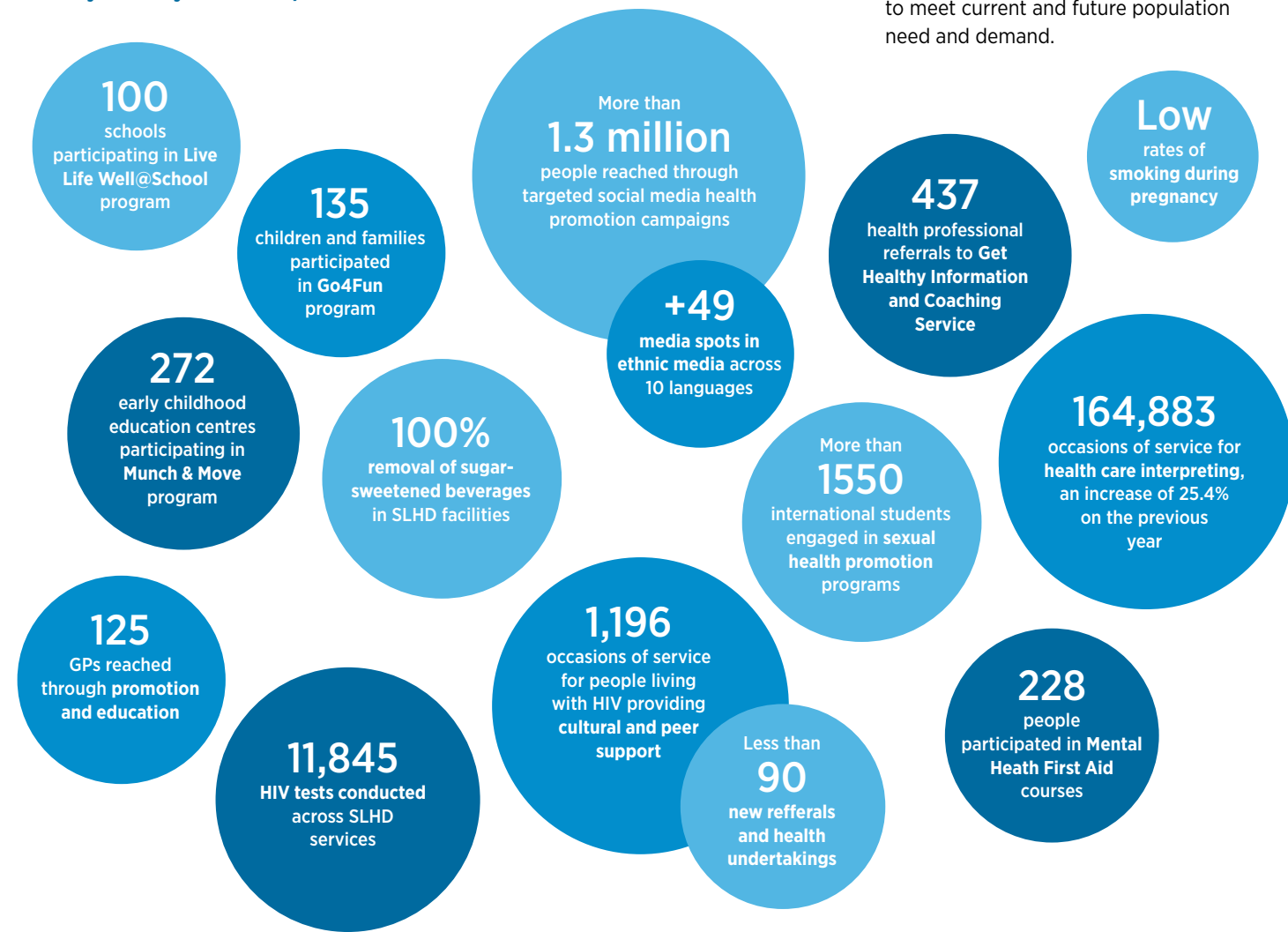
Population Health services work collaboratively with health care workers and clinical services, community, government and non-government organisations, education facilities, research partners and media services to achieve population level scale and reach of programs.

The work of Population Health is largely driven by NSW strategic frameworks and targets seeking measurable population level outcomes in areas such as healthy weight (in both children and adults), tobacco (with an emphasis on smoking in pregnancy) and blood-borne virus prevention, testing and treatment (HIV, hepatitis B and C).

## Data-responsiveness and service agility

As the District population changes in size, distribution and profile, the health needs of the community will also change. Monitoring and reviewing demographic, epidemiological, health service usage and immigration data will be important to ensure Population Health remains agile and responsive to meet community and District needs. We will do this through our recruitment of workforce, adapting service models and structures, and training and professional development of staff to meet current and future population need and demand.

## Key activity data 2017/2018





Integration with clinical services

Strengthening whole of system engagement with prevention, health promotion and population health priorities will be a focus for the next five years. We will work collaboratively with clinical services to ensure prevention and health promotion is embedded in clinical service delivery with a particular focus on:

- Obesity
- Diabetes
- Blood borne viruses
- Smoking cessation
- Antenatal care and the first 2000 days of life
- Cancer screening
- Other modifiable and lifestyle risk factors for chronic disease.

New ways of working

Population growth, shifting migration patterns and technological changes pose challenges to healthcare. We will meet these challenges by leading, developing and implementing innovative service models to improve service integration and delivery. A key example is establishing the Diversity Hub, a new structure that brings together CALD program resources and embeds them across a range of programs.

We will also optimise our use of technology including:

- Utilising the eMR to embed prevention and health promotion in clinical practice
- Utilising social media and other communication technology to achieve targeted reach at scale across priority populations and in multiple languages
- Utilising videoconferencing, software development and other business tools to increase the productivity and efficiency of the Sydney Health Care Interpreter Service.

Developments in the availability and use of HIV and hepatitis C testing and treatments will inform future state policy frameworks and require ongoing new models of care to ensure benefits are equitably achieved.

Key priorities for our services

- 1

Ensure our programs and service models are agile and responsive to the changing demographics within our district, and meet the needs of our priority populations
- 2

Embed prevention in clinical encounters
- 3

Uptake new technology to enhance service delivery and reach

Our staff

Population Heath has a diverse workforce in relation to training, skills, experience and backgrounds. Our aim is to continue to strengthen the recruitment of staff that represents the diversity of the local community including via the Cultural Support Program.

We recognise the need to support the entry, retention, career progression and development of our Aboriginal and CALD workforce. We are committed to meeting our Facility Aboriginal workforce target and growing our Aboriginal workforce.

A particular challenge is ensuring a health care interpreter workforce to meet the growing demand and to provide services for newly arrived migrant and refugee communities. The service will work with TAFEs, Universities and NAATI to develop/ provide pathways for people entering the interpreting and translating industry.

Within Population Heath we want to build a strong culture and workforce with resilience to change and that is receptive to new ideas and new ways of working. We are committed to providing opportunities for career development, succession planning and supporting emerging leaders. Finalising the Population Health structure and senior executive recruitment is an immediate priority.

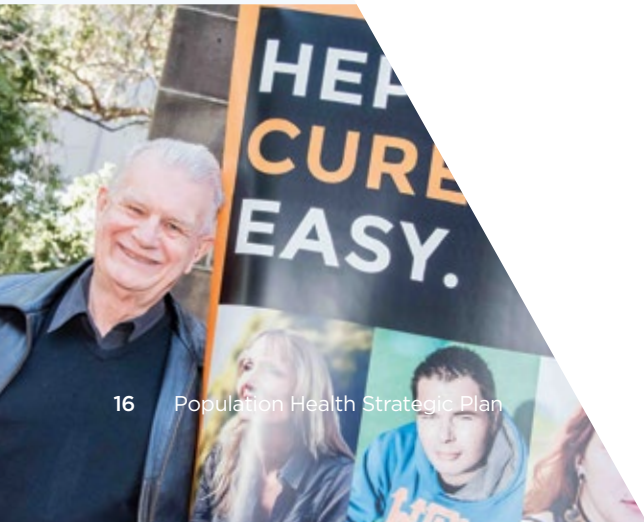
Key priorities for our staff

- 1

Workforce planning and forecasting demand to service CALD communities
- 2

Continue to develop a strong identity and culture in Population Health
- 3

Identify strategies to attract, retain and develop the District's Population Health workforce





# Our research and evaluation



Research and evaluation is essential to the implementation and success of each service's work. We are leaders in developing evidence and translational research, we play a key role in supporting research of partners and we continuously aim to grow and build our research capacity.

## What we lead

Population Health is a leader of research within the District. We develop and document evidence for what works locally, while contributing to statewide, national and global research and practice. We evaluate our programs, obtain research funding (for example, Translational Research Grants, NHMRC), pilot innovative programs, publish in peer reviewed journals, and 'translate' research into practice.

In the Health Promotion Unit, Healthy Beginnings is the largest randomised controlled trial in the world to address early childhood obesity prevention with 1155 women recruited from the third trimester of pregnancy from four Local Health Districts. Healthy Beginnings will be incorporated into the NSW Get Healthy in Pregnancy program for state-wide rollout.

## What we support

Population Health services including MHAHS, HARP and Pozhet play a support role in research projects led by our partners such as the BBV and STI Research, Intervention and Evaluation (BRISE) research consortium. Our services have supported research development, recruitment and participation in a number of significant policy-relevant studies and trials informing implementation of the NSW BBV strategies such as the following.

### The Expanded PrEP Implementation in Communities (EPIC) in NSW

A trial led by the Kirby Institute to roll out PrEP to people at high risk of HIV infection.

### Dried Blood Spot (DBS) Testing

A trial led by the Ministry of Health aiming to provide an alternative home testing option to priority populations that is easy, private and accurate to test for HIV and hep C.

### Sydney Gay Asian Men Periodic Survey

A study designed to provide a comprehensive assessment of key HIV and STI-related practices and health needs amongst gay and other men who have sex with men of Asian background in Sydney.

## My Health, Our Family

A study to understand what serodiscordance families mean in the context of a stigmatised infectious disease, everyday family life, and how to build on the contributions of families to enhance the prevention, management and treatment of these infections.

### Talking Story – Learning from Aboriginal Young People About Sexual Health

A qualitative study in partnership with the Kirby Institute to enhance the accessibility of sexual health promotion and clinical services to young Aboriginal people in the District.

## What we want to grow

The priority for Population Health in the coming five years will be developing a Population Health Research and Evaluation Hub which will build on existing achievements to increase the capacity and reputation of the District in the field, and establish a strong research and evaluation culture in Population Health. The Research and Evaluation Hub will aim to:

- Maximise the use of existing data to provide timely and accurate information that is relevant to decision makers within Population Health and the District
- Use targeted research to address service-relevant gaps in existing evidence
- Promote and support the evaluation of existing services to ensure they are effective, efficient and equitable
- Build research and evaluation capacity both within Population Health and the District by promoting and supporting population health research and providing education and publication support to staff
- Enhance research collaboration with university partners, Sydney Research, Sydney Health Partners, the Public Health Observatory, HERDU and the Sydney Institute for Women, Children and Their Families.

Additionally, the Diversity Hub will have a role to increase inclusion of CALD communities in all stages of research, that is, the development of, participation in, and benefits from research across the District.

## Key priorities for our research and evaluation

- 1 Develop a Population Health Research and Evaluation Hub
- 2 Enhance engagement and inclusion of consumers, particularly people from CALD backgrounds in research design and participation
- 3 Strengthen and formalise partnerships with universities





# Our education

Population Health recognises the need to develop our workforce, as well as to build capacity of the broader Sydney Local Health District workforce in prevention, health promotion, cultural competence, equity and the social determinants of health.

To continue having a positive impact on our community it is essential that the Population Health workforce develops contemporary capabilities for emerging trends and issues, and changes to the policy and health service landscape. Within the next five years, identified areas of capability development include:

- Working more effectively across social determinants of health, including affordable housing
- Healthy built environment, climate change and health
- New technologies and social media skills for community engagement and communication
- Keeping up to date with further advances in blood borne virus prevention, testing and treatment
- Health Promotion Practitioner Accreditation via the Australian Health Promotion Association
- Evidence-based health promotion practice
- Skill and knowledge development of our casual workforce of Cultural Support Workers.

## Key priorities for our education

- 1

Support professional development, training and education opportunities for Population Health staff
- 2

Develop, deliver and promote identified education and training for District staff

Population Health will also have a focus on building skills and capacity across Sydney Local Health District to work with CALD clients and populations including by:

- Reviewing and updating cultural competence training for the District workforce
- Working with interpreters training incorporated into orientation, Health Education and Training Institute (HETI) online training; and targeted in-service training.

Opportunities to embed prevention, equity and social determinants of health in training and development across the District will also be explored in partnership with the Centre for Education and Workforce Development (CEWD).

# Strategic Action Plan 2019–2024

## Timeframes

Short term	0–12 months
Medium term	1–3 years
Long Term	4–5 years
Ongoing	Ongoing





Focus area 1: Our communities, partnerships and environment

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Develop and strengthen our partnerships and formalise where appropriate			
Formalise partnerships where appropriate, e.g. by establishing Memorandums of Understanding	Ongoing	All units	Number of formal partnerships established
Develop and strengthen programs of work with local Aboriginal communities and organisations	Medium term	HARP Unit; Health Promotion Unit	Number of new programs and partnerships
Identify and develop strategic and inclusive partnerships with CALD community organisations	Ongoing	Diversity Programs and Strategy Hub	Number and range of partnerships established
Priority 2: Strengthen a program of work with local councils with a focus on healthy built environment			
Develop and formalise a local council network and action plan	Short term	Health Promotion Unit	Local council network established
Support the Public Health Observatory in the development of a set of urban health indicators	Short term	GM Unit	Urban Health Indicators developed and used with local councils
Utilise Building Better Health Guidelines to influence healthy built environment planning	Ongoing	Health Promotion Unit	Building Better Health Guidelines updated Input provided into local council planning processes
Priority 3: Increased investment in place-based work in priority communities with a focus on prevention, equity and the social determinants of health			
Ensure equitable reach of statewide HEAL and Healthy Children Initiative (HCI) programs in priority communities	Ongoing	Health Promotion Unit	HCI Key Performance Indicators
Support HERDU in the implementation of key District equity activities: <ul style="list-style-type: none"><li>• SLHD Equity Framework</li><li>• Equity Challenge</li><li>• Annual EquityFest</li><li>• CanGetHealth</li><li>• Promotion of the HETI online training to SLHD staff (Equity and the Social Determinants of Health)</li></ul>	Ongoing	All units	EquityFest evaluation Range of partnership activities with HERDU
Enhance equitable access to HIV and viral hepatitis prevention, testing and treatment in priority communities	Ongoing	HARP Unit MHAHS	Number of initiatives in targeted priority communities HIV and Hep C KPIs in the SLHD Service Agreement
Identify best practice health promotion and place-based research and program opportunities with District, university and community partners (e.g. pilot Prevention Tracker model)	Medium term	Health Promotion Unit	Number of initiatives implemented

Focus area 2: Our patients, families carers and consumers

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Meet increasing demand for Health Care Interpreting Services			
Recruitment of permanent and sessional interpreters	Ongoing	Sydney Health Care Interpreter Service	Number of staff and sessional interpreters
Re-orientate service to integrate new technologies			New technology integrated into service delivery
Priority 2: Provide District leadership for increased culturally and linguistically diverse (CALD) community and consumer engagement in health service planning and delivery			
Annual Multicultural Leaders Forum	Ongoing	Diversity Programs and Strategy Hub	Number of participants in the Annual Multicultural Leaders Forum
Annual Connecting Communities Challenge	Ongoing	Diversity Programs and Strategy Hub	Number of projects funded via the Connecting Communities Challenge
Lead the development of a District CALD Strategic Plan, including governance structure to support implementation	Short term	Diversity Programs and Strategy Hub	District plan developed and implemented
Reinvigorate and convene Multicultural Access Committees (MACs) for all SLHD facilities to ensure culturally appropriate care/ services/programs	Ongoing	Diversity Programs and Strategy Hub	MACs reconvened with revised Terms of Reference and quarterly meetings held
Deliver and evaluate the Central and Eastern Sydney Cultural Support Program (CSP)	Short-medium term	Diversity Programs and Strategy Hub	CSP workforce recruited CSP evaluation report
Promote the use of interpreting and translation services across the District	Ongoing	Sydney Health Care Interpreter Service	Annual communication and education plan implemented
Priority 3: Enhance consumer input into Population Health programs and services			
Maintain and improve consumer input into Population Health services and programs such as: <ul style="list-style-type: none"><li>• The Pozhet Consumer Reference Group</li><li>• Co-design and consumer input into health promotion resources, multilingual campaigns and resources</li><li>• Consultation and engagement with the Aboriginal community</li></ul>	Ongoing	All units	Consumer Reference Groups convened Consumer input into resources and programs
Maintain a strong Population Health participation in the Patient and Family Centered Care (PFCC) Working Groups, Steering Committee and future strategic planning	Ongoing	All units	Membership of PFCC committees
Support peer models with partner NGOs and SLHD services	Ongoing	HARP Unit	Number of partnerships supported Peer model evaluation report



Focus area 3: Our services

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Ensure our programs and services are agile and responsive to the changing demographics within our district, and meet the needs of our priority populations			
Monitor, review and respond to relevant data and policy including demographic, epidemiological and immigration in partnership with the Public Health Observatory and the Planning Unit	Annually	All units	Trends identified and incorporated into annual business planning of services
Priority 2: Embed prevention in clinical encounters			
Identify actions to strengthen collaborative strategies with clinical services to ensure prevention and health promotion is part of every encounter with a particular focus on obesity, diabetes, CVD, antenatal care, blood borne viruses and smoking cessation	Ongoing	All units	Population Health KPIs (smoking; HIV testing; hep C treatment; Get Healthy Service referrals) Implementation of the SLHD Diabetes Plan (prevention, community, ambulatory and primary care)
Collaborate and partner with clinical services to facilitate or establish referral pathways to state-wide services (such as the Get Healthy Services) aimed at improving lifestyle through behavioural change, including via Cerner/eMR	Ongoing	Health Promotion Unit	Referrals into the Get Healthy Service (KPI) Cerner/eMR referral forms
Priority 3: Uptake of new technology to enhance service delivery and reach			
Utilise social media and other communication technology to achieve targeted reach at scale across priority populations and in multiple languages	Ongoing	All units	Number and reach of social media and online campaigns New technology implemented to deliver programs
Utilise videoconferencing, software development and other business tools to increase productivity and efficiency of the Sydney Health Care Interpreter Service	Short to medium term	Sydney Health Care Interpreting Service	Virtual Interpreter Room established in partnership with eHealth in preparation for Video Interpreting development. Service Centre re-design completed LangManager mobile app rolled out to Sessional interpreters

Focus area 4: Our facility

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Consolidate Population Health structure including the establishment of the Diversity Programs and Strategy Hub			
Finalise recruitment to key positions	Short term	GM Unit	Recruitment completed
Priority 2: Increase visibility and engagement of Population Health across SLHD			
Maintain and regularly update Population Health website(s) including development of a multilingual website to increase engagement, access and equity	Short term and ongoing	All units	Regularly updated Population Health website(s)
Continue to strengthen links with clinical and other services, including via implementation of statewide programs and policies (e.g. Food and Drinks Framework, HIV testing policy, hep C treatment targets, smoking in pregnancy, Get Healthy@Work, etc.)	Ongoing	All units	Relationships across SLHD services developed Population Health KPIs in the SLHD Service Agreement
Priority 3: Deliver NSW Population Health Programs and outcomes at scale for the SLHD population			
Continue local implementation of statewide programs and policies (e.g. HCI strategies, enhanced access to HIV and hep C testing and treatment, etc.)	Ongoing	All units	Population Health KPIs in the SLHD Service Agreement





Focus area 5: Our staff

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Workforce planning and forecasting demand to service SLHD communities			
Develop initiatives which support the entry, retention, career progression and development of our Aboriginal and CALD workforce including via the APHTI program and the Cultural Support Program	Ongoing	GM Unit and all Managers	Size and retention of CALD and Aboriginal workforce in Population Health
Support training and entry into the profession of interpreting and translating through partnerships with TAFEs, universities and NAATI			
Identify and respond to future interpreter service workforce needs	Ongoing	Sydney Health Care Interpreter Service	Partnerships in place Workforce Management Plan
Priority 2: Development of a strong identity and positive culture in Population Health			
Review and update Population Health facility orientation and warm welcome for new staff	Short term	GM Unit and all Managers	Population Health orientation program developed
Implement the People Matter Employee Survey action plan	Ongoing	GM Unit and all units	Population Health Culture Working Group established Quarterly progress reports on the People Matter Employee Survey action plan implementation
Continue to run twice yearly Population Health Staff Forums	Ongoing	GM Unit, Population Health Culture Working Group	Evaluation of staff forums
Establish staff recognition program for Population Health (e.g. employee, project or team of the month nominations)	Short term	GM Unit and all Managers	Staff recognition program established
Priority 3: Identify strategies to attract, retain and develop the SLHD Population Health workforce			
Support staff to develop competencies to increase their eligibility prospects to become registered practitioners, for example, Australian Health Promotion Association (AHPA) accreditation	Ongoing	Health Promotion Unit	Number of registered health promotion practitioners
Enable opportunities for career development and succession planning including via internal secondments and higher grade duties in Population Health and across the Directorate	Ongoing	GM Unit and all Managers	Expressions of Interest routinely offered for acting and higher grade duty arrangements

Focus area 6: Our research and evaluation

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Development of a Population Health Research and Evaluation Hub			
Scope models and resources to establish a Population Health Research and Evaluation Hub to facilitate a strong research and evaluation culture	Short to medium term	GM Unit	Research and Evaluation Hub established with a 3–5 year action plan
Priority 2: Enhance engagement and inclusion of consumers, particularly people from CALD backgrounds in research design and			
Strengthen research partnerships with services and organisations that work with consumers including CALD communities	Ongoing	Population Health Research and Evaluation Hub; and the Diversity Programs and Strategy Hub	Research partnerships established
Encourage and advocate research design that engage and include CALD communities across all facilities and services in the District	Ongoing	Population Health Research and Evaluation Hub; and the Diversity Programs and Strategy Hub	CALD participation in SLHD research
Priority 3: Develop and formalise research partnerships			
Explore and foster new partnerships with the university or other research institutes	Short term	GM Unit and Population Health Research and Evaluation Hub	Formal partnerships in place
Strengthen Population Health links with Sydney Health Partners/Sydney Research, the Public Health Observatory, HERDU and the Sydney Institute for Women, Children and Their Families	Ongoing	GM Unit and Population Health Research and Evaluation Hub	Links and research projects established
Continue to work with Ministry of Health on rapid translation of research to practice by incorporating Healthy Beginnings into statewide Get Healthy in Pregnancy service	Short to medium term	Health Promotion Unit	Healthy Beginnings incorporated into Get Healthy in Pregnancy



Focus area 7: Our education

Strategy	Timeframe	Responsibility	Outcomes/measures
Priority 1: Support professional development, training and education opportunities for Population Health staff			
Identifying needs of staff and units routinely identified via individual performance reviews and service planning processes	Ongoing	All units	All staff have access to relevant training and development
Priority 2: Develop, deliver and promote identified education and training for SLHD staff			
Review and re-design cultural competence training in SLHD to complement updated HETI on-line modules	Short to medium term	Diversity Programs and Strategy Hub	Cultural competence training platforms and sessions delivered across SLHD
Working with interpreters training incorporated into orientation; HETI online training; and targeted in-service training	Ongoing	Sydney Health Care Interpreter Service	Training sessions delivered
Explore opportunities to embed prevention, equity and social determinants of health in training and development across SLHD in partnership with CEWD	Medium term	Health Promotion Unit	Review of training and development courses completed





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