



2019-20 Initiative Progress Report

April 2020

The Wollondilly Health Alliance (WHA) is a partnership between 3 levels of government: Wollondilly Shire Council, South Western Sydney Local Health District, and South Western Sydney Primary Health Network. The aim of the WHA is to proactively address the ongoing health issues facing the Wollondilly community, and work towards creating a better serviced and healthier Wollondilly.

The work of the WHA is undertaken by 3 working groups – Care Process Working Group, Health Promotion Working Group, and Health in Planning Working Group – who are governed by the Operational Committee.

This report has been developed to review the achievements and challenges of our working group projects over the past 12 months.

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Care Process Working Group

The Care Process Working Group is responsible for leading service planning and model of care work in relation to integrated care process priorities in the Wollondilly catchment. The Care Process Working Group will have a key role in providing specialist input, strategic advice and recommendations on the design and planning of care processes to the Wollondilly Health Alliance.

Project Title: Telemonitoring		Project Lead: Vicki Bonfield
Brief description of project (2-3 sentences)		
Telemonitoring provides health services to people with chronic health conditions to keep them out of hospital, by working with them in their home and their GP using electronic health monitoring tools. Patients perform their own routine tests with mobile medical devices (e.g. blood pressure machine, thermometer, weighing scales), allowing data to be sent in real time to healthcare professionals.		
Achievements/successes over the past 12 months		
1	Patient reported experience measures (PREMs) collected from Wollondilly patients with overwhelmingly positive results. From 1 Apr to 30 Sep 2019, 18 patients were surveyed and reported the following: <ul style="list-style-type: none">100% reported telemonitoring completely, or to some extent, gave confidence to manage their health, treatment and self-care94% reported telemonitoring completely, or to some extent, helped them better recognise symptoms and know what to do for their chronic condition89% reported telemonitoring completely, or to some extent, improved their quality of life83% reported telemonitoring completely, or to some extent, reduced their reliance on hospital services, including ambulance and emergency department services	
2	The Wollondilly telemonitoring project was showcased at multiple local, state and national conferences across Australia, including: <ul style="list-style-type: none">NSW Nursing & Midwifery Showcase – September 2019SWSLHD Nursing Showcase – November 2019Asia Pacific Conference on Integrated Care – November 2019eHealth @ Sydney – February 2020	
Challenges/barriers over the past 12 months		
1	Previous support from the Agency for Clinical Innovation (ACI) will soon cease, resulting in the need for a new tool to replace the current PREMs collection.	
2	Capacity reached for patients who are monitoring with devices in Wollondilly.	
3	SWSLHD community visits suspended due to COVID-19 and risk of community transmission.	
Key recommendations for future		
1	Continue to share learnings from the Wollondilly telemonitoring experience with the health community.	
2	Collect more patient stories from their telemonitoring journey.	

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Project Title: Video Consultation		Project Lead: Jenny Ly
Brief description of project (2-3 sentences)		
Supporting the implementation of video consultation in the Wollondilly Shire. Video consultation, with the support of a local GP, enables a patient to see their specialist through technology. This provides a range of benefits for the patient including a reduced need to travel out of area, reduced stress of a traditional hospital visit (e.g. parking, and navigating the hospital site).		
Achievements/successes over the past 12 months		
1	First video consultation held between a patient at Picton Family Medical Practice and Aged Care/Rehabilitation Specialist at Camden Hospital.	
2	Finalisation of Video Consultation model of care for Aged Care and Rehabilitation specialty at Camden Hospital.	
3	Development of Telehealth information flyer for patients and carers. Received ‘gold tick’ of endorsement from SWSLHD consumer committee.	
4	Engaged MDA National to provide telehealth education to Wollondilly GPs via webinar (currently on hold due to COVID-10).	
Challenges/barriers over the past 12 months		
1	Difficulty engaging specialist staff due to competing priorities and lack of knowledge about telehealth and video consultation.	
2	Not progressing as expected due to COVID-19 and consequent redeployment of health staff.	
Key recommendations for future		
1	Consult with, and ultimately partner with a wider range of specialists in SWSLHD.	
2	Increase community and organisation knowledge of the video consultation program to increase patient numbers.	
3	Evaluate the program.	

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Project Title: Warm Up Wollondilly (Winter Initiative)		Project Lead: Madison Jarrett / Bradley Warner
Brief description of project (2-3 sentences)		
Cold and wintry weather can make many people feel in poor health, but can also cause severe illness and injuries. The WHA can alleviate vulnerable populations from feelings of poor health by delivering ‘winter packages’ to those in need. These packages may contain items such as socks, a blanket, soup packets, tea/coffee, and information about how to stay healthy and comfortable during winter.		
Achievements/successes over the past 12 months		
1	Approval to proceed from WHA Operational Committee.	
2	Resources, health information, and initiative branding developed to support delivery of the program.	
Challenges/barriers over the past 12 months		
1	Competing community & staff priorities in 2020 such as natural disaster, and COVID-19.	
2	Risk of cancellation/postponement due to COVID-19 and risk of community transmission.	
Key recommendations for future		
1	Engage and consult with community organisations as early as possible in the planning and discussion phases of project development.	
2	A significant need to develop a logistics plan for storing and distributing ‘winter packages’.	

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Health Promotion Working Group

The Health Promotion Working Group is responsible for supporting projects and initiatives in the Wollondilly Shire that contribute to:

- Health and wellbeing (connected to the “Five Ways to Wellbeing”)
- Health promotion
- Health literacy

Within the framework of the Wollondilly Health Alliance.

Project Title: Aboriginal Community Engagement		Project Lead: Madison Jarrett / Vickie Tierney	
Brief description of project (2-3 sentences)			
Building relationships with the Wollondilly Aboriginal community; and addressing the health and wellbeing needs of Aboriginal Elders groups through a variety of activities.			
Achievements/successes over the past 12 months			
1	Arts and wellbeing activities through a Ceramic Art course was held and received good feedback, including the learning of new skills and group connectedness.		
2	Rapport building with Tharawal Aboriginal Medical Service through the facilitation of healthy cooking classes for the Elders groups (started February 2020). Participants will learn about nutrition while also developing and maintaining social connections in the community.		
3	Focus group held in November 2019 to assess the partnership between the Elders groups and the WHA. Outcomes and feedback from the focus group: <ul style="list-style-type: none">Increased skills and knowledge from participation in activities organised by the WHA.Feeling of inclusion in the wider community through partnership with WHA.Increased bonding between the 2 Elders group, increasing sense of community.		
Challenges/barriers over the past 12 months			
1	Long-term direction and goal of the partnership is unclear and needs to be reviewed.		
2	Lack of Aboriginal-specific health services located in Wollondilly makes it difficult to build local partnerships. Some members of the Elders group have mobility and transport limitations, increasing the need for local activities rather out-of-area travel, however this is often not possible.		
3	COVID-19 – Multiple cooking classes indefinitely postponed from April onwards due to risk of transmission among cohort.		
Key recommendations for future			
1	Engage an Aboriginal Health Worker or Aboriginal Liaison Officer to support the work of the WHA.		
2	Establish suitable evaluation indicators to further examine partnership building.		

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Project Title: Café Connect Wollondilly		Project Lead: Vickie Tierney	
Brief description of project (2-3 sentences)			
Café Connect is a one stop shop for over 55's to come together, enjoy each other's company and learn new things. At Café Connect residents will have the opportunity to meet new people, learn new things and find out what services are available to them in their community all while enjoying a cuppa. Café Connect Wollondilly has been travelling around the different towns and villages tapping into already existing seniors groups such as Men's Sheds and Community Nurseries.			
Achievements/successes over the past 12 months			
1	3 successful Café Connect were held within Wollondilly during the pilot: <ul style="list-style-type: none">Warradale Men's Shed (approx. 45 ppl)Project GROW (approx. 15 ppl)Wollondilly Community Nursery (approx. 25 ppl)		
2	A variety of Aged Care, Allied Health, Social Groups and Community Services providers supported Café Connect by sending staff/volunteers to interact with Café Connect participants. <ul style="list-style-type: none">Catholic CareCommunity Links WellbeingCarrington CareLifeline MacarthurProbus WollondillyWarragamba Silverdale Neighbourhood CentreHealth PromotionMen's ShedsTharawal Health and Wellbeing Team (Byala)		
3	5 Dementia focused Café Connects were held at Mt Annan Botanic Gardens. These were joint Macarthur wide Café Connects run in partnership with Wollondilly, Camden and Campbelltown Councils. These Café's included dementia friendly activities and guided sensory walks through the gardens. Aged Care and services providers with a focus on dementia support were in attendance to share information with carers. Each Dementia Café Connect was at capacity (30ppl) and received praise from the PHN on the format for people with Dementia and their carers.		
Challenges/barriers over the past 12 months			
1	Advertising to the Wollondilly Community – this is always an issue with Community Development Projects. <ul style="list-style-type: none">Mail outs (hard copy)Social MediaWollondilly Advertiser paid adCommunity NewsletterNotice boardsWord of mouthEmail mail outs Received feedback after each Café Connects that most people had not heard about Café Connect.		
2	Some service providers found the Café Connects difficult as they were not used to the format of having a coffee and actively engaging with residents as in the past there has been a focus on large expo's and expecting the community to come by their table and ask them questions.		
3	COVID-19 – Postponement of 2 Café Connects during Seniors Festival 2020 (both Café Connects had received approx. 30 RSVPs each).		
Key recommendations for future			
1	Continue Café Connect in 2021, even if funding is not available through MDS. Café Connect is now an established model and Council/WHA could adopt the model with little overheads.		
2	Continue to encourage service providers to proactively engage at Café Connect, as well as encourage a variety of providers at each Café Connect including a mix of aged care, allied health, social groups and wellbeing services.		
3	Evolve and adapt Café Connect to meet the needs of other vulnerable groups such as disability and mental health focused.		

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Project Title: Child & Family Information Sessions (Dilly Wanderer Enhancement project)		Project Lead: Madison Jarrett / Candice Muzevic
Brief description of project (2-3 sentences)		
Information sessions facilitated by health and childhood staff (e.g. Child & Family Worker, Allied Health), run alongside the Dilly Wanderer playgroups. 4 topics are facilitated at each location, which are: ages and stages of child development, healthy eating for families, accessing allied health, and parenting strategies.		
Achievements/successes over the past 12 months		
1	4 topics held successfully at Buxton with around 7-12 parents/carers in attendance at each event.	
2	Very positive feedback received from participants at Buxton, with around 75% reporting they learned something new, and around 90% reporting they would recommend the session to other parents/carers.	
3	Positive feedback received from facilitators, all of whom will be returning to facilitate sessions in Warragamba from March-June 2020.	
4	Sessions have been held successfully with good attendance in Buxton, at no financial cost to the WHA.	
Challenges/barriers over the past 12 months		
1	Initial challenges getting buy-in from facilitators due to location of events in Buxton.	
2	COVID-19 – All Warragamba sessions indefinitely postponed due to suspension of all Dilly Wanderer services and risk of community transmission.	
Key recommendations for future		
1	More community promotion needed to increase attendance from parents/carers/families.	
2	A small financial contribution to purchase morning tea may attract more attendees and make the environment more welcoming for guests and facilitators.	

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Project Title: Healthy School Canteens		Project Lead: Madison Jarrett
Brief description of project (2-3 sentences)		
The WHA provided support and incentives for Wollondilly schools to meet the NSW Government Healthy School Canteen Strategy. The incentive was a competition where schools who meet the strategy before 18 December 2019 enter the draw to win a prize for school/canteen equipment.		
Achievements/successes over the past 12 months		
1	Development and implementation of the Wollondilly lucky draw competition for Wollondilly public schools, encouraging them to grow healthier canteens.	
2	12 of 14 Wollondilly public schools meeting the NSW Healthy School Canteen Strategy and therefore have healthier food options for Wollondilly students (reaching approximately 2,695 students across the Wollondilly Shire).	
3	Developed positive partnership with Wests Tigers Foundation, creating opportunities for more support in the future.	
Challenges/barriers over the past 12 months		
1	Difficulty getting in contact with key canteen staff to establish rapport.	
2	A great deal of time was needed to build relationships with the schools by phoning, emailing and visiting face to face across the whole Shire.	
Key recommendations for future		
1	Maintain relationships with the schools through regular contact, and therefore uphold opportunities for future collaborative projects between the WHA and local schools.	
2	Revisit the canteens in 18-24 months with another incentive to ensure the strategy is being maintained.	

Project Title: Outdoor Gym Activation		Project Lead: Madison Jarrett
Brief description of project (2-3 sentences)		
Following the installation of outdoor fitness equipment in 8 locations across the Wollondilly Shire under the Western Sydney City Deal, the WHA will ‘activate’ the sites to teach local communities how to use the equipment effectively.		
Achievements/successes over the past 12 months		
1	Approval to implement the program received from WHA Operational Committee in February 2020.	
2	Plan for project implementation drafted.	
Challenges/barriers over the past 12 months		
1	Project not currently progressing due to restrictions put in place for community safety during the COVID-19 pandemic.	
Key recommendations for future		
1	Continue planning for a later implementation in 2020.	

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Health in Planning Working Group

The purpose of the Health in Planning Working Group is to achieve positive health and wellbeing outcomes in the Wollondilly Shire by pursuing strategies, policy development and actions that relate to planning and future development in the Shire. The working group focuses on the following interrelated areas of work:

- Integrating health considerations into Council's planning processes.
- Progressing those aspects of Wollondilly's Social Planning Strategy that relate to health and planning, particularly the development of a Wilton Health and Wellbeing Strategy.
- Facilitating interagency cooperation and agreed strategic direction in relation to health facilities/services planning for Wilton New Town.

Project Title: Health Assessment Protocol		Project Lead: Fiona Haigh / Chris Browne
Brief description of project (2-3 sentences)		
The objective of the project over the past 12 months has been to refine and test the Health Assessment Protocol (HAP) developed by CHETRE, WSC and SWSLHD, and embed it within Council planning processes. The HAP synthesises a large number of healthy planning resources into a decision tree approach that can be applied to strategic planning, Council policy development and Development Control Plans.		
Achievements/successes over the past 12 months		
1	Piloting the HAP on a planning proposal for significant urban intensification of the fringe of Tahmoor. This allowed us to test the HAP in a real-world scenario and make refinements to its structure and content based on what worked and what didn't.	
2	Embedding principles of the HAP in Council's draft Social and Health Impact Assessment policy suite. Council's approach to Social and Health Impact Assessment is informed by the HAP's evidence base.	
3	Embedding principles of the HAP in the Wilton Development Control Plan, Wollondilly Local Strategic Planning Statement and LEP review.	
Challenges/barriers over the past 12 months		
1	The HAP is highly detailed and relies on a sizeable body of scholarship. Much of its detail and nuance are therefore inevitably lost when translating it into functional documents such as Council Policies and Development Control Plans.	
2	The blending of social impact assessment and health impact assessment in a single policy, along with the novelty of such a policy for developers active in Wollondilly, necessitates a degree of compromise that has led to some dilution of the principles of the HAP. It will, however, be possible to strengthen the relationship between the S/HIA Policy and the HAP in later iterations as planners and developers become more familiar with social and health impact assessment processes.	
Key recommendations for future		
1	Continue to apply the HAP to new policies, strategies and Development Control Plans.	
2	Undertake a HAP-based audit of the Social and Health Impact Assessment policy suite 12 months after its adoption and amend the policy suite accordingly.	

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Project Title: Joint Health Planner Position		Project Lead: Project Steering Group (Maria Beer, Jennie Pry, Stephen Gardiner & Peter Wright)
Brief description of project (2-3 sentences)		
Joint Health Planner Position (Senior Strategic Health Planner)		
Achievements/successes over the past 12 months		
1	Implementation of practitioner baseline survey for Council staff (targeted to planning professionals). Completed by 27 staff, representing 82% of engaged staff to assess awareness of health in planning and joint health planner position.	
2	Wilton Health & Wellbeing Strategy developed and endorsed by Council ready for public exhibition in March/April 2020 (unsure of timing at present due to Council disruption from recent bush fires, flooding and more recently the COVID-19 virus).	
3	Development of Social and Health Impact Assessment Guidelines & Policy. Policy is currently in draft form and Guidelines are being piloted within the development assessment team.	
4	Inclusion of specific health priority statement in Local Strategic Planning Statement (LSPS) & Wilton Development Control Plan	
5	Participation and planning expertise contribution to the NSW Healthy Built Environment LHD Network and Western Sydney City Deal Health Alliance working groups.	
6	Having a dedicated health role within Council has helped empower planners to include health in their decision making. It has enabled bridge building internally between planning and community areas of Council	
7	Ability to assist Population Health with planning matters and understanding of local government processes	
Challenges/barriers over the past 12 months		
1	Awareness and relevance of the position within the organisation. Facilitating and brokering new opportunities to drive health outcomes – not a top priority for most.	
2	Workload/capacity of stakeholders to collaborate (especially with environmental challenges that the Shire has faced over the past 6 months)	
3	Valuing and prioritising the importance of strategic networking (within a busy workload)	
4	Involvement in all health related projects within the organisation – impact on workload/capacity to progress key projects/priorities	
5	MOU is until end of 2021, by which time bushfires and Covid-19 may have taken such a huge toll on both organisations’ budgets that there is no room for anything more discretionary (such as this joint role)	
6	Executive on both sides are dealing with a pandemic (having just dealt with a natural disaster), making it hard to get commitment on more long-term matters	
7	Because the role is a solo position (albeit very well supported on both sides), success is dependent on the officer’s ability to deliver	
Key recommendations for future		
1	Focus on networking and building rapport with DA planners and Planning Director to ensure continued ‘buy-in’	
2	Maintain the commitment to health & wellbeing within the revised Community Strategic Plan 2020-2024	

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3	Continue to seek opportunities to integrate health thinking within land-use planning documents that fall under the newly adopted LSPS.
4	Changing the way people structure documents to influence the way people read documents and thus the way they think about health and planning
5	Leverage expertise from both sides of the table to design and plan communities that enable health and wellbeing

Project Title: Wilton Health and Wellbeing Strategy		Project Lead: Chris Browne	
Brief description of project (2-3 sentences)			
Elton Consulting has been engaged to develop a health and wellbeing strategy to guide positive healthy planning measures for the State government-led Wilton Growth Area. Given that Council has only limited planning power in Wilton, the end product is to function both as a Strategy and as an advocacy document. The Health in Planning Working Group (HiPWG) of the WHA has provided the key supervisory role for the project.			
Achievements/successes over the past 12 months			
1	Elton Consulting was formally engaged to develop the Strategy in April 2019.		
2	A Councillor briefing was held in November 2019, and the draft Strategy was met with considerable interest and enthusiasm from Councillors.		
3	The draft Strategy was adopted by Council for exhibition in December 2019, and is soon to be publicly exhibited.		
Challenges/barriers over the past 12 months			
1	Because planning for Wilton Growth Area is being led by the State government, Council has limited power to implement any recommendations that may arise. This has meant that Elton and the HiPWG have had to focus on developing recommendations that are either within Council’s limited scope of action or likely to be acceptable to DPIE.		
2	Many of the Strategy’s recommendations will need to be voluntarily adopted by the developers. The major developers active in Wilton have a working relationship mediated by a land owners’ project control group (PCG), and Elton Consulting has engaged with the developers individually and via the PCG to convince them of the commercial benefits of implementing the recommendations of the Strategy.		
Key recommendations for future			
1	Undertake community consultation and make any appropriate changes to the Strategy.		
2	Seek to have Council finalise the Strategy by July 2020.		
3	Monitor and drive implementation of the Strategy’s actions and recommendations via HiPWG.		

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Project Title: Wilton Rail HIA Learning by Doing		Project Lead: Chris Browne	
Brief description of project (2-3 sentences)			
The project is a follow-up to WSC’s previous HIA (also part of CHETRE’s Learning by Doing program) looking at the Wilton Junction Master Plan, and is geared toward assessing the potential impact of introducing passenger rail access to Wilton. The project began at the height of WSC’s <i>Trax to the Future</i> and <i>Wilton... a great new town or no town at all</i> advocacy campaigns. The project working group includes planners and a community projects officer from WSC as well as epidemiologists from SWSLHD.			
Achievements/successes over the past 12 months			
1	The working group was revived and reconstituted in March/April 2019, and the project was slightly re-scoped to look more broadly at public transport rather than relying solely on rail.		
2	The group presented its work in progress at CHETRE’s Learning by Doing showcase in June 2019.		
3	The working group has completed the screening, scoping, identification and assessment stages of the HIA, and is moving into the decision making and recommendations stage.		
Challenges/barriers over the past 12 months			
1	Council’s involvement in planning for Wilton Growth Area has changed considerably since the project began, and priorities have shifted as a result. This has led to some necessary re-scoping of the project, with a more pragmatic focus on public transport as a whole.		
2	HIA typically includes community consultation, aiming to reach a representative cross-section of the community. Given that Wilton’s current population is around 1,500 and is projected to grow to around 50,000, it is very unlikely that the current population is in any way representative of the future population. This makes any kind of meaningful community consultation impossible at present (though it may be appropriate to undertake community consultation during the monitoring and evaluation stage of the HIA).		
3	The project focuses on a development type that is likely to lead to primarily positive health impacts, while HIA more often looks at developments that are likely to lead to negative impacts. This difference has made some aspects of the HIA more difficult, though there is still room for valuable recommendations to be made.		
Key recommendations for future			
1	Complete the decision making and recommendation stage and finalise the HIA report for adoption by Council’s executive by June 2020.		
2	Keep the working group active for the evaluation and follow-up stage, reconvening at bi-monthly intervals for 24 months following the adoption of the report.		