

Strategic Plan 2020-2023



gateway
health

People living well



Gateway Health acknowledges the Traditional Owners of this land on which we stand and pay our respect to the Elders, past, present and future, for they hold the memories, the traditions and the culture of all Aboriginal and Torres Strait Islander peoples.



Gateway Health acknowledges and recognises people from different nationalities, cultures and identities. We are committed to providing an inclusive service and work environment where individuals feel safe, accepted, affirmed and celebrated.

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Foreword



We commend Gateway Health's Strategic Plan 2020-2023 to you. The plan recognises and builds on achievements and learnings from the 2017-2020 Strategic Plan, and draws upon the knowledge and priorities outlined in Gateway Health's Service Plan 2019-2029.

The aspirations outlined in this plan are informed by the thoughts, ideas and experiences of our staff, clients, stakeholders and Board. An extensive consultation process was undertaken to generate, shape and test the key aspirations and enablers that underpin the plan. We would like to acknowledge and thank our staff who contributed to surveys and workshops, clients and community members who participated in focus groups, and representatives from a range of organisations who participated in interviews. Their wisdom, experience and hopes for the future of our organisation and the communities we serve lie at the heart of this plan.

A project control group (PCG), made up of staff representatives from across the organisation was established to guide and inform the planning process. The PCG provided advice on approaches to engagement and participation and played an active role in the co-ordination of client and community consultation forums. We thank each and every member for her/his energy, openness and thoughtful reflection. Staff input has been essential in keeping the planning process true to its co-design intentions.

Over the next three years Gateway Health seeks to deliver:

- accessible services that engage the communities we serve and create a positive client experience
- service models that adapt, thrive and respond to meet the outcomes sought by clients and the community
- leadership that enables and strengthens our staff and the communities we serve
- collaborations that connect and streamline services to deliver individual and population health outcomes.

Achievement of these aspirations will be informed and shaped by the ever-changing environment in which we operate. A comprehensive overview of the external context that informs both the design and implementation of Gateway Health's strategic direction is included as an appendix to the plan.

With this context in mind, Gateway Health's Strategic Plan 2020-2023 draws on four key enablers. These enablers support our capacity and capability to achieve the strategic aspirations outlined in this plan:

- Trust throughout the community THAT positions us as a first-choice provider in the care and support of the communities we serve
- Diverse, inclusive and empowered people and teams THAT drive excellence in our service
- Evidenced-informed service design THAT guides our practice and responds to client and community need
- Financial and operational strength THAT enables growth and provides agility

Our goal as an organisation is to improve the health and wellbeing of communities and to deliver outcomes that matter to our clients. Our commitment and connection to the communities in which we work will assist us in contributing to healthy social and economic environments that enable people to live well.

We look forward to working with our clients, staff and partners over the next three years to deliver on our commitment to the aspirations and enablers we have outlined in this plan.

Leigh Rhode,
Chief Executive Officer

Catherine Upcher,
Board Chair



About us

Our history

Gateway Health is a not-for-profit company limited by guarantee and a registered Community Health Service under the Health Services Act 1998 (VIC). The service as we know it today, was formed through the merger in 2014 of Gateway Community Health in Wodonga and Ovens and King Community Health Service in Wangaratta, and is built on the strong history and deep connection to the communities it has served for many years.

Today the organisation employs over 350 staff providing a range of primary health and welfare services across the Ovens Murray region in North East Victoria and parts of Southern New South Wales.

Services are focused on the provision of primary health and welfare services to people at highest risk of poor health outcomes, and are delivered through a mix of centre-based services in Wodonga, Wangaratta and Myrtleford, and outreach services to rural communities across the region.

Our people

Gateway Health is a significant employer in the region, with over 350 staff from a diverse range of backgrounds, qualifications and experience. Staff and clients are supported by a network of up to 80 volunteers at any one time.

Gateway Health recognises that staff and volunteers are the organisation's greatest asset, and are critical in representing and delivering on the organisation's values and aspirations. This recognition underpins Gateway Health's commitment to creating a workforce that reflects the diversity of the community it serves.

The 2020-2023 Strategic Plan will be operationalised through the quality, professionalism and passion of Gateway Health's staff and volunteers.

Gateway Health's culture of service is built on and strengthened by their commitment and a shared belief in serving the community.

Our role in the community

Gateway Health is a values-based organisation, striving to continually provide high-quality services that create a positive client experience and enable people to live well. Underpinned by a focus on health promotion and prevention, Gateway Health provides primary health services to people of all ages experiencing diverse health and wellbeing needs.

Services are provided across the life span, from childhood, to becoming a parent, adulthood and older age. The suite of services provided has grown to include medical practices; allied health; alcohol and other drug services; generalist counselling; family violence programs; gamblers help services; Indigenous programs; aged care services including assessment; disability services; headspace, youth services; regional bush fire response; parenting and family support programs; refugee health; and sexual health clinics. Many of these services operate at the interface between acute care, aged care and primary health care to ensure seamless transition of care between healthcare providers.

Gateway Health collaborates at many levels with other sectors such as justice, education, housing and employment to support individual client care, and to address the determinants of health at a broader systems level. The organisation seeks to strengthen this role by building on its existing services and promoting leadership and transformation across the sector.

Gateway Health is committed to delivering positive client and population health outcomes with a focus on early intervention, prevention and health promotion. This focus is supported and put into action through a well-established health promotion program that works in partnership with communities, local government, and a range of public and private entities to implement interventions aimed at strengthening the systems and environments that support the health and wellbeing of individuals and communities.





Our communities

The organisation serves a culturally diverse, growing and aging population of over 170,000 people across the 15 local government areas (LGAs) that make up its primary catchment in Victoria.

While the region's population is mainly concentrated in the rural cities of Wodonga and Wangaratta, many people live in smaller townships in the hills and valleys of the surrounding region.

Gateway Health also draws on a wider catchment that includes parts of Southern NSW for the delivery of programs directly funded by NSW Health, such as the refugee health program, and as a result of client choice in the unique Albury-Wodonga cross-border environment.

The communities in North East Victoria and Southern NSW are changing. Originally founded on agriculture, manufacturing, and tourism, many parts of the region have been impacted by long standing drought, and more recently flood and bushfire.

Some regional centres, such as Wodonga, have seen strong population growth while others have or are expected to decline. This change has seen an increasing number of young families, often from diverse cultural backgrounds, coming into regional



centres, such as Wodonga, and is countered by an aging population within many smaller rural and regional towns, such as Benalla. The changes in demography and a shifting local economy towards increased tourism and health and other service industries, are influencing, shaping and informing community needs and preferences, and thus the associated services required.

The Gateway Health region

53,500 km²
of area covered
by Gateway
Health

6%
of the total
population receive
Gateway Health
services.
(twice the
state average)



2031 future projections

22,000

(13%) estimated
population
growth

16,000

(51%) estimated
increase of people
aged over 65

26%

estimated
population growth
in the Wodonga
region

Strategic Plan

Overview

Gateway Health's 2020-2023 Strategic Plan has been developed in close collaboration with Board, staff, community, and partners from across the region. It outlines the future that Gateway Health strives for, the organisation's role in delivering on this, and the outcomes and areas of development that the organisation will focus on over the next three years.

The plan is aligned to and complements the organisation's 10-year Service Plan 2019-2029, which maps out the changing demographic, social and political landscape in the region, and the priorities for Gateway Health in responding to and meeting the needs of the community.

Developing the strategy

Gateway Health's Strategic Plan 2020-2023 has been developed using the principles outlined in Gateway Health's Strategic Planning Model 2018.

These principles include a commitment to:

1. Focusing on building on Gateway Health's strengths
2. Listening to the voices of Gateway Health's staff, clients and community partners
3. Engaging with key stakeholders in keeping with the IAP2 Framework
4. Informing and being informed by other components of Gateway Health's Strategic Platform, including the Service Plan, Financial Strategy, Risk and Quality Frameworks

Stakeholder engagement has sought to engage and listen to staff, clients and community partners in line with the International Association for Public Participation (IAP2) framework. A range of consultative forums, surveys and focus groups were used to generate and test concepts underpinning the plan. The planning process was conducted in stages, generally following the appreciative inquiry process of discover, dream, design and deliver.

Implementing the strategy

The strategic plan and 10-year service plan will support Gateway Health to continually evolve and learn and will inform annual operational planning.

Progress on annual operational plans will be reported on a quarterly basis to the Board and annually to the community using the measures outlined in the Measuring Success section of this plan.

As outlined in Gateway Health's Strategic Planning Model 2018, the Strategic Plan 2020-2023 will:

- inform revision of the organisation's Risk Appetite Statement and Financial Strategy
- be reviewed on an annual basis taking into account progress against deliverables and changes to the operating environment.

Key features of the external operating environment that have influenced and informed development of Gateway Health's Strategic Plan 2020-2023 are described in the strategic context appendix to this plan.

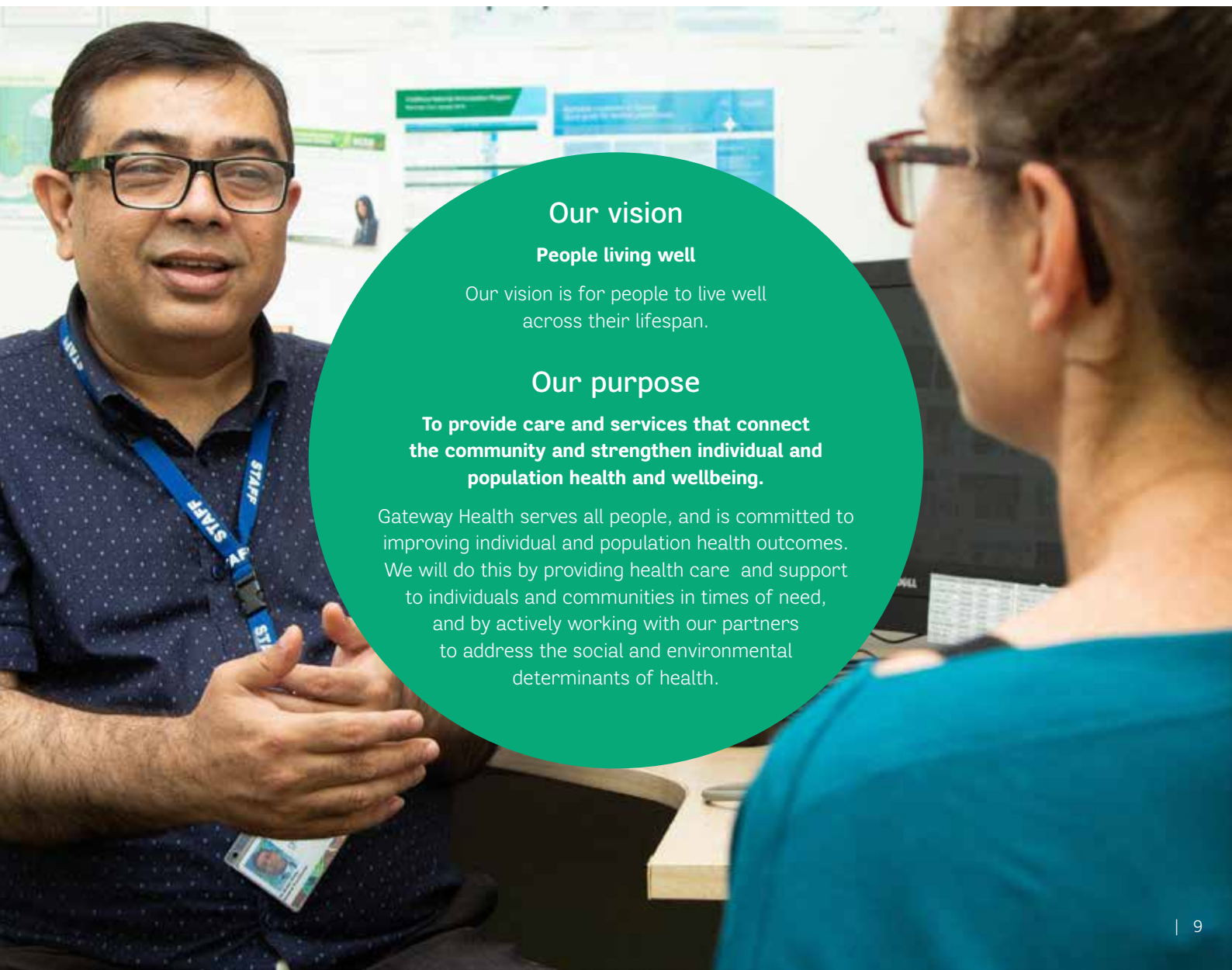
While this document captures factors that are most relevant at this point in time, it is important to recognise that the external environment will inevitably change over the lifecycle of the strategic plan.

Accordingly, the strategic context reference document will be reviewed and updated as part of the annual strategic plan review process.

The plan is structured around five core elements.



Our vision	The future we strive towards
Our purpose	The part we play in creating that future
Our values and beliefs	The values and beliefs that guide our decisions and inform our behaviours
Our aspirations	The future we aspire for in our community
Our enablers	The areas we will focus on over the next three years to deliver on our vision and purpose



Our vision

People living well

Our vision is for people to live well across their lifespan.

Our purpose

To provide care and services that connect the community and strengthen individual and population health and wellbeing.

Gateway Health serves all people, and is committed to improving individual and population health outcomes. We will do this by providing health care and support to individuals and communities in times of need, and by actively working with our partners to address the social and environmental determinants of health.

Our values and principles

Values reflect the way we interact, connect and work with every client, with partners, with volunteers and with one another.

Principles shape the way we plan and design our services and business systems.

Together they underpin organisational culture, strategy and the way we deliver our services.



Our principles

We ADVOCATE for fair and equitable access to health care and wellbeing services for all.

We RESPECT the strength of individuals and the community, and their capacity to recover from adversity.

We RECOGNISE the importance of adaptability and responsiveness to enable us to deliver on our commitment to the community.

We ACTIVELY LISTEN and work alongside the community and each other to design and deliver better solutions.

We BELIEVE a learning culture is critical to enhancing the wellbeing of staff, clients and the community.

We CONTRIBUTE to creation of a connected and integrated health and community care system to achieve the best outcomes for our clients and community.





Our aspirations

These aspirations reflect a collective set of outcomes that we will commit to delivering over the next three years and beyond.



1. Accessible services THAT engage the communities we serve and create a positive client experience

Service models will be informed by and designed with the community. Access to our services will be prioritised to address health disparities. We will be recognised, valued and trusted as a diverse and inclusive service.

This will be delivered through:

- services that are equitable, accessible and trusted across the community
- established and regular mechanisms and channels that actively engage and connect the organisation with the communities we serve
- continued investment in understanding our changing community, their needs, and experiences
- innovative use of technology and alternative service delivery models tailored to the unique needs of our rural communities
- integrated service models that enable clients to navigate between services, and provide seamless transition of care between providers
- proactive equity, diversity and inclusion standards and practices that are recognised and valued by our staff, volunteers, clients and community.



2. Service models THAT adapt, thrive and respond to meet the outcomes sought by clients and the community

Evidence-informed and sustainable models of care will focus on client outcomes and quickly respond in times of need. Models of care will welcome, engage and ensure the safety and wellbeing of clients and the communities we serve.

This will be delivered through:

- models of care that are adaptive, responsive, person-centred and place-based
- service model design and improvement that is evidence-informed and shaped by client experience and input
- being recognised, trusted and positioned as a critical service provider during challenging times in the communities we serve
- innovative and sustainable services that can quickly adapt and deliver in an environment of ongoing changes in health policy, advances in health technology, and increasing frequency of public health and climate change events
- service delivery models that embed business continuity processes and assist the organisation to be prepared and ready in times of disruption
- leading transformation in community health settings through the collection, assessment, and dissemination of data and evidence-informed practice.



3. Leadership THAT enables and strengthens our staff and the communities we serve

Gateway Health will be recognised as a centre of excellence in rural and regional community health and wellbeing. This means the organisation is known for: leadership and innovation in transforming community health care and services; strong governance, quality, safety and evaluation capabilities; and a committed, skilled workforce that advocates for and supports clients and the community.

This will be delivered through:

- effective stakeholder engagement with government and partner organisations that positions the organisation for funding and partnership opportunities, and as a respected voice for input on policy issues
- strengthened governance, quality and safety, and evaluation capabilities that demonstrate excellence in leading the provision of community health services
- empowering and embedding leadership attitudes and behaviours at every level of the organisation
- enhancing advocacy practice, structures and capability across the organisation to support better outcomes for individuals and communities
- demonstrated understanding of the impact our work has on clients and the extent of our positive influence on population health improvement.



4. Collaboration THAT connects and streamlines services to deliver individual and population health outcomes

Regional models of care and a connected service system will enable people in the community to be informed and proactive in accessing, receiving and navigating the health care system. A strong and shared understanding of health inequities across the region will inform population health initiatives.

This will be delivered through:

- established and meaningful partnerships that result in improved population health outcomes
- a “no wrong door” model of service delivery that provides collaborative and connected services across the organisation to enhance individual client and family health outcomes
- an integrated service planning process in place with partners, that enables a sharing of resources, knowledge and infrastructure
- development of a regional data and evidence base, that will inform and strengthen service system design and population health initiatives to address health inequity
- embedded and sustainable social procurement practices for tender and supplier contracts, driving positive outcomes for business and for-purpose causes in the communities we serve
- positioning Gateway Health with government as a lead agency for peoples’ health and wellbeing
- a connected, end-to-end client experience through multiple care and support pathways tailored to individual client needs.



Our enablers

These enablers outline focus areas for the next three years.



1. Trust throughout the community THAT positions us as a first-choice provider in the care and support of the communities we serve

We will be recognised by clients and the community, partners, and funders as a trusted leader and provider of high-quality services, best practice models of care and partnerships. We will be engaged by government and other key stakeholders as a first-choice provider for the care and support of communities across the region.

We will deliver on this through:

- investment and growth in our brand recognition across the communities we serve, community, partners, and government
- being a trusted voice for the community to know where and how they can reach us and what we offer; for partners so that we complement rather than compete; and for government, so we can meaningfully advocate on behalf of clients and the communities we serve
- being recognised as an equitable, culturally safe, accessible and inclusive community health service that removes the many barriers to care for clients and the communities we serve
- positioning ourselves as a desired partner and collaborator for the health and wellbeing of the region.

Examples of strategic actions we will deliver over the next three years:

- Invest in and develop our marketing and communications strategy to inform the communities we serve, our partners, fellow health and wellbeing professionals, and government as to our role, reach and impact.
- Build on existing regional partnerships and channels, as well as explore new relationships, to enhance collaboration, and improve referral and community support networks.
- Strengthen our advocacy approach, through clearly defining our scope, resources, and capacity to be strategic in our focus and the outcomes we seek for clients, and the communities we serve.



2. Diverse, inclusive and empowered people and teams THAT drive excellence in our service

We will have a diverse, inclusive, and empowered workforce, enabled by a culture of learning, collaboration and safety, with a continuous investment in capability and capacity.

We will deliver on this through:

- investing in the culture, capability and capacity of the organisation both now and into the future
- providing the environment and opportunity for peer-based connection and shared learning
- demonstrating our commitment to equity, diversity and inclusion through organisational culture and behaviours
- positioning ourselves as an employer of choice in the region, not in competition but by constructive collaboration with partners and other organisations
- defining, communicating and promoting clear career pathways
- growing our own workforce pool and leaders across the organisation.



Examples of strategic actions we will deliver over the next three years:

- Build on our workforce plan and people working well model. Embed a regional model of resourcing, and approach to investment in our staff capability and capacity.
- Develop and embed a disability action plan, ensuring the safety and wellbeing for staff and clients living with a disability across all our services and spaces.
- Achieve and maintain Rainbow Tick accreditation with the active involvement and advice of LGBTIQ+ people and communities, demonstrating our active commitment to diversity and inclusion.
- Progressively take our Reconciliation Action Plan (Reflect) to the next levels of commitment, focusing on our pledge to listen and to hear the many voices of Aboriginal and Torres Strait Islander peoples in working together to improve health and wellbeing outcomes.
- Establish state-wide networks and relationships to share learnings, provide staff development opportunities and grow our workforce.
- Develop and deliver innovative projects that will seek to better engage and support diverse cultural representation throughout our workforce and in our workplaces.





3. Evidenced-informed service design THAT guides our practice and responds to client and community need

We will be a learning organisation that demonstrates excellence in how we apply data and evidence-informed practice to the way we work. Our staff will be encouraged and supported to participate in research and evaluation initiatives that add to the body of knowledge about effective community health practice.

We will deliver on this through:

- incorporating client and community feedback and experience into the development of evidence-informed practice, service design and quality improvement
- building our capability to gather and analyse meaningful community health and wellbeing indicators and to understand the impact of the services we provide on individual and community health and wellbeing
- investing in the capability of our staff and supporting technology to capture, analyse and disseminate data and evidence to drive effective operational and service planning, evaluation and quality improvement
- pursuing, with partners, a regional approach to planning and evidence-informed practice, sharing learnings, resources, and assets to be collectively focused on population health outcomes.



Examples of strategic actions we will deliver over the next three years:

- Investing in an organisation-wide approach to the collection, analysis and dissemination of data that supports service delivery and planning.
- Developing regional partnerships that support the creation and dissemination of regional data and indicator sets that can guide collective advocacy, regional service and workforce planning, and research priorities.
- Creating an outcomes assessment framework that helps evaluate our progress and impact, and communicates our work to community, sector, and government stakeholders.



4. Financial and operational strength THAT enables growth and provides agility

We will be a financially, environmentally and operationally strong organisation, prepared for, and flexible to meet existing and future needs of the community, region, and health care system.

We will deliver on this through:

- building the capacity, capability, and infrastructure to meet future demand and support organisational growth
- being financially strong and resilient in a changing funding landscape
- putting in place an agile, flexible and fit-for-purpose operating model, tailored to the communities we serve and ready in times of community crisis
- having reliable and user-friendly technology that enables staff to deliver across different modes and places and to effectively reach and support the communities we serve
- having meaningful and measurable climate adaptation and environmental strategies linked wherever possible with Municipal Public Health and Wellbeing plans
- having robust business continuity plans in place that enable the organisation to maintain essential services to the community in the face of environmental and public health disasters.

Examples of strategic actions we will deliver over the next three years:

- Investment in new operating systems that enable strong business management.
- Explore, test and develop alternative funding streams that could support organisational and community outcomes.
- Develop and embed an organisational environmental sustainability strategy.





Measuring success

Gateway Health is a learning organisation and is committed to implementing and monitoring this strategic plan in partnership with the Board, staff, and community. To do this, Gateway Health will use a range of indicators to evaluate progress and performance through regular reports to Board and community and an annual review of this strategic plan. These indicators will include the measurement and assessment of our organisational health, as well the health and wellbeing of the communities we serve.

Organisational health indicators

These indicators assess the status of our operations and organisation.

Examples of these include:

- Financial reporting, highlighting the organisation's position in relation to financial and operational strength.
- Program funding volume and type, illustrating the demand for funded services and what organisational capability and capacity we are recognised for.
- Performance, demand and waiting list data across our services, indicating the services that communities are seeking and the gaps in Gateway Health's capacity.
- Client outcome data such as reporting and assessment of Gateway Health clients' progress towards their desired outcomes.
- Staff survey results and organisational HR data, showing the retention, wellness and engagement of staff.

Community health and wellbeing indicators

These indicators assess a range of health and wellbeing elements across the social and environmental determinants of health. In combination, they provide a view on the overall population health of the communities we serve and will inform service planning and delivery and assist in understanding population health and response of the all sectors involved.

Examples of these may include:

- Health status indicators such as the number of people in the catchment experiencing obesity and chronic disease, and the proportion of the population that smoke, and drink/take drugs at levels that increase risk of harm or ill-health. Particularly those at risk of poorer health outcomes including Aboriginal and Torres Strait Islander peoples, older people, rural people, young people and people with a disability.
- Safety indicators such as access to safe, affordable housing, and the occurrence of violence in the home and in communities.
- Socio-economic factors including education attainment, occupation, and income as a determinant of the socio-economic position for people in the region and their need for care and access to services, particularly those at risk of poorer health outcomes including Aboriginal and Torres Strait Islander peoples, LGBTIQ+ communities, older people, rural people, young people and people with a disability.
- Environmental factors, including access to acute and primary health facilities and professionals, safe drinking water, and resources.

Sustainable development goals

In addition to the organisational and community indicators listed above, Gateway Health will progressively seek to incorporate a number of the UN's Sustainable Development Goals (SDGs) and outcomes when assessing this strategic plan. The following list provides some examples of the types of SDGs and their measures that might provide suitable alignment with Gateway Health's strategic aspirations and enablers. It should be noted that this is a sample selection only and there are other SDGs that may be worth considering.



SDG 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture

- Ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round.
 - Prevalence of moderate or severe food insecurity in the population
 - Partnerships focusing on food security and access



SDG 3. Ensure healthy lives and promote wellbeing for all at all ages

- Reduce mortality from non-communicable diseases.
 - Prevalence data
 - Health promotion actions – effective programs delivered, health literacy, evidence informed focus on vulnerable populations including Aboriginal and Torres Strait Islander peoples and older people
 - Partnerships – Municipal Health and Wellbeing Plan actions achieved, social and environmental determinants of chronic illness
- Promote mental health.
 - Prevalence data
 - Health promotion actions – effective programs delivered, health literacy, evidence informed focus on vulnerable groups including young people, older people, and LGBTIQ+ people
 - Partnerships focusing on social and environmental determinants of mental health and wellbeing
- Prevent and treat substance abuse.
 - Prevalence data
 - Catchment Plan goals
 - Health promotion actions - effective programs delivered, health literacy
 - Partnerships focusing on social and environmental determinants of substance abuse
- Universal access to sexual and reproductive care, family planning and education.
 - Prevalence data
 - Health promotion – effective programs delivered
 - Partnerships focusing on social and environmental determinants of sexual and reproductive health issues



SDG 13. Climate Action

- Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters.
 - Partnerships focusing on social and environmental determinants of recovery and trauma
 - Effective consumer/community-led programs delivered in trauma informed disaster recovery and preparedness



SDG 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable, and inclusive institutions at all levels

- Ensure responsive, inclusive, participatory and representative decision-making at all levels.
 - Consumer engagement and consumer experience
 - Health literacy outcomes



SDG 17. Partnerships to achieve the Goal

- Encourage and promote effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships.
 - Effective partnerships to deliver shared goals – strategic and operational

Strategic context

Understanding the external context in which we operate is critical to informing Gateway Health's strategic direction. The organisation has drawn upon a number of sources to guide and inform its strategic thinking, including learnings and insights from its 10-year service plan (2019-29), desk-based research, and input from staff, community members and key partners in the region.

Outlined below are a number of key trends and considerations that have shaped this strategy.



Aligning health and wellbeing outcomes at a global level

Impact assessment is an important aspect in any 'purpose' driven organisation. The need for organisations to capture, analyse and report outcomes is critical in accessing funding and important when communicating their impact.

In Australia, there is growing use of a shared set of international goals, called the Sustainable Development Goals (SDGs).

Launched by the UN in 2015, the SDGs are made up of 17 overarching goals that set out a global aspiration for peace and prosperity for people and the planet, now and into the future.

They are increasingly being used by community health and social service organisations to aid understanding of how they impact the communities they serve through the lens of shared global indicators.

The SDGs cover a broad spectrum of social, economic and environmental health and wellbeing indicators. They use a shared language and set of aspirations that can be communicated across organisations, industries and countries. In total, 230 indicators underpin the 17 goals, with organisations targeting those that most align to their purpose.





Prevention and health promotion foundations

Health promotion and illness prevention have significant positive impacts on population health, and result in major cost savings and returns on investment for governments and the community. Best practice health promotion and illness prevention requires a multifaceted, population approach underpinned by strong leadership.

Addressing the underlying causes of ill-health and inequity is essential to creating social and physical environments that will promote and protect health.

According to the Public Health Association of Australia, Community Health is built on the founding philosophy of health for all, as outlined in the Alma-Ata Declaration of 1978 which defines health as *“a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity, is a fundamental human right and that the attainment of the highest possible level of health is a most important world-wide social goal whose realization requires the action of many other social and economic sectors in addition to the health sector.”*

The focus on wellbeing in the community health sector draws upon well-established frameworks for health promotion and prevention, including the Ottawa Charter (1986) that identifies five action areas for health promotion:

1. Building healthy public policy
2. Creating supportive environments
3. Strengthening community action
4. Developing personal skills
5. Re-orienting health care services toward prevention of illness and promotion of health

Three strategic approaches to health promotion are identified in the charter as follows:

- **Advocate:** Health is a resource for social and developmental means, thus the dimensions that affect these factors must be changed to encourage health.
- **Enable:** Health equity must be reached where individuals must become empowered to control the determinants that affect their health, such that they are able to reach the highest attainable quality of life.
- **Mediate:** Health promotion cannot be achieved by the health sector alone; rather its success will depend on the collaboration of all sectors of government as well as independent organisations (media, industry, etc.).



The foundations set by the Alma-Ata Declaration and the Ottawa Charter remain relevant to our understanding and practice in health promotion and illness prevention. The Astana Declaration of 2018 sets out the importance of continuous, integrated, people-centred and gender sensitive primary health care that is acceptable, available and affordable as the cornerstone of physical, mental and social health and wellbeing.

Both the Alma-Ata and Astana Declarations and the Ottawa Charter pick up on the need for cross-sector collaboration to address the range of social, ecological, political, commercial and cultural factors that impact on health – the “causes of the causes” of ill-health.

As demand on health and social care increases, there is recognition by government and across the health and community care system that an integrated system with a focus on early intervention and prevention is critical to achieve better health outcomes.

This focus on wellbeing is characterised by the Victorian Government’s aspiration for a *“Victoria free of the avoidable burden of disease and injury so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age”*.

The focus on the wellness agenda provides significant opportunity for organisations that can embed, demonstrate and deliver localised, sustainable and collaborative models of care across the lifespan and prevention spectrum. Community health is well placed to lead this agenda.



The size and scale of community health organisations are changing

The role of community health organisations in the context of the broader health system, is changing. Government is looking to address pressures on the health system through integrated service models that reduce public hospital demand. Clients and communities expect increased place-based and in-community care. Health and wellbeing organisations, especially in regional and rural settings, are seeking more collective approaches to clinical governance, workforce planning and delivery of integrated service models.

In response to this changing context, a number of community health services have experienced rapid growth through diversification, expanded geography, merger and acquisition, while others have struggled to remain financially sustainable. Pressure on the sector is driven through changing

funding models, review of existing governance and independence, shifting community expectations and increased competition for funding. These factors have driven change for many community health organisations. Across Victoria there are now fewer, bigger independent community health organisations, supporting larger geographies and offering more diversified services.

A community health taskforce report released in March 2020, sets out a roadmap for the community health sector that focusses on strengthening governance, enhancing funding models and developing models of integrated care that enhance partnerships with acute healthcare organisations. Gateway Health's Service Plan 2019-2029 recognises the important relationship with regional and small rural health services across the region and the opportunity to further develop models of care that improve access to services and enable care at the right time, in the right setting, delivered by the most appropriate service.





A changing region, shaping future demand

The communities we serve are diverse, growing and changing. The economy of the Ovens Murray region can be characterised by manufacturing, agriculture and service industry, with the future predicted to bring continued growth in tourism-based services, as well as traditional agricultural industries. Population change, both decline and growth, is expected over the next 10 years, and is variable across the region. Gateway Health's primary catchment area is predicted to grow by nearly 22,000 people (13%) by 2031. The number of people over the age of 65 is expected to rise on average 51% across regional and rural towns, while regional centres, such as Wodonga, will experience significant migration of young families.

The changing social, economic and demographic mix of our region will have significant implications for Gateway Health's delivery model, service offerings, relationships and referral pathways, as well as increasing demand for programs and services.



Demand for flexible and agile models of care

Community health models of care are evolving in response to increasing demand for flexible, place-based (in home, outreach and in-clinic), and personalised care. As the population ages, the need for transdisciplinary (collaborative) models of care that are responsive, flexible and agile is increasing and will be critical in supporting the care of clients, particularly those with chronic and complex needs. Greater use of telehealth is creating new avenues for access to care, and health technology is creating new opportunities for services previously requiring a hospital stay, to be delivered in a community health setting.



A complex health and community care environment

Gateway Health operates in a complex service delivery environment. It sits at the interface of acute care, aged care and primary health care, and other sectors, such as justice, education, housing and employment. This complexity can create challenges for members of the community who must navigate various systems to obtain access to all the services they require. A "no wrong door" approach with ease of access and effective transition of care between providers is therefore critical in ensuring clients receive the care they need when they need it.

In such an environment, it is essential that both Gateway Health and other agencies and service providers have defined, clearly delineated and well understood roles, and work together to provide a coherent service system response.





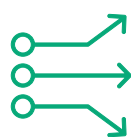
Pressures on workforce

Health and community care organisations in regional and rural regions often experience challenges in attracting and retaining qualified and experienced health and corporate service professionals. The barriers to rural careers in health have typically included issues such as lack of career path progression opportunities for individuals and/or their partners, limited access to continuing professional education, and narrower lifestyle, health and education choices for families.

There is a growing body of evidence to suggest that students trained in rural regions are more likely to take up careers in rural regions. National health workforce strategies and universities have therefore invested in establishment and growth of tertiary education facilities in rural regions including the Ovens Murray region. The region is home to campuses of Latrobe University, Melbourne University and Charles Sturt University in addition to vocational education providers including Wodonga TAFE, GoTAFE, and The Centre (Wangaratta).

Gateway Health is well placed to build on its existing relationships with these regionally based education institutions, not only to strengthen the undergraduate placement programs already in place, but to further develop post graduate and research pathways for local graduates.

Gateway Health is actively participating in a range of area-based collaborations and projects aimed at generating increased capabilities within the local workforce, such as the Alpine Valleys Community Leadership Program and models of shared resourcing and training and development programs with other organisations. There is opportunity to further build on these education and career pathway opportunities to “grow our own” local workforce.



Changing funding structures impacting organisational sustainability

The move away from programmatic or block funding to consumer-directed funding has introduced the need for a new set of capabilities within organisations. Specifically, this requires the capacity to engage and attract consumers to the services on offer through new work in branding, marketing and promotion of community health services. Changed funding structures bring a new level of variability and volatility to community health, requiring significant changes to service offerings, employment and operational models. These changes can be positive and lead to innovation and growth but may also present a challenge where services are needed but are financially unviable.



Climate change adaptation, crisis and community recovery

Drought, floods, bushfires and environmental disasters have long been a reality within the Ovens Murray region. Recently and in particular in 2019 and early 2020, a number of environmental and health crises significantly impacted Ovens Murray communities. Bushfires followed drought and burnt thousands of hectares, affecting lives and livelihoods as well as the environment. Flooding and landslips followed the fires. COVID-19, a global health pandemic that saw Australia, among many countries across the world respond through mandating extended stay-at-home orders, physical distancing practice, and limiting peoples' mobility compounded these issues from February 2020.

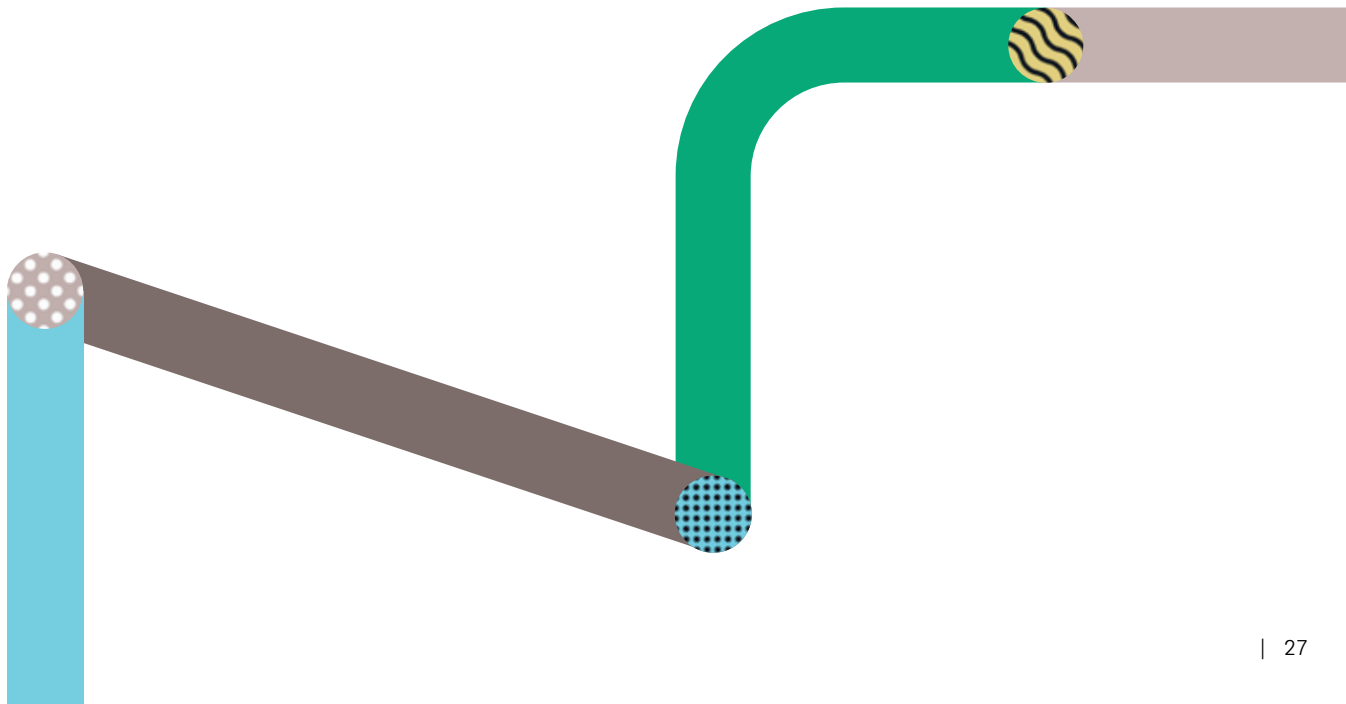
Local, state and national health and economic impacts required a completely different way of working and engagement. Health agencies were suddenly placed under pressure to provide additional or changed services within communities, and organisations of every kind had to rapidly organise entire workforces to be equipped and supported in working from home.

Climate change and disaster response and recovery is a significant risk factor to the wellbeing of many in the Ovens Murray region. Climate change and its ongoing impact, requires organisations to adapt their business models, adjust their business continuity plans and invest in infrastructure to ensure they are flexible and adaptable to different modes of care and client contact. COVID-19 in particular will shape the approach of health and social service organisations for years to come.



Advances in technology are changing the way we deliver services

Technological advances and disruptions are shaping the future of service delivery across the health sector. Advances in health technology such as new medications and treatments can reduce the need for a hospital stay and enable care to be provided at home or in community settings. Increased use of telehealth can be critical in complementing and improving how organisations respond to need and deliver care. For rural communities this can ease travel burden for clients and families in accessing the care they need. However, technological advance comes at a cost in terms of infrastructure investment, staff and client capacity building and increased competition, as physical and geographical boundaries become less constrained. It will be critical for organisations across the health sector to ensure that technology does not drive practice but creates opportunities to enhance and enable better access and choice for clients.





gateway health

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