



# West Coast District Health Board Public Health Plan 2018-19

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# 1. INTRODUCTION

## a. Keeping our people well

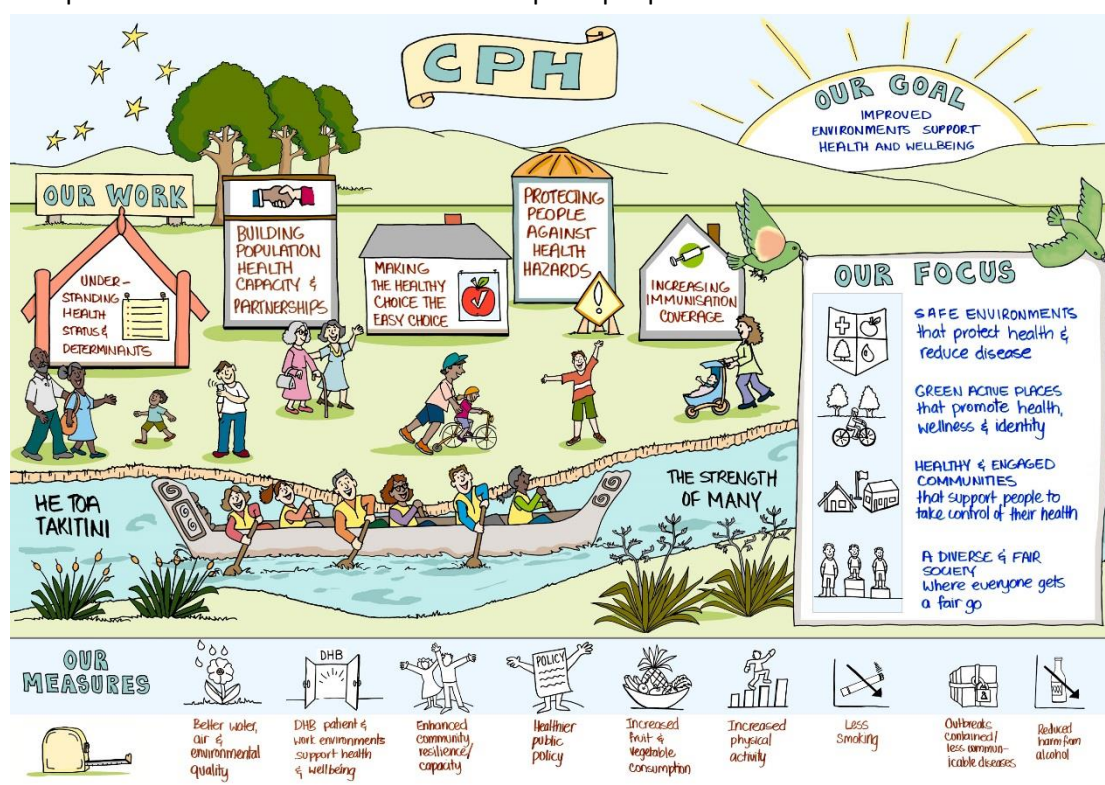
Public health is the part of our health system that works to keep our people well. Our goal is to improve, promote and protect the health and wellbeing of populations and to reduce inequities. Our key strategies are based on the five core public health functions<sup>1</sup>:

1. Information: sharing evidence about our people's health and wellbeing (and how to improve it)
2. Capacity-building: helping agencies to work together for health
3. Health promotion: working with communities to make healthy choices easier
4. Health protection: organising to protect people's health, including via use of legislation
5. Supporting preventive care: supporting our health system to provide preventive care to everyone who needs it (e.g. immunisation, stop smoking).

The principles of public health work are: focusing on the health of **communities** rather than individuals; influencing **health determinants**; prioritising improvements in **Māori health**; reducing **health disparities**; basing practice on the best available **evidence**; building effective **partnerships** across the health sector and other sectors; and remaining **responsive** to new and emerging health threats.

Public health takes a life course perspective, noting that action to meet our goal must begin before birth and continue over the life span.

This plan describes how we will work to keep our people well in 2018-19.



<sup>1</sup> Williams D, Garbut B, Peters J. Core Public Health Functions for New Zealand. NZMJ 128 (1418) 2015. <https://www.nzma.org.nz/journal/read-the-journal/all-issues/2010-2019/2015/vo-128-no-1418-24-july-2015/6592>

## b. Public health and the New Zealand Health Strategy

Public health supports the “all New Zealanders live well and stay well” component of the New Zealand Health Strategy’s central statement. We aim to be:



### *People powered*

- Greater integration of prevention and population health services with treatment services planning and delivery, building on the strengths of both.
- More effective interventions by the full range of local public health providers through the application of health promotion skills that align evidence-based practice with an understanding of local needs and context.
- Public health skills help to mobilise local communities to engage with the design and development of health systems that meet their needs.

### *Closer to home*

- Public health systems that address local environmental risk factors, such as healthy housing, working alongside personal care interventions, such as smoking and nutrition advice by health practitioners.
- Small public health and health care providers, including Māori providers, better able to call on specialist public health skills for application to local problems.
- Communities, community organisations and other agencies and community leaders better supported to develop local solutions to causes of health problems for their communities.

### *Value and high performance*

- Effective delivery of public health initiatives with proven value, with cost-saving or cost-benefit ratios equal or better than treatment interventions.
- Improved marshalling of information and resources to address health inequalities and improve Māori health.

### *One team*

- Improved leadership in developing prevention and population health skills and capability in local organisations, including DHBs, PHOs, Māori providers and NGOs.
- Improved capacity to support a highly-skilled prevention and population health workforce across the health system.

### *Smart system*

- A network of capable health assessment and surveillance units across the South Island, linked to a core Ministry intelligence function, leading to better understanding of local needs.
- Effective evaluation of interventions and sharing of learnings across organisational and professional networks.

## c. Regional context and priorities

The five South Island DHBs together form the South Island Alliance, which is committed to the vision of “A connected and equitable South Island health and social system that supports all people to be well and healthy”.

CPH's principal role in regional activity is as a member of the South Island Alliance's South Island Public Health Partnership Workstream (SI PHP), which aims to "Improve, promote and protect the health and well-being of populations and reduce inequities".

The SI PHP includes the manager and clinical director of each South Island public health unit, a Māori public health specialist, representatives from the South Island Alliance and the Ministry of Health, and a South Island Alliance sponsor.

The SIPHP has identified the following regional priorities for public health in 2018-2019:

- Collective impact and partnerships
- Cross-sector capacity development and initiatives to improve outcomes in the first 1,000 days
- Partnership with Te Herenga Hauora to improve Māori health
- Facilitating a health promoting health system
- A "Health in All Policies" approach during this year to the social determinants, influencing oral health, safe and warm homes, and environmental sustainability
- Strategic and operational alignment of South Island public health units
- Consistent and coordinated regional strategic and operational approaches to: drinking water; community resilience and psychosocial well-being; a sustainable on call/after-hours system for South Island health protection services and regional approaches to both alcohol harm reduction and the promotion of healthy eating and active lifestyles.

#### **d. District Health Board priorities**

CPH's work aligns with the West Coast DHB vision of "an integrated West Coast health system that is both clinically and financially viable, a health system that wraps care around the patient and helps people to stay well in their own community."

Our work aligns with the West Coast DHB short and medium term strategic priorities for 2018-19:

- Equitable, accessible healthcare
- An environment where people thrive
- An engaged and informed community
- Integrated, sustainable services
- Standardised and streamlined processes
- Evidence-informed decision making.

#### **e. Statutory responsibilities**

As a public health unit, CPH employs and trains medical officers of health, health protection officers, and other public health designated officers. Our staff fulfil a range of statutory responsibilities and requirements as set out in the national Public Health Service Specifications. This includes meeting statutory reporting requirements.

#### **f. Working in partnership**

We are a regional service covering Canterbury, South Canterbury and the West Coast. Although the activities signalled in this plan will largely be carried out by the staff in our Greymouth office, some activities will be led or supported by staff in the Christchurch office.

In addition to our partnership with the other South Island public health units, our work is based on strong partnerships with other parts of our health system and with other key agencies, including:

- West Coast DHB , West Coast PHO and Poutini Waiora
- Local iwi
- Local councils
- Government agencies
- Education settings
- Non-government organisations and networks (e.g. Sport Canterbury/West Coast).

#### **g. Key challenges/ priorities for keeping our people well**

The West Coast DHB has the smallest population of any DHB in New Zealand, at 32,600 people.

We also have the third largest geographical area, making the West Coast DHB the most sparsely populated DHB in the country with only 1.4 people per square kilometre.

Current key issues for our population are:

- higher levels of socioeconomic deprivation compared to the rest of New Zealand (including lower mean personal incomes and a higher proportion without educational qualifications)
- higher overall morbidity and mortality rates and a lower life expectancy compared with the New Zealand average
- almost a third (31%) of our adult population are obese, 22% are current smokers and 16% are hazardous drinkers
- poorer overall health status for our Māori population, which currently represents 12% of our population
- overall poor drinking water quality with many West Coast water supplies vulnerable to severe weather events. Council water suppliers have small rating bases and infrastructure improvements are expensive.

#### **h. Quality improvement**

Our work is underpinned by a Quality Strategy that prioritises:

- A continuous improvement culture and robust quality systems
- Accessible public health information for staff and other workers
- A highly skilled, culturally appropriate public health workforce
- Clear, robust planning and reporting
- Effective communication to staff and communities.

The following key components of health excellence will be managed by our Divisional Leadership Team in 2018-19:

- The Treaty of Waitangi
- Leadership (including culture and communications)
- Strategy
- Partnerships
- Workforce
- Operations
- Results.

## i. Reporting

- We will provide full details of statutory activities required by the Ministry of Health.
- We will provide formal reports to the Ministry of Health and our DHBs in January and July. Reports will relate to the priorities and outcomes described in this plan, and will outline key achievements for the previous six months and describe any challenges and emerging issues.

## 2. SURVEILLANCE / MONITORING

### ***“Tracking and sharing data to inform public health action”***

Our key surveillance/monitoring priorities for 2018-19 are:

- To monitor and report on communicable disease trends and outbreaks.
- To contribute to the inaugural South Island Population Health Report.
- To review all our surveillance and reporting systems and products

The surveillance/monitoring **outcomes** we work towards are:

- Prompt identification and analysis of emerging communicable disease trends, clusters and outbreaks.
- Robust population health information available for planning health and community services.
- Improved public understanding of health determinants.

## 3. EVIDENCE / RESEARCH/ EVALUATION

### ***“Providing evidence and evaluation for public health action”***

Our key evidence/research/evaluation priorities for 2018-19 are:

- To conduct and support evaluation of public health-focused initiatives.
- To provide evidence reviews and synthesis (both on a request basis and self-initiated) to support the work of our team and other public health focused work in our region.
- To collect, analyse and present data to inform public health action.

The evidence/research/evaluation **outcomes** we work towards are:

- Population health interventions are based on best available evidence and advice.
- Robust evaluation for public health initiatives.

## 4. HEALTHY PUBLIC POLICY

### *“Supporting development of health-promoting policies and approaches in other agencies”*

Our key healthy public policy priorities for 2018-19 are:

- To write submissions to influence public policy including, where appropriate, on behalf of Healthy West Coast and/or WCDHB.
- To work with local authorities on policies that affect health, for example, smokefree environments and drinking water.
- To ensure a public health perspective (e.g. equity for Māori health) is part of inter-agency work, including supporting council Long Term Plan processes.

The healthy public policy **outcomes** we work towards are policies, practices and environments that support health and wellbeing, improve Māori health, and reduce disparities.

## 5. HEALTH-PROMOTING HEALTH SYSTEM

### *“Supporting development of health-promoting policies and approaches across our health system”*

Our key health-promoting health system priorities for 2018-19 are:

- To contribute to a WCDHB alcohol harm reduction strategy.
- To work towards alignment of health promotion messages and approaches across the West Coast health system.
- To ensure that health system policies support health and wellbeing, improve Māori health, and reduce disparities.

The health-promoting health system **outcomes** we work towards are policies, practices and environments in healthcare settings that support health and wellbeing, improve Māori health, and reduce disparities.



## 6. SUPPORTING COMMUNITY ACTION

### *“Supporting communities to improve their health”*

Our key supporting community action priorities for 2018-19 are:

- To provide access to quality health information resources.
- To partner with marae and Māori settings and organisations to deliver culturally appropriate health promotion.
- To support communities to identify and address key health priorities.
- To support the development of local initiatives to improve food security.
- To support promotion of smoking cessation services.
- To work collaboratively to increase smokefree environments across a range of settings.
- The delivery of Smokefree enforcement activities.

The supporting community action **outcomes** we work towards are:

- Workplaces, Marae and other community settings that support healthy choices and behaviours.
- Effective community action that supports healthy choices and behaviours.

## 7. EDUCATION SETTINGS

### *“Supporting our children and young people to learn well and be well”*

Our key supporting community action priorities for 2018-19 are:

- Effective engagement with all education settings to identify and address key health priorities.
- To support settings to engage effectively with whānau and the wider community.
- To facilitate the provision of appropriate professional development, resources and support to education settings.

The education setting **outcomes** we work towards are:

- Increasing opportunities and support in education settings for healthy choices by students, families and staff.
- Students, families and communities involved and supported.
- Teachers supported with appropriate professional development and resources.

## 8. COMMUNICABLE DISEASE CONTROL

### *“Preventing and reducing spread of communicable diseases”*

Our key communicable disease control priorities for 2018-19 are:

- To follow up notifiable diseases promptly.
- To detect and control outbreaks.
- To promote infection prevention and control and immunisation in community and healthcare settings.

The communicable disease control **outcomes** we work towards are:

- Reduced spread of communicable diseases.
- Outbreaks rapidly identified and controlled.
- Improved immunisation rates.

## 9. HEALTHY PHYSICAL ENVIRONMENT

### *“Supporting communities to improve their health”*

Our key physical environment priorities for 2018-19 are:

- To work with local authorities to improve drinking water quality and security of supply.
- To meet our Ministry of Health statutory obligations in relation to the physical environment.
- To work with West Coast Regional Council to improve air quality.
- To work with West Coast Regional Council to improve recreational water quality.
- To manage risks of hazardous substances.
- To work with local authorities to ensure that their plans and policies support healthy physical environments.

The healthy physical environment **outcomes** we work towards are:

- Improved air quality.
- Improved quality and safety of drinking water.
- Improved quality and safety of recreational water.
- Improved safeguards and reduced exposure to sewage and other hazardous substances.
- Urban environments that support connectivity, mental health, and physical activity.

## 10. EMERGENCY PREPAREDNESS

### *“Minimising the public health impact of any emergency”*

Our key emergency preparedness priorities for 2018-19 are:

- To review our Emergency Response plan to ensure alignment with WCDHB Health Emergency Plans.
- To ensure all staff have appropriate emergency response training.
- To participate in local emergency response exercises.
- To enhance emergency response capacity and community resilience.
- To work with local rūnaka to support emergency response capacity of iwi Māori.

The supporting emergency preparedness **outcomes** we work towards are:

- Plans, training and relationships in place.
- Public health impact of any emergencies mitigated.
- Prepared resilient communities.

## 11. SUSTAINABILITY

### *“Increasing environmental sustainability practices”*

Our key sustainability priorities for 2018-19 are:

- To promote sustainability considerations including active transport in relevant submissions to local authorities.
- To support active transport in education settings.
- To reduce CPH’s own environmental impact.

The sustainability **outcome** we work towards is reduced environmental impact within and outside our health system.

## 12. SMOKING CESSATION SUPPORT

### *“Supporting smokers to quit”*

Our key smoking cessation support priorities for 2018-19 are:

- Effective and efficient delivery of quality stop smoking services to all West Coasters who smoke.
- Enhanced health professional and community understanding of how to motivate quit attempts and make quality referrals (including self-referral) to Oranga Hā stop smoking service.

The smoking cessation support **outcome** we work towards is for more smokers to stop smoking.

## 13. WELLBEING AND MENTAL HEALTH PROMOTION

### *“Improving mental health and wellbeing”*

Our key wellbeing and mental health promotion priorities for 2018-19 are:

- To maintain connections with relevant agencies to promote mental wellbeing.
- To work towards alignment of mental health promotion messages and approaches across the West Coast health system.
- To continue to support the West Coast Suicide Prevention Action and Governance Groups.

The wellbeing and mental health promotion **outcome** we work towards is co-ordinated intersectoral action to improve mental health and wellbeing.

## 14. ALCOHOL HARM REDUCTION

### *“Reducing alcohol-related harm”*

Our key alcohol harm reduction priorities for 2018-19 are:

- To review and report on all alcohol license applications.
- To maintain an effective tri-agency partnership with Police and district licensing staff.
- To monitor high-risk premises and events.
- To support WCDHB to draft and implement an alcohol harm reduction strategy.
- To support schools and their communities to address alcohol-related harm among young people.

The alcohol harm reduction **outcomes** we work towards are:

- Effective working relationships with other agencies and organisations to reduce alcohol harm.
- Reduced risk of alcohol harm at and around licensed premises and events.
- A culture that encourages a responsible approach to alcohol.
- Young people are protected from alcohol harm.