

Northern NSW Local Health District Health Promotion Annual Report 2017 - 2018



Health Promotion – Adding years to life and life to years

One third of the burden of disease experienced in NSW could be prevented by reducing the exposure to modifiable risk factors (AIHW 2016). While much of our focus is on reducing these risk factors, we also focus on promoting wellness so that people can experience the best possible health.

Our funding targets the three state-wide priority areas with a number of programs to achieve outcomes:

- Healthy Weight
- Tobacco
- Falls Prevention

In addition to these three priority areas, our Special Health Promotion Funding has targeted the following:

- Alcohol
- Hearing Disadvantage in Babies
- Equity and Aboriginal Health
- Research and Evaluation
- Health Literacy

Our team is committed to delivering high quality evidenced-based programs complemented by applied research to monitor processes and impacts, improve program efficiency and effectiveness and to contribute to new evidence.

Find us at www.nswlhd.health.nsw.gov.au/health-promotion



Like us at Facebook (Live Well Now)

Jillian Adams

Manager, Health Promotion

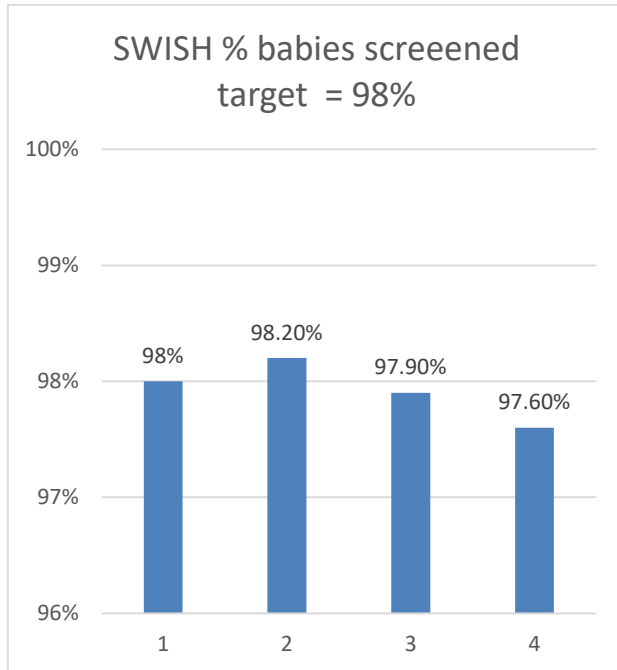
August 2018

SWISH – State Wide Infant Screening for Hearing

Why is this important?

Infants who are diagnosed and treated by six months of age optimise speech and language development and minimises the need for these children to require ongoing special education.

Indicator



Story Behind the Curve

SWISH program continues to meet targets: in the 12 months 2570 babies were screened out of a possible 2633 births in NNSW Health Facilities. From this there were 17 referrals to paediatric audiologists.

CHEGS (Community Health Education Groups) exercise classes

Why is this important?



Access to low cost exercise classes that are suitable for falls prevention for older people throughout the Northern Rivers helps to keep people active and socially connected.

CHEGS has been providing exercise and other health promotion programs to the community on a cost recovery basis for over 30 years. CHEGS delivers over 35 weekly classes with an average participation of ten people per class though-out the Northern Rivers.

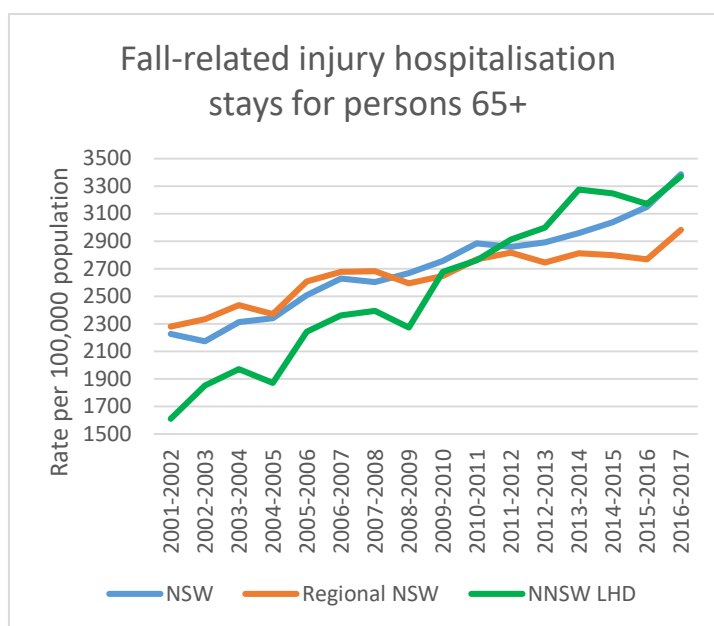
This year CHEGS moved from an independent incorporated organisation to the control of the Local Health District.

Falls Prevention

Why is this important?

Falls injury is a major cause of hospitalisation and loss of independence among people aged 65 and older. As the population ages, the incidence of falls increases and the hospitalisation stays increase. But falls can be prevented.

Participation in physical activity which involves strength and balance exercise at least 2 hours per week can reduce a person's risk of falls by 42%. Other important factors include medication and vision checks, appropriate footwear, nutritional status as well as household trip and hazard checks.



Stepping On

Why is this important?

The Stepping on Falls Prevention Program is considered to be one of the most effective falls prevention programs available, giving people the confidence to undertake their everyday activities safely. Participation helps people over 65 maintain independence and give them confidence in their mobility so they are able to undertake their everyday activities safely and without the risk of falling.

Story Behind the Curve

Stepping On continues to meet and exceed targets. Recruitment numbers in the Lismore area are harder to achieve and so more effort is directed to this locality:

- Stepping On continues to achieve Ministry of Health targets for programs and participants.
- All programs and facilitators are quality-checked.

Falls prevention in health facilities:

Preventing falls in health facilities is important because falls are a major cause of harm for older people and fall related injuries impose a substantial burden on the health care system.

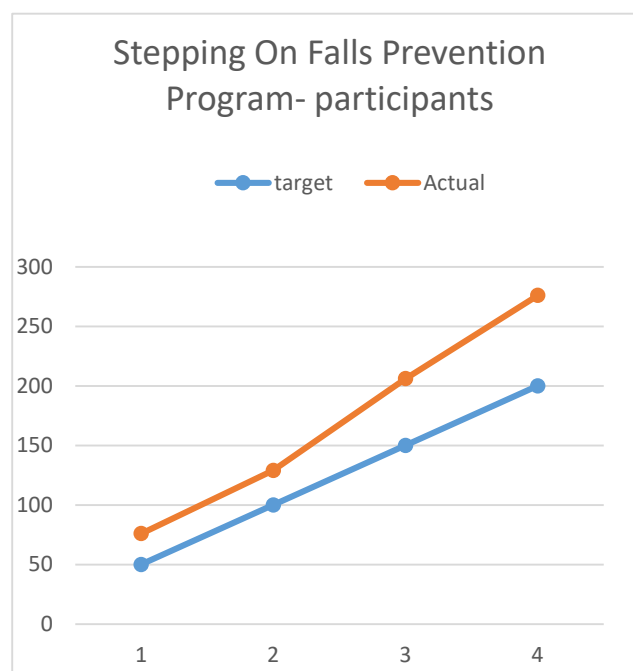
This year, reducing severely injurious falls amongst older people in hospital is a Leading Better Value Care priority. Health Promotion staff and the Clinical Excellence Commission Falls Collaborative have provided intensive support to multi-disciplinary teams in Byron, Tweed and Lismore hospitals to identify the main causes of falls in these hospitals and to trial solutions to reduce the risk of older people falling.



The teams identified the following areas to trial improvement activities: intentional rounding with identified high falls risk patients, increasing the completion rate of falls screening and identifying delirium earlier through cognitive screening. Health Promotion will continue to support these teams with a focus on creating sustainability to embed the identified quality improvement practices.

We are also providing mentoring and guidance for innovative and improved initiatives and protocols for falls prevention strategies in other sites through-out the district, with particular support for Mental Health wards.

Indicators



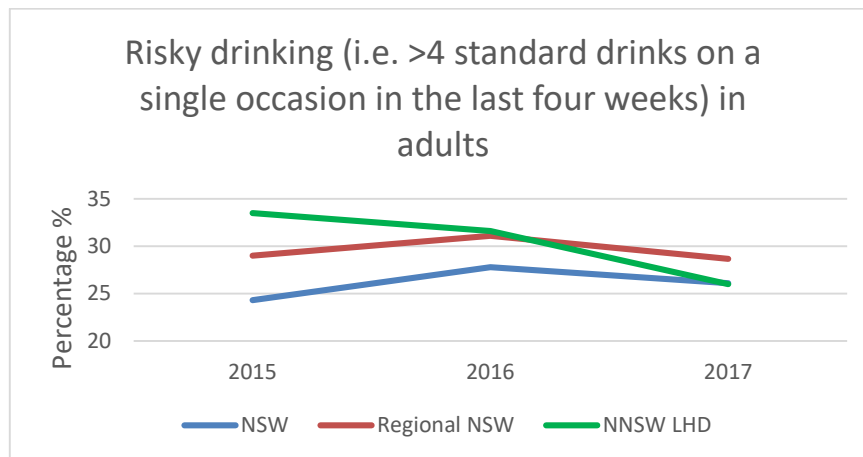
Reduce Risky Drinking

Why is this important?

Risky drinking contributes to ill health, violence and injury. In Northern NSW 26.0% of adults drink at risky levels. The Reduce Risk Increase Student Knowledge Program (RRISK) reduces the risk of road crashes and informs young people about the risks associated with alcohol and other drugs.

Current status:

- NNSWLHD risky drinking prevalence has dropped in the last three years; it was significantly higher than the NSW average in 2015, but not significantly different in 2016 and 2017.



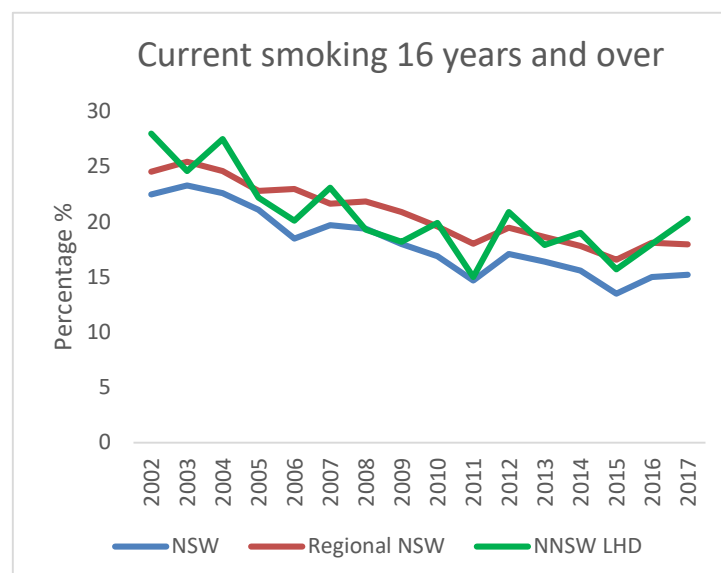
Achievements:

- 81% of all high schools Year 11 class in the Northern Rivers attend RRISK

Tobacco Control

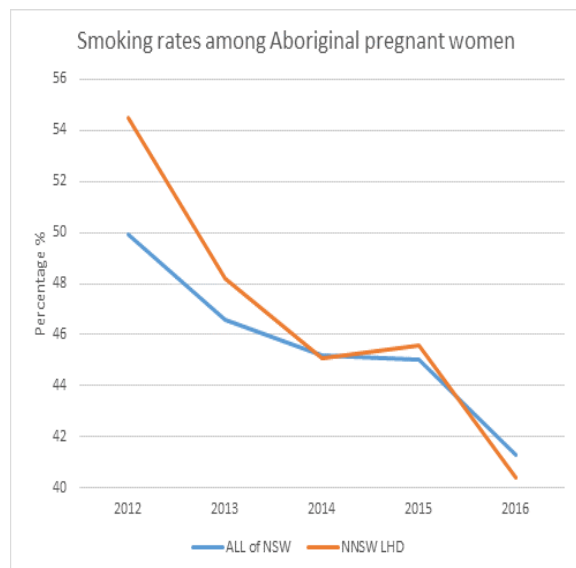
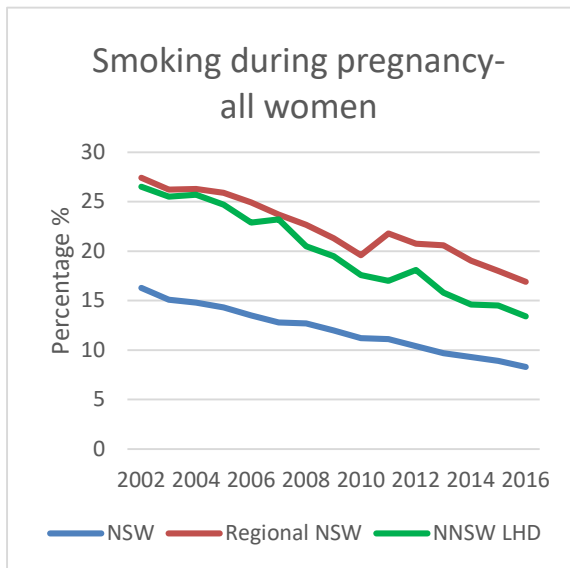
Why is this important?

Smoking remains the largest single preventable cause of death and disease in Australia. In 2017, 15.2% of people over 16 reported current smoking. In Northern NSW that rate was 20.3% but this is not statistically significantly different. Since 2002 to 2016 there has been a decrease in the proportion of people 16 and over in Northern NSW LHD who are current smokers from 28.0% (24.0-32.1) to 20.3% (17.6-26.4)



Smoking during pregnancy has a negative impact on the health of the unborn baby and the mother. Smoking rates amongst Aboriginal mothers during pregnancy are higher than the general population with 40.4% of Aboriginal mothers identifying that they smoked sometime during pregnancy, compared to 10.5% for non-Aboriginal pregnant women.

Since 2012, the numbers of Aboriginal women who smoke during pregnancy in NNSW has declined from 54.5% in 2012 to 40.4% in 2016. Since 2012, the numbers of Aboriginal women who smoke during pregnancy in ALL of NSW has declined from 49.9% in 2012 to 41.3% in 2016 (i.e. the decline in NNSW has been larger than the state wide decline, i.e. 14.1% and 8.6% respectively).



Tobacco Programs:

Smoke Free Health Care

Keeping health facilities smoke free is a big challenge but an important one as it reduces the amount of second hand smoke that visitors and staff are exposed to. Smoke free health facilities also create a more supportive environment for those who have quit. Health Promotion works with local work health and safety committees to improve compliance and make it easier for patients to quit smoking while in hospital and for staff to avoid cravings during work shifts. This year Health Promotion has conducted compliance audits in eight health campuses and provided reports and recommendation for WH&S committees for action to improve compliance. Compliance with the NSW Health Smoke Free Health Care Audit was at least 98% at all sites (Ministry of Health target is 98%).



Brief Interventions in the community

Brief Interventions are evidence based structured interactions that help reduce smoking levels. They consist of carbon monoxide level tests, followed by a structured discussion to determine participant's level of nicotine dependence and readiness to change. After this, we provide advice, offer referral to the quit line and may offer nicotine replacement therapy samples. This year we conducted 343 brief interventions.

Quit for New Life (Q4NL)

The program supports Aboriginal women and women having an Aboriginal baby to quit smoking while pregnant and to stay quit after the birth of the baby. In 2017/18, 65 Aboriginal pregnant women who smoked participated in Quit 4 New Life in Northern NSW.

Training for Health Professionals

This year we provided training and education to 424 health practitioners to increase their skills in providing brief interventions in health facilities and to ensure nicotine dependent inpatients receive correct nicotine replacement therapy during their stay.

Helping U 2 Quit Clinics and Groups

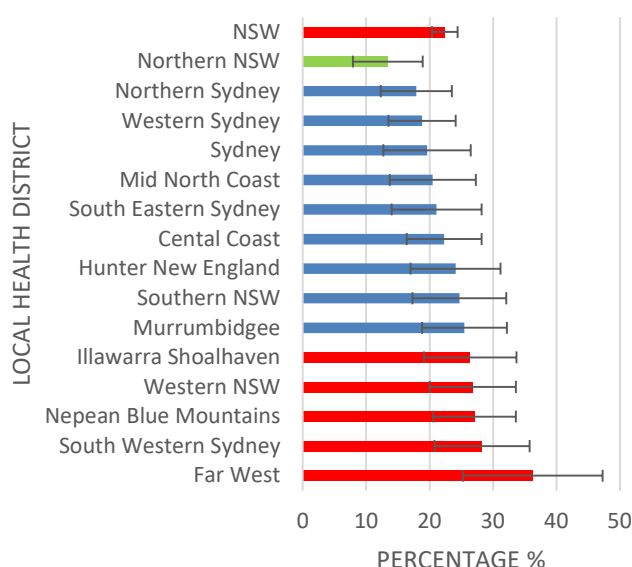
Face to face clinics established in Kingscliff and Tweed Heads with phone counselling provided to patients in other areas. In 2017/18, 300 smokers were seen at groups and clinics.

Healthy Eating and Active Living (HEAL)

Why is this important?

CHILDREN: Since 1985 the proportion of Australian children who are overweight has doubled and the prevalence of obesity trebled. Excess weight gain increases the likelihood of developing chronic disease including type-2 diabetes, cardiovascular disease, many types of cancer and fatty liver disease

Childhood (5-16 years) overweight and obesity 2012-2015



Current Status: Northern NSW LHD was the only LHD in which childhood overweight and obesity prevalence 2012-15 was significantly lower than the state average. The NNSW childhood overweight and obesity rate was significantly lower than in 5 other LHDs (red bars).

The Healthy Children's Initiative preventive interventions in 0-12 year olds in NSW is starting to have an impact with recent reductions in overweight and obesity reducing by 0.3% per year.

There is clear evidence that the practices schools and Early Child Care Centre (ECC) contribute to improving children’s diet and physical activity levels. 109 Early Child Care Centres and 135 primary schools are currently implementing the program in the Northern Rivers.

Our programs don’t just address childhood obesity however, they also aim to improve nutritional intakes and activity levels of all children aged 0-12, regardless of weight status. This is because these factors can affect health statuses independently of overweight and obesity.

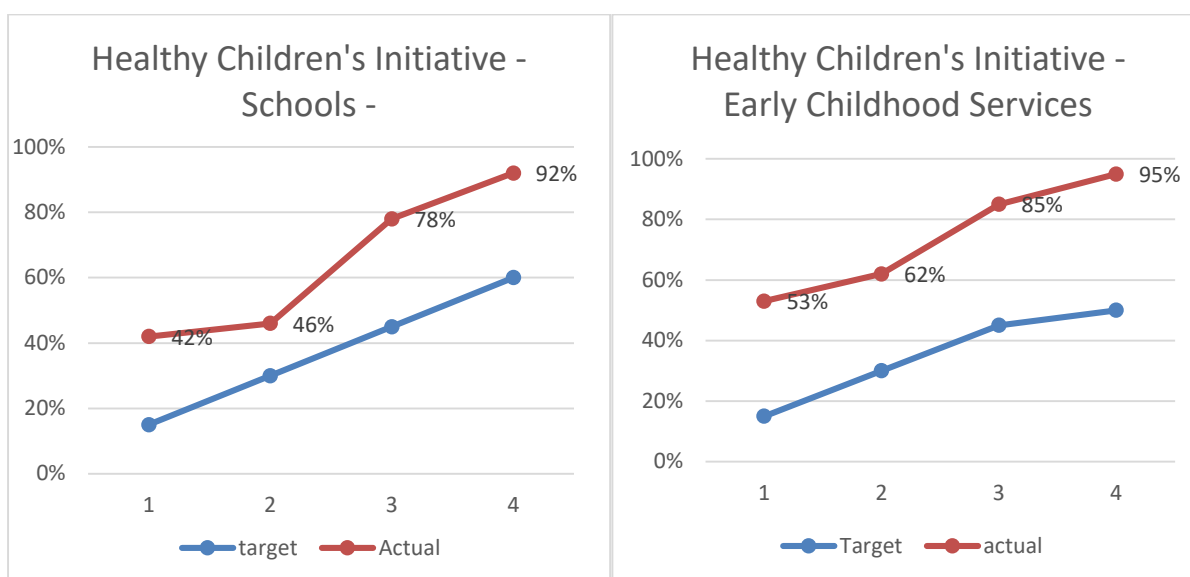
Live Life Well @ School is a collaborative initiative between NSW Health, the NSW Department of Education, Catholic and Independent school sectors.

The program utilises a ‘whole of school’ approach consistent with classroom teaching and school policies and community links. Schools, with the support of Local Health District health professionals and a range of resources, are encouraged to adopt a range of ‘Desirable Practices’ around healthy eating, physical activity and fundamental movement skills



Munch & Move promotes positive healthy eating and physical activity habits in young children aged birth to 5 years in NSW within the early childhood setting (including preschools, long day care and occasional care).

Indicators:

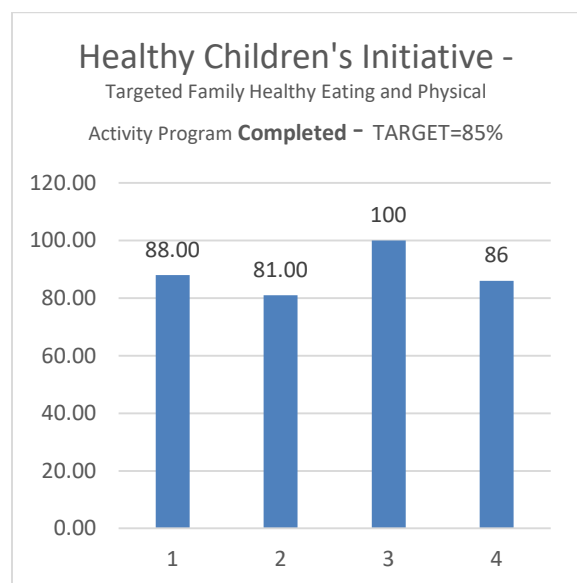
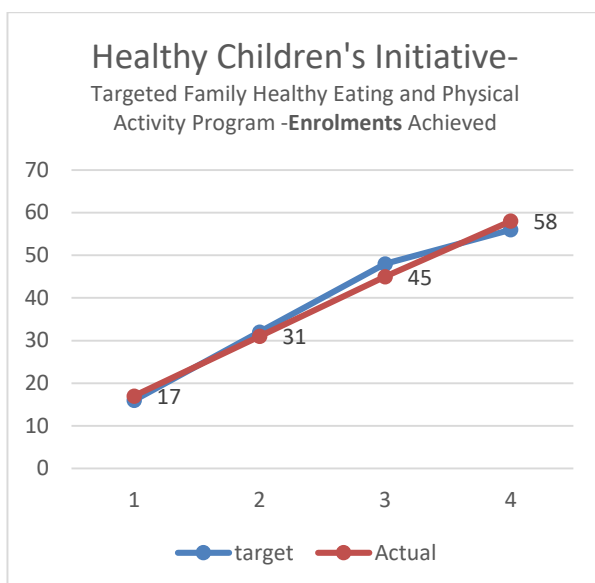


Achievements:

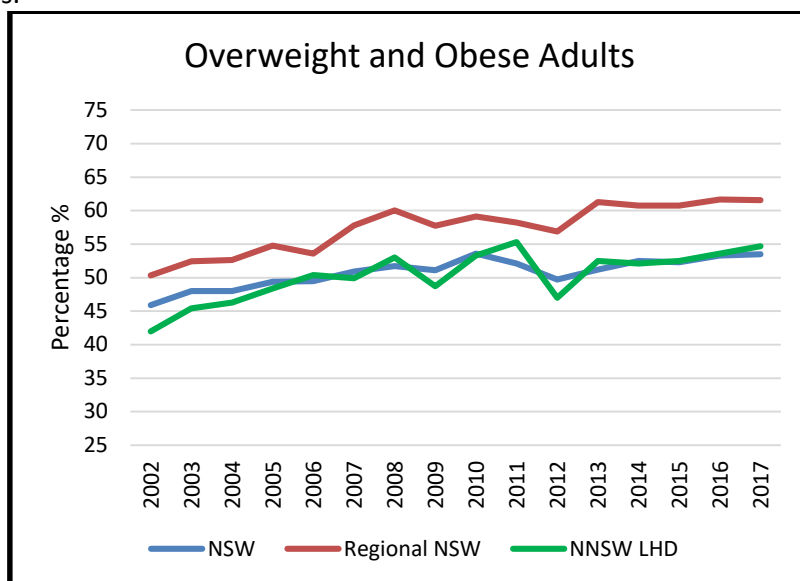
New strategies for Healthy Children’s Initiative in 17/18:

- Provided information and experiences for organisers of 53 Out of School Hours services on how to promote healthy eating, physical activity and reducing small screen recreation.
- Supported and trained three Family Day Care Services and 10 voluntary playgroups and 33 Supported Playgroups to integrate healthy eating and active living strategies into their programs.
- In partnership with Child and Family Health, trialed a program aimed at parents and carers of children 0-3 years old to promote healthy eating, appropriate introduction of solids and physical activity for their children.

Go4fun targets children aged 7-13 who are above their healthy weight and their parents or carers in a 10-week program. Parents are empowered to provide healthier food and more physical activity opportunities for this children and children experience how much fun it is to be active and eat healthy food. The program evaluation show that participants lose weight, reduce their Body Mass Index, increase fitness, improve their dietary intake and increase in self-esteem.



Adults: In 2017 53.5% of adults were overweight or obese (54.7% Northern NSW). Rates are higher among males, with 57.3% of Northern NSW men being overweight or obese, compared with 51.9% of females.



Healthy environment initiatives to promote healthy eating and active living.

We need healthy environments to make healthy choices the easy choices. Health Promotion works with local government, worksites and community organisations to make it easier to choose healthy foods and be physically active. This year we:

- Provided written input to councils Community Strategic Plans to promote environments conducive to healthy eating and active living.
- Worked with hospital auxiliaries, vending machine contractors and hospital kiosks, cafes and catering to increase healthy food and drink options for staff and visitors. By December 2018, all our LHD sites had removed sugar-sweetened beverages from sale and replaced with healthier choices.
- Worked with Thrive 2484 community group to include healthy cooking and food growing programs for parents and children attending play groups in Murwillumbah.
- Collaborated with Griffith University and Red Cross to audit prices of fruits and vegetables in local farmer’s markets to compare with costs in supermarkets.
- Coordinates a healthy cooking/low food waste education program for staff at Grafton Base Hospital (61 participants).
- Mapped alcohol density through the LHD and made a submission to Liquor and Gaming NSW about applications for extended trading hours in high risk areas.

Active Living:

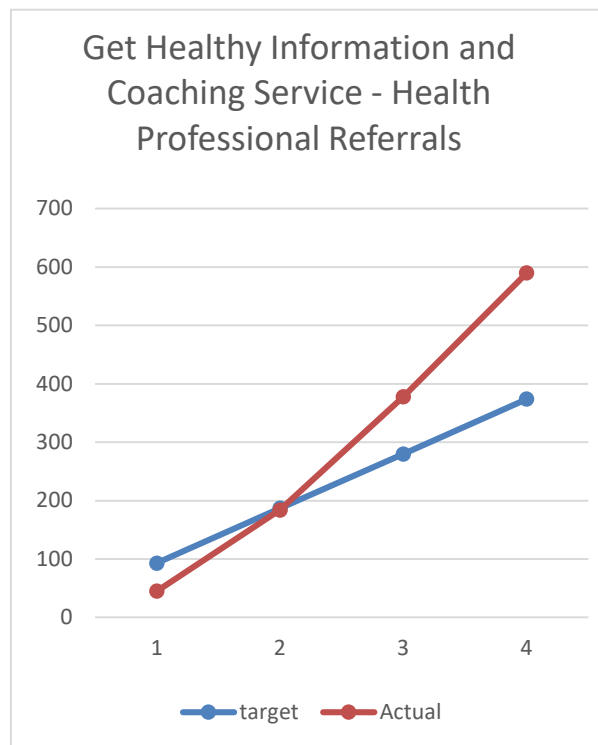
- “Activated” outdoor gym equipment in public parks by providing free classes in Tweed Heads and Lismore
- Advocated to Transport for NSW to extend the commuter bus service from the coast to Lismore Base Hospital.



Get Healthy Information and Coaching Service is a free coaching service to help adults achieve goals for reducing overweight, increasing nutritional intake and increasing physical activity levels.

Get Healthy Phone Information and Coaching Service has helped more than 25,000 people get healthy in NSW by reducing weight, Body Mass Index and waist and improved their diet. More than half the participants are losing between 2.5 and 10% of their baseline body weight.

Indicators:

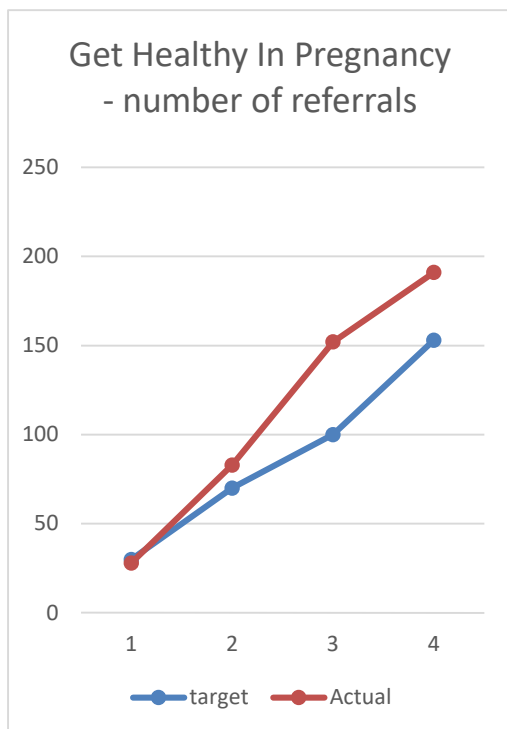


Get Healthy in Pregnancy

Pregnancy is an opportune time to prevent excessive weight gain and improve the health of women and their children since many women are concerned about the health of developing babies during this time and are in frequent contact with health care providers. It is important that pregnant women receive adequate information and support for diet, exercise, alcohol avoidance and appropriate weight gain during pregnancy.

Excessive weight gain in pregnancy, poor diet and consuming alcohol can lead to complications for the mother and developing child in pregnancy, at the birth and after the birth.

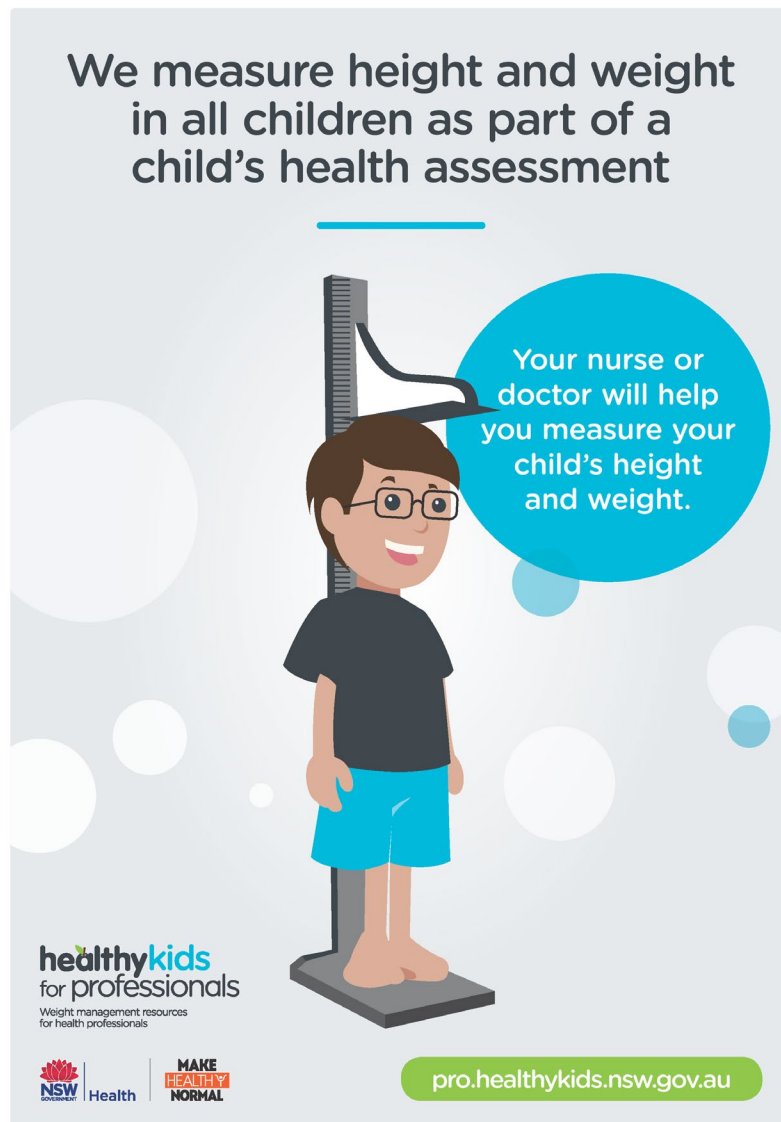
Get Healthy in Pregnancy (GHIP) is an evidence-based information and/or telephone coaching service for pregnant women aged 16 and over. GHIP health coaches provide expert advice to help pregnant women set goals to maintain a healthy weight gain, eat a healthy diet and avoid alcohol in pregnancy and beyond.



Health Professional referrals for pregnant women to GHIP is a Key Performance Indicator for the Local Health District. In 2017-2018, at least 5% of pregnant women were required to be referred to GHIP (153 women). NNSWLHD clinician's referred 6.2% of pregnancies (191 women).

Routine Measurement of Children's Height and Weight

Regular measurement of the height and weight of children is a normal part of good clinical care and is essential to allow accurate monitoring of a child's growth over time, as well as routine assessment and identification of children below or above a healthy weight.



Last year, the Ministry of Health announced a new strategic and coordinated approach to nutrition care, including weight and height assessment in all NSW Health Facilities. Assessing weight and height/length is the first step in identifying and developing a care plan for patients according to their current weight status and clinical condition.

Health Promotion is assisting clinical staff by providing and directing staff to training and resources to measure all children and to provide a brief intervention to the parents of children who are found to be above the healthy weight. Where required, clinicians can also refer parents to programs and services to assist in the family adopting healthier eating patterns and more physical activity, such as Go4Fun.

In 2018/2019, the NSW Ministry of Health has set a target of 60% of all children (0-17) who are seen by LHD clinicians will have their height/length and weight measured and recorded. NNSWLHD is currently recording only 49% of children's height and weight status.

Health Literacy

Why is this important?

Health Literacy is about how well people can access, understand and use health information and health services to take appropriate health care actions. It takes into account the skills, motivation and capacity of individuals. It's also about how well the people and services that provide health care communicate health information, design their services so they are easy to navigate, and promote a culture that fosters health literacy improvement.

We know that:

- 60% of the general population have a low level of health literacy
- health information is becoming increasingly complex
- rates of chronic disease are rising and placing increasing self-management demands on the individual
- patients forget 40-80% of information they receive immediately and information that is recalled is often incorrect
- our health system is difficult to navigate and access.



The Australian Commission on Safety and Quality in Health Care National Statement on Health Literacy identifies that consumers must be partners in their health care to ensure safe and quality care and improve health outcomes.

The Northern NSW Health Literacy Project aims to equip health staff and services to improve their communication, processes and infrastructure so that health information makes sense and patients feel empowered to be involved in their care. It also involves consumers in project activities, to make sure we are meeting their needs. This will lead to improved quality and safety of care, health outcomes and satisfaction with care. It will address inequity in health care for those in high-risk groups for adverse health outcomes, as they are most likely to have lower levels of health literacy.

The health literacy project is now in the embedding phase. Training for staff has continued across the LHD, primary care and tertiary health education. Almost 900 health staff and students have attended health literacy training to date, and there are 111 members of the health literacy website. There are currently 38 resources on the health literacy website, with more being developed.

A staff handbook is in the final stages of development, and a health literacy video suitable for orientation has been produced. Community workshops were held and were well received by attendees. The health literacy project officer was involved in other projects such as co-designing resources, gathering patient experience stories and setting up a consumer feedback group to review health information.

Research, Awards and Publications

Research:

To create the evidence base for health promotion, health promotion projects are rigorously evaluated. We evaluate if our strategies reach the intended target group and how well they achieve their aims. Crucially, the impact of our actions on policies, environments and behaviours, and where possible the health status outcomes are measured and analysed. If we can't easily measure changes in health status, such as the proportion of children who are overweight, we research intermediate indicators, such as the amount of sweet drinks consumed, since we know that the scientific literature gives us clear evidence that this relates to levels of overweight at a population level.

Achievements:

- Examined the impact on nutritional quality of food packed in lunchboxes when a site (school or ECS) adopts Nude Food practices.
- Evaluated the pilot of the Infant program being trialled in partnership with Child & Family Health (C&FH) which promotes healthy eating and active play behaviours in parents and their children, with emphasis placed on parental modelling of healthy lifestyle behaviours.
- Evaluated the effect of the Helping U 2 Quit tobacco treatment group and clinic on clients' smoking
- Coordinated and led all implementation and research activities of the Translation Research Grant Scheme (TRGS) project Sweet Smiles. The project is a collaboration between NNSW Health promotion and Oral Health Services, NSW Health Centre for Population Health, The NSW Office of Preventive Health and the NSW Centre for Oral Health Strategy.

Grants

- Cancer Institute NSW Competitive Grants \$142,000 for Putting Out the Fires in Our Communities – a program aimed at making relevant messages on smoking cessation for Aboriginal and Torres Strait Islander communities in the Northern Rivers (ongoing)
- Ministry of Health, Translational Research Grant Scheme, \$101,977 for Sweet Smiles to reduce the intake of sugar sweetened beverages to reduce childhood obesity, tooth decay in children using public dental services (ongoing)
- Ministry of Health, Translational Research Grant Scheme, \$1.25M for Standing Tall, a trial in-home falls prevention program for older people (in collaboration with Neuroscience Australia and two rural LHDs) (to commence in 2019).

Papers and presentations:

- *“Creating Tobacco Champions”, Australian and New Zealand Addiction Conference, Sullivan Christine, Lahrs Kerrie-Ann (May29 - 2018)*
- *“Trends in Food and Beverage Portion Sizes in Australian Children; a Time-Series Analysis Comparing 2007 and 2011-2012 National Data.” Children (Basel). 2017 Aug; van der Bend D, Bucher T, Schumacher TL, Collins K, De Vlieger N, Rollo M, Burrows TL, Watson JF, Collins CE <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5575591/>*
- Health Literacy – 5th Aged Health Collaborative Forum – Westmead Hospital – October 2017
- Health Literacy – 1st Asia Pacific Conference on Integrated Care, Brisbane – 7 November 2017
- Health Literacy – NSW Integrated Care Conference, Sydney – March 2018

Awards: 2017

- Making a Talking Tobacco Team of Champions in NSW LHD Project Donna Lloyd, Christine Sullivan and team won the NNSW LHD Quality Awards, 2017, Keeping People Healthy category.
- Welcoming Aboriginal Women; Making Maternity Services Culturally inclusive places won the Enhancing Patient Experience through the Arts award, Laurel Rogers (on secondment).
- Northern NSW Health Literacy Project Taya Prescott won the NNSW LHD Quality Awards, 2017, Patients as Partners category.
- Live Well Now – a website promoting healthy lifestyles Project Donna Lloyd, Jacquie Riding and Jillian Adams won the NNSLHD Quality Awards, 2017, Keeping People Healthy category.
- NCPHN Excellence Awards- Community Choice- Finalist.

Awards: 2018

- NNSW LHD Quality Awards – Keeping People Health Category Winner- Anna Huddy, Lennox Head Picnic Basket Challenge – A taste for change.

Awards 2017 -18



Talking Tobacco Team of Champions: Donna Lloyd, Christine Sullivan and team won the NNSW LHD Quality Awards Keeping People Healthy category



Welcoming Aboriginal Women Laurel Rogers won the NNSW LHD Enhancing Patient Experience through the Arts award



Northern NSW Health Literacy Project: Taya Prescott won the NNSW LHD Quality Awards Patients as Partners category



Live Well Now website: Jillian Adams, Donna Lloyd and Jacqui Riding won the NNSWLHD Quality Awards Keeping People Healthy category



NCCPHN Excellence Awards Community Choice: Finalist



NNSW LHD Quality Awards- Keeping People Healthy category winner- Anna Huddy, Lennox Head Picnic Basket challenge