

Action for a healthy and thriving Latrobe



Community Health - Health Promotion Annual Action Plan

2026-2027 | YEAR 2



Acknowledgment of Country

We acknowledge the traditional owners of the land, the Gunaikurnai people. We pay our respects to their Elders past, present, and acknowledge the living culture of the Gunaikurnai people and the important contribution they make to Gippsland.

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INTRODUCTION

Latrobe Community Health Service (LCHS) delivers health promotion in the Latrobe local government area (LGA) with funding from the Community Health – Health Promotion program. This document outlines Year 2 actions of the *Action for a Healthy and Thriving Latrobe* plan, developed and delivered in collaboration with local partners. The plan uses a flexible, settings-based, systems-thinking approach to improve community health outcomes and supports our shared vision of Latrobe as a healthy and vibrant place for all. It remains responsive to local needs and emerging priorities, recognising the changing health landscape, with strong partnerships central to delivering meaningful, community-driven change.

STRATEGIC DIRECTIONS 2025-2029

VISION

OUR COMMITMENT

Latrobe is a healthy and thriving community for all

COMMUNITY FOCUSED:



We work with community, for community – collaboration is at the heart of everything we do.

EQUITY:



We prioritise working with communities who experience barriers to healthy lives, focusing on reducing inequities so everyone can thrive.

INCLUSION:



We ensure inclusion by applying multiple equity and intersectionality lenses to our work so people of all genders, abilities, backgrounds and communities can participate and benefit.

CLIMATE HEALTH:



We apply a climate health lens to all that we do, promoting health for people and planet.

ADVOCACY:



We advocate for systems and policy change that improves health and wellbeing.

GUIDING PRINCIPLES

Prevention at scale:

We focus on broad-reaching actions to influence population-level health outcomes. We scale-up and scale-out initiatives that work.

Evidence Informed:

Our work is designed and implemented based on the best available research, local data, and community insights.

Innovation:

We listen, experiment, reflect and adapt to ensure we are responsive to local community needs, so our action addresses complex issues and is beneficial for our community.

Partnerships:

We partner with community and other organisations to align efforts and maximise our collective impact.

Sustainability:

We design for sustainability, so our actions create lasting benefits for community.



STRATEGIC DIRECTIONS 2025-2029

HOW WE WORK

We take a systems thinking approach to see the bigger picture and understand how factors are connected, identify gaps and use leverage points to design solutions for sustainable change.

CONTEXT	POLICY AND COMMITMENT	COMPONENTS	PARTNERSHIPS AND ENGAGEMENT	FOUNDATIONS	SCALE
Improving environments in the system to produce sustainable changes required.	The documents that inform the change and the responsibility required by participating organisations to the change.	Establishing appropriate high quality programs, initiatives and services within the system.	We align our efforts and initiatives with our partner organisations to harness our unique strengths, to work as part of a larger team to enable collective impact.	Interventions and initiatives address multiple social determinants at various levels of the systems, where people live, work and play.	Scale up effective and sustainable initiatives to increase reach and build collective ownership for maintaining systemic change.

WHERE WE WORK

We take a settings based approach, working in the places where people live, learn, work, play, connect and belong.

 FIRST 2000 DAYS OF LIFE	 EARLY LEARNING SERVICES	 SCHOOLS	 FOOD SYSTEMS	 PREVENTION LEADERSHIP AND ADVOCACY
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PRIORITY AREAS

 HEALTHY EATING	 ACTIVE LIVING	 WELLBEING
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OVERVIEW OF THE YEAR 2 ACTION PLAN



HEALTHY EATING

OUR GOAL

Work towards a healthier, more equitable, and sustainable food system for all

25
ACTIONS

WHY THIS MATTERS

Food insecurity affects 15.2% of Latrobe's population, nearly twice the Victorian average.¹

Nationally, 36% of children and adolescents do not meet the recommended daily fruit intake, and 96% fall short on vegetable consumption.²

At 6 months of age 12.3% of infants are fully breastfed, with 13.4% being partially breastfed.⁷

In Latrobe, the very low levels of fruit and vegetable consumption in line with the Australian Dietary Guidelines and regular consumption of sugar-sweetened beverages (38%) highlight the need to continue to improve access to and consumption of healthy foods and drinks across the region.¹



ACTIVE LIVING

OUR GOAL

Support increased movement and physical activity and reduced time spent sitting

8
ACTIONS

WHY THIS MATTERS

Over a quarter (27%) of adults in Latrobe report being sedentary for eight or more hours on an average weekday, with 28% of adolescents nationally spending four or more hours per day on social media.^{1,3}

In Australia, only 5.6% of young people, aged 15-17, met the physical activity guidelines.⁹ This identifies physical activity as a key priority area for Latrobe.



WELLBEING

OUR GOAL

Support health and wellbeing

10
ACTIONS

WHY THIS MATTERS

In Latrobe, high rates of daily smoking (14.9%) persist, with national data indicating that 7% of people aged 14 and over are vaping; of which 49% are engaging daily.⁴ These patterns reinforce the need to prioritise health and wellbeing initiatives across the region.

71.8% of adults in Latrobe report high or very high levels of life satisfaction.¹

In Victoria, 67% of students in years 5, 8 and 11 showed a high level of psychological resilience.¹

OUR COMMITMENTS IN ACTION



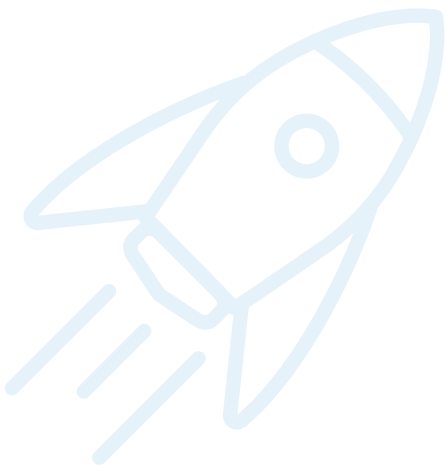
100% of our programs and initiatives will have a climate lens applied



75% of our programs and initiatives will be implemented in socio-economically disadvantaged areas



Our programs and initiatives are mapped against the IAP2 Framework to inform our community engagement and collaboration practices⁸





OUR COMMITMENTS IN ACTION



COLLABORATIVE PLANNING

All health promotion activity undertaken by LCHS is underpinned by the commitments, guiding principles and systems approach outlined in the LCHS Strategic Plan.

In line with our guiding principle of Partnerships, this Year 2 Action Plan was developed collaboratively by the LCHS Health Promotion team and the LCHS First Nations Strategic Officer, ensuring that our work aligns with and builds on the LCHS First Nations Health and Wellbeing Strategy.

Collaborative planning was also conducted with Gippsland Region Public Health Unit (GRPHU), Latrobe City Council (LCC), Gippsland Women's Health, GippSport, Latrobe Health Assembly (LHA), local Aboriginal Community Controlled Health Organisations (ACCHOs) and other prevention stakeholders.

This collaborative planning process aims to:

- Align priorities, planning and delivery across organisations where possible
- Reduce duplication and build on the strengths, expertise and reach of partner organisations
- Identify opportunities for joint action, shared investment and coordinated implementation
- Support priority populations through collective effort and a broader spread and reach of prevention initiatives
- Strengthen relationships that support long term prevention outcomes and systems change

Through collaborative planning and delivery, LCHS seeks to contribute to a more connected prevention system, where organisations work together to create the conditions that support healthier communities.

COMMITMENT TO STATEWIDE IMPACT

LCHS is committed to supporting the implementation of Victorian Government statewide prevention initiatives and evidence informed approaches that create healthier settings and communities.

Through the Year 2 Action Plan, LCHS will continue to deliver key statewide initiatives including:

- Vic Kids Eat Well (VKEW)
- Healthy Places – Healthy Futures (formerly Achievement Program)
- Healthy Choices Guidelines
- Menu Planning Guidelines for Long Day Care

LCHS recognises these initiatives as important mechanisms for embedding healthy policies, practices and environments across community settings. Wherever possible, local action will align with and build upon these statewide approaches to maximise consistency, reach and impact across the prevention system.



FIRST 2000 DAYS OF LIFE

Maternal and Child Health, community settings

■ Goal

To improve the health and wellbeing of children and caregivers in the first 2000 days of life

■ Objectives

By June 2027,

- Increase the number of initiatives that support breastfeeding in Latrobe (Target n>5 LBP actions)

■ Initiatives:

Collaborative partnership (co-leading)

- Latrobe Breastfeeding Partnership (LBP)
- Breastfeeding is Welcome Everywhere

YEAR TWO ACTION	MEASURE	PRIORITY AREAS
1.1 Collaborate with Latrobe Breastfeeding Partnership, including GRPHU, LCC, LHA and Australia Breastfeeding Association (ABA), to implement actions to support breastfeeding	# Actions implemented	
1.2 Implement Breastfeeding is Welcome Everywhere initiative	# Venues and spaces registered as breastfeeding friendly	



EARLY LEARNING SERVICES

Early Learning Services and kindergartens

■ Goal

To create supportive and healthy early learning environments

■ Objectives

By June 2027,

- Increase the number of Early Learning Services (ELSs) and kindergartens actively supported in Healthy Places Healthy Futures (Targets n= 41 registered, n=18 actively supported)
- Increase the number of health and wellbeing priorities (HWPs) achieved (Target n = 66)
- Increase the number of services working towards or achieved the physical activity and movement HWP (Target n= 17)
- Increase the number of services working towards or achieved the food, nutrition and oral health HWP (Target n= 29)
- Increase the number of services working towards or achieved the smoking and vaping HWP (Target n= 15)
- Increase the number of services working towards or achieved the sustainability and health HWP (Target n= 2)
- Increase the number of services compliant with menu planning guidelines for long day care (Target n= 5)

■ Initiatives

Leading

- Healthy Places and supported programs
- Menu planning guidelines for long day care
- Latrobe Little Smiles

Supporting

- Breastfeeding Friendly Early Childhood Education and Care (BFCEEC) Services
- Cooks' Network

EARLY LEARNING SERVICES

YEAR TWO ACTION	MEASURE	PRIORITY AREAS
2.1 Implement Healthy Places in early learning services	# ELSs actively supported to implement changes # Total health and wellbeing priorities reached in ELSs # ELSs actively supported to implement changes in active living # Small steps for active living #/% of priority population settings which achieve at least one small step # ELSs actively supported to implement changes in smoking/vaping prevention # Small changes for smoking/vaping #/% of priority population settings which achieve at least one small change	
2.2 Implement Menu planning guidelines for long day care	# ELSs actively supported to implement the Menu planning guidelines # ELSs compliant with Menu planning guidelines # of one-week menus assessed as compliant in food checker	
2.3 Investigate the feasibility of a Cooks' Network to support Menu planning guideline uptake	Summary document of investigation and next steps to support ELS Cooks	
2.4 Implement and scale out Latrobe Little Smiles for oral health	# ELSs actively supported to implement the Latrobe Little Smiles program # ELSs completed the Latrobe Little Smiles program # Children completed oral health education # Children completed dental screen	
2.5 Support ELSs to become Breastfeeding Friendly Early Childhood Education and Care (BFCEEC) Services	# ELSs recognised as a BFCEEC service	
2.6 Collaborate with, and support GRPHU, LCC and LHA to deliver prevention initiatives in early learning services	# Actions supported	



SCHOOLS

Primary schools, secondary schools and Outside School Hours Care (OSHC)

■ Goal

To create supportive and healthy school environments

■ Objectives

By June 2027,

- Increase number of schools actively supported in Vic Kids Eat Well (Targets n = 14 registered, n=45 small bites, n=22 big bites)
- Increase the number of schools actively supported in Healthy Places (Targets n= 26 registered, n=12 actively supported)
- Increase the number of health and wellbeing priorities (HWP) achieved (Target n = 50)
- Increase the number of schools working towards or achieved the physical activity and movement HWP (Target n= 18)
- Increase the number of schools working towards or achieved the food, nutrition and oral health HWP (Target n= 12)
- Increase the number of schools working towards or achieved the smoking and vaping HWP (Target n= 9)
- Increase the number of schools working towards or achieved the sustainability and health HWP (Target n= 2)

■ Initiatives

Leading

- Healthy Places and supported programs
- Canteen, healthy eating and other food services policy
- Vic Kids Eat Well (VKEW)
- Fab Food Marvellous Mood (FFMM)
- School Breakfast Club Partnership

SCHOOLS

YEAR TWO ACTION	MEASURE	PRIORITY AREAS
3.1 Implement Healthy Places in school settings	# Schools actively supported to implement changes # Total health and wellbeing priorities reached in schools # Schools actively supported to implement changes in active living # Small steps for active living #/% of priority population settings which achieve at least one small step # Schools actively supported to implement smoking/vaping prevention # Small changes for smoking/vaping #/% of priority population settings which achieve at least one small change	
3.2 Implement state-based nutrition programs (Vic Kids Eat Well and School's canteen, healthy eating and other food services policy)	# Schools actively supported to implement VKEW # Small bites # Big bites # Schools actively supported to implement school canteen and other food services policy # Baseline assessments in schools # Incremental change in G/A/R food products in schools as verified by HEAS # Schools compliant with school canteen and other food services policy	
3.3 Implement the Breakfast Club Partnership in school settings	# Schools with a breakfast club # Schools supported % Schools with breakfast clubs who have achieved the associated VKEW small bites	
3.4 Implement Fab Food Marvellous Mood breaks in primary schools	# Schools actively supported to deliver FFMM - Evaluation completed with recommendations for future planning/implementation	
3.5 Collaborate with, and support GRPHU, LCC, GippSport and LHA to deliver prevention initiatives in school settings	# Actions supported	



FOOD SYSTEMS

Food For All Latrobe Valley community action group, catering, supermarkets and retail outlets

■ Goal

To work towards a healthier and more sustainable food system for all

■ Objectives

By June 2027,

- Increase access, availability and promotion of healthy food and drinks (Target n = >30 FFALV actions, Store scout score >60)
- Decrease access, availability and promotion of less healthy food and drinks (Target Store scout score >60)

■ Initiatives

Leading

- Food For All Latrobe Valley (FFALV)
- Healthy Supermarkets Latrobe 'Reach for the Stars'
- 'Lettuce Talk about Food' catering project

Supporting

- VicHealth's Local Government Partnership project – Partners in Place
- Latrobe Water Partnership
- Healthy Choices guidelines

FOOD SYSTEMS

YEAR TWO ACTION	MEASURE	PRIORITY AREAS
4.1 Implement Healthy Supermarkets project – Phase 3: Sustainability	# Supermarkets participating # Supermarkets with Store Scout >60 # Policy actions partially or fully adopted	
4.2 Coordinate Food For All Latrobe Valley in partnership with Latrobe Food Systems Leadership Group and implement/support actions from the annual plan	# FFALV actions supported/implemented # Food Share Latrobe crates in community	 
4.3 Collaborate with, and support GRPHU, LCC and LHA to deliver prevention initiatives across the food system setting	# Actions supported	
4.4 Implement Lettuce Talk about Food catering project (including healthy and sustainable food policy/practices and the Catering for Good Directory)	# Healthy catering policies reviewed/developed # Caterers registered to Catering for Good directory	
4.5 Support LCC to implement the Healthy Choices guidelines (and/or similar) in council owned facilities	# Facilities actively supported to implement Healthy Choices guidelines # Facilities compliant with Healthy Choices guidelines # Small bites # Big bites	
4.6 Collaborate with Latrobe Water Partnership to implement actions to increase access to and consumption of water	- Action plan developed # Partners involved # Actions implemented	
4.7 Support LCC to implement VicHealth's Local Government Partnership project – Partners in Place Food Systems module	# Impact streams in progress # Impact streams completed # Modules in progress # Modules completed - Program evaluation	



PREVENTION LEADERSHIP AND ADVOCACY

Community health service

■ Goal

Strengthen leadership and advocacy to influence across systems, policies and communities

■ Objectives

By June 2027,

- Continue/maintain climate co-benefits impact of our work (Target n = 100% of actions have a climate lens applied)
- Continue/maintain equitable access to health promotion opportunities (Target = 75% of interventions are implemented into socio-economically disadvantaged areas)
- Apply IAP2 Levels of Engagement lens to health promotion programs/initiatives (Target = 100%)

■ Initiatives:

Supporting

- LCHS Advocacy Strategy

YEAR TWO ACTION	MEASURE	PRIORITY AREAS
5.1 Ensure climate health lens is applied to health promotion programs/initiatives	# and proportion of health promotion programs/initiatives with climate health lens	  
5.2 Apply equity mapping to health promotion programs/initiatives each year to ensure the majority of interventions are delivered in socio-economically disadvantaged areas	# and proportion of health promotion programs/initiatives delivered in Quintile 4 and 5 areas of most disadvantage	  
5.3 Ensure the IAP Levels of Engagement lens is applied to health promotion programs/initiatives	# and proportion of health promotion programs/initiatives considering which levels of IAP2 engagement are most appropriate for each initiative	  
5.4 Support local, state and national advocacy efforts to reduce discretionary food marketing	# Advocacy pieces supported	
5.5 Contribute to LCHS advocacy strategy	# Advocacy pieces supported	  

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APPENDIX 1

SYSTEMS CHANGE FRAMEWORK AND INDICATORS

Over the previous four-year cycle (2021-25), we consolidated our systems thinking and settings-based approach, utilising a systems thinking framework, tools and practice to achieve a healthier community.

We take a systems thinking approach to see the bigger picture and understand how factors are connected, identify gaps and use leverage points to design solutions for sustainable change.

We utilise the systems thinking framework below to plan, implement and evaluate change. The System Change Indicators, developed by Monash Health Health Promotion Team (2018), are based upon the BUILD Framework (2007), Healthy Together Victoria's System Change Logic, and the World Health Organisation's System Building Blocks and Ottawa Charter.

CONTEXT	POLICY AND COMMITMENT	COMPONENTS	PARTNERSHIPS AND ENGAGEMENT	FOUNDATIONS	SCALE
Improving environments in the system to produce sustainable changes required.	The documents that inform the change and the responsibility required by participating organisations to the change.	Establishing appropriate high quality programs, initiatives and services within the system.	We align our efforts and initiatives with our partner organisations to harness our unique strengths, to work as part of a larger team to enable collective impact.	Interventions and initiatives address multiple social determinants at various levels of the systems, where people live, work and play.	Scale up effective and sustainable initiatives to increase reach and build collective ownership for maintaining systemic change.
Context, complexity, and leverage points are understood through: • System mapping • Intelligence gathering Community is engaged and mobilised Community demands change Communication & marketing activates readiness & leadership for change Places, influencers & partners understand the importance of their contribution to prevention: • Readiness & leadership for change • Problem recognition or reframing • Vision setting • Assessments & ratings • Benchmarking	Places, influencers & partners formally commit to prevention through: • Policy, strategy, standards, shared vision or actions • Prevention embedded in strategic & operational plans • Alignment or influencing policies & procedures • Action plans & quality improvement plans Coordinated & shared prevention language	Places, influencers & partners participate in prevention through: • New initiatives • Capacity building • Rewards, resources & incentives • Accessing services Existing components are modified, improved & leveraged Resources, marketing & communications collateral developed Media coverage Components aligned to match community need & demand Initiatives are mutually reinforcing	Collaborative relationships & networks are strengthened to leverage change through: • Participation in shared decision making (collaboration) • Development of shared competencies & skills • Sharing of data & systems • Participation in networks & events • Connecting partners & places • Partners are connected outside of the health sector Communities of practice established or continued Places, influencers & partners lead local prevention action	Allocation of new or redistribution of assets & funding to meet prevention needs, including: • Allocation of internal & external staffing • Key performance indicators developed • Investment in resources & incentives • Links created to external funding A skilled workforce built through professional development Policy, components & action embedded in places Healthy options are available & environments are health promoting: • Place changes • Healthy & unhealthy options	A comprehensive system is available to as many people as possible, through: • System spread • System depth • System sustainability • Shifts in system ownership • Outcomes precede impacts

APPENDIX 2

PUBLIC PARTICIPATION

IAP 2 Spectrum of Public Participation⁸

INCREASING IMPACT ON THE DECISION



	INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
PUBLIC PARTICIPATION GOAL	To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision making in the hands of the public.
PROMISE TO THE PUBLIC	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.



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