

MUNICIPAL PUBLIC HEALTH AND WELLBEING PLAN 2021-2025



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Public Health and Wellbeing Plan 2019-23

Public Health and Wellbeing outcomes framework Climate

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Climate Change Strategy 2021

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This document is available in alternative formats (e.g. larger font) if requested.

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Mayor's message

Welcome to Loddon Shire Council's Municipal Public Health and Wellbeing Plan 2021-2025. The Plan provides an opportunity to collaborate with our partner organisations and the community to identify and respond to the health and wellbeing challenges our community faces. Our goal is to create an environment that provides the opportunity for people of all ages and backgrounds to achieve optimum wellbeing.

The Plan recognises that health and wellbeing is influenced by not only our own behaviours but also by a wide range of issues, including the social networks in our community, whether we have a job and how we access services where we live. It also recognises that improving health and wellbeing is a whole-of-community responsibility, and can only occur if we work together and combine our efforts with our partners and the community.

As the level of government closest to the people, councils play a pivotal role in leading and developing policies, programs and infrastructure with the capacity to advocate for, promote and improve the health of local community members. With sustained effort, we will support our residents to achieve good physical and mental health; protect and promote their health; and to feel safe and secure. We recognise the significant and far-reaching impacts of climate change and connectivity on our community's wellbeing. In collaboration with our partner agencies, we commit to addressing these key focus areas and their priorities over the next four years to work towards achieving optimum health and wellbeing for our community.

On behalf of Loddon Shire Council, I wish to thank everyone who was involved in the development of this plan. We would like to acknowledge the contribution and valuable feedback gained from our internal departments, partner organisations and the community in the formation of the plan's strategic directions and priorities. We look forward to continuing our collaborative work to over the next four years and beyond to support our residents to 'Live Well in Loddon'.



Cr. Neil Beattie Mayor, Loddon Shire Council

Executive summary

Council has developed the 2021-2025 Municipal Public Health and Wellbeing Plan with the aim to facilitate improvement of our community's health and wellbeing. It is anticipated that the Plan will support and enhance local strategies and initiatives, inform other public health planning processes, and be used as a means to avoid duplication of the planning, implementation, monitoring and review effort at a local level.

For Loddon Shire to be a productive, resilient and cohesive community, our residents need to enjoy good health and wellbeing. This underpins everyone's ability to live a good life. It averts the distress and discomfort of disease, and the costs of treating illness, as well as enabling people to make the most of their lives and maximise their capability to work, learn, play, socialise, volunteer and care for loved ones.

As health and wellbeing is influenced by the conditions in which we are born, grow, live. work and age, it is only by working together with the community and our partner agencies that we can have a great impact on our community's health and wellbeing. By working together towards shared outcomes we can provide a more coordinated, integrated. efficient and effective approach in achieving our goals. We would like to acknowledge and thank our many partners whose efforts, insight and cooperation have been integral to the development of the plan, and recognise their ongoing commitment to achieving optimum wellbeing for all of our residents.

The Plan builds on Council's other policies, strategies and programs, as well as existing work being undertaken by local agencies to support health and wellbeing in our community. Consultation with stakeholders resulted in the identification of four strategic focus areas- good physical health; good mental health; protect and promote health; and feel safe and secure – and two overarching focus areas – climate change; and connectivity. These areas and their ten priorities align with the Victorian Government's Public Health and Wellbeing Plan 2019-2023, and Public Health and Wellbeing Outcomes Framework.

Annual operational plans for the Municipal Health and Wellbeing Plan will be developed in alignment with the requirements of the state's public health and wellbeing planning cycle. These plans will detail the actions that will be undertaken in the ensuing twelve months and the varying levels of responsibility for stakeholder agencies in implementing each of these actions. The Plan will be monitored throughout the four year period and progress will be reported to Council annually. Through annual review, we endeavour to learn what has been successful and what can be done better, and to highlight current gaps in resources and services.

Acknowledgement of Country

Loddon Shire Council acknowledges the Traditional Custodians of the land comprising the Loddon Shire Council area. Council would like to pay respect to their Elders both past and present.

The Municipal Public Health and Wellbeing Plan

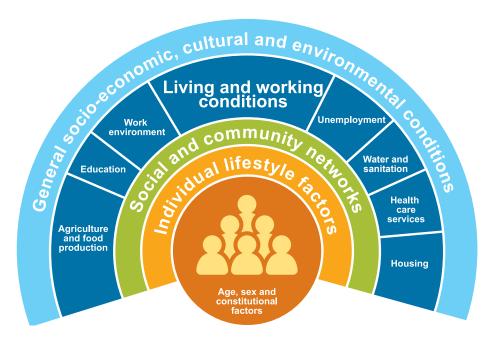
Under the Public Health and Wellbeing Act 2008, Council is required to prepare a Municipal Public Health and Wellbeing Plan (MPHWP) within twelve months of each election. The MPHWP is a key strategic planning tool that aims to maintain and improve public health and wellbeing at a local community level. The focus areas and priorities outlined in Loddon Shire's MPHWP will support the community to achieve optimal health and wellbeing over the next four years.

Health and wellbeing

The World Health Organization (WHO, 2006) defines health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." Likewise, wellbeing is a combination of an individual or group's physical, mental, emotional and social health factors and is strongly linked to happiness and life satisfaction (Victorian Government, 2020a).

Health determinants influence our health and wellbeing in a positive or negative way (Australian Institute of Health and Welfare [AIHW], 2016). Determinants that negatively affect health include background factors such as gender, age and genetics; and behavioural factors such as smoking, poor diet, harmful consumption of alcohol and physical inactivity. These factors can increase the likelihood of developing **chronic diseases** such as heart disease, stroke, cancer, respiratory diseases, diabetes and mental health conditions, which are the number one cause of disability and death worldwide (WHO, 2021b).

Social determinants are the conditions in which people are born, grow, work, live, and age and include the wider forces shaping these conditions, such as social norms, policies, and political systems (WHO, 2021a). The **determinants of health model** is based on the idea that these determinants are just as important in affecting our health and wellbeing as background and behavioural risk factors (Dahlgren & Whitehead, 1991).



The determinants of health model. Adapted from Dahlgren & Whitehead, 1991.

The unfair and avoidable differences in health status experienced between countries, within countries and within communities are known as **health inequities** (WHO, 2021a). An example of this is the disadvantage and poorer health outcomes experienced by rural and remote Australian communities compared to those living in cities. This is magnified by factors such as limited access to public transport and internet and phone connectivity, and environmental challenges, such as drought, bushfire and flood (National Rural Health Alliance, 2017). Addressing the social determinants of health is vital in achieving health equity and improving health and wellbeing in our rural communities (WHO, 2021a).

Legislative framework

Council's MPHWP fulfils legislative requirements and aligns with policies and frameworks of both state and national governments.

Victorian Government

<u>Local Government Act 2020</u> is the main legislative act for local councils and provides a framework for their establishment and operations. It requires councils to be accountable to their local communities in the performance of functions, exercise of powers and use of resources.

<u>Public Health and Wellbeing Act 2008</u> defines the function of councils to protect, improve and promote public health and wellbeing within the municipal district:

- a. creating an environment which supports the health of members of the local community and strengthens the capacity of the community and individuals to achieve better health
- b. initiating, supporting and managing public health planning processes at the local government level
- c. developing and implementing public health policies and programs within the municipal district
- d. developing and enforcing up-to-date public health standards and intervening if the health of people within the municipal district is affected
- e. facilitating and supporting local agencies whose work has an impact on public health and wellbeing to improve public health and wellbeing in the local community
- f. coordinating and providing immunisation services to children living or being educated
- g. ensuring that the municipal district is maintained in a clean and sanitary condition.

<u>Public health and wellbeing plan 2019-2023</u> outlines the state government's focus areas over the next four years to improve the health and wellbeing of Victorians:









Adapted from Victorian Government, 2019.

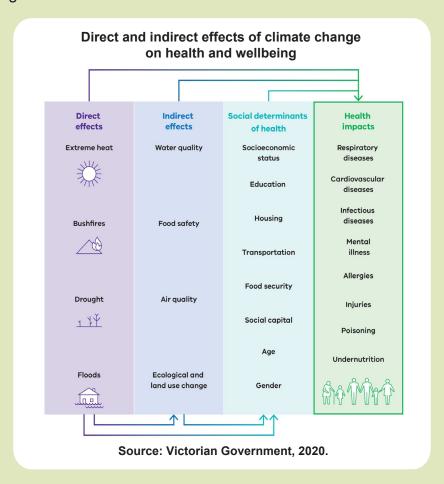
<u>Public health and wellbeing outcomes framework</u> informs Victorian public health and wellbeing planning and provides five key domains outlining a comprehensive set of indicators to assist in monitoring and evaluating progress over a long period of time:



Royal Commission into Family Violence resulted in 227 recommendations to reduce the impact of family violence. Under these recommendations, councils are required to report on the measures proposed to reduce family violence and respond to the needs of victims.

<u>Planning and Environment Act 1987</u> requires councils to prepare a Municipal Strategic Statement, which outlines the strategies and objectives for use and development of land of the municipality.

Climate Change Act 2017 sets out a policy framework and pathway to 2050 to keep global temperature rise below 2 degrees Celsius above pre-industrial levels. The Act recognises that responding to climate change is a responsibility of all levels of government and that changing climate may directly or indirectly impact health and wellbeing.



Australian Government

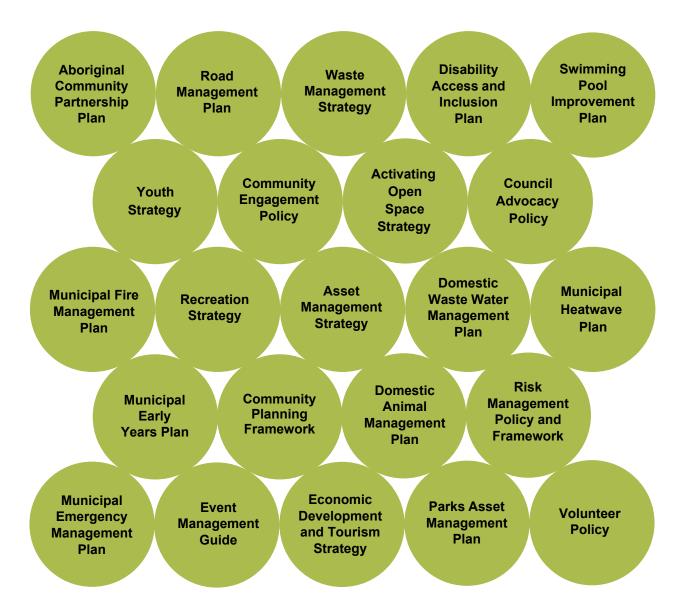
National Health Priority Areas initiative is a collaboration between commonwealth and state and territory governments, non-government organisations, health experts, clinicians and consumers. It aims to focus public attention and health policy on areas considered to contribute significantly to the burden of disease in Australia.

International

The World Health Organisation (WHO) is the directing and coordinating authority on international health within the United Nation's system. The WHO leads and advocates global efforts to give every person an equal chance to enjoy good health and wellbeing.

Council's strategies and plans

Council's Municipal Public Health and Wellbeing Plan integrates with the <u>Council Plan</u>, <u>Municipal Strategic Statement</u> and Council's <u>other plans</u>, <u>strategies and policies</u>, which include:



Development process

The development of this plan was informed by:

- a review of Council's 2017 2021 Municipal Public Health and Wellbeing Plan
- · a review of the broader policy context
- an examination of data relating to the demographic profile, health status and health determinants in the municipality
- consultation with the community: surveys were completed- both online and hard copies through mailouts- and 110 responses were received
- a review of relevant consultations previously undertaken by Council
- a review of other relevant strategic documents
- consultation with organisations delivering services relevant to community health and wellbeing including a stakeholder briefing and two online workshops.

Organisations included:

Bendigo Health	Department of Families, Fairness and Housing	Murray Primary Health Network	Bendigo Loddon Primary Care Partnership
Dingee Bush Nursing Centre	North Central Goldfields Regional Library	Boort District Health	Inglewood & District Health Service
North Central Local Learning and Employment Network	Catholic Care	Local schools	Northern District Community Health
Centre for Non- Violence	Loddon Healthy Minds Network	Sportsfocus	Department of Education and Training
	Loddon Neighbourhood Houses and Resource Information Centres	Women's Health Loddon Mallee	

Partnerships

One of the fundamental principles of health promotion is the importance of partnerships and the role they play in creating environments that allow for healthy communities. The engagement of many organisations in the development of the plan reflects Loddon Shire's strong history of working in partnership to achieve outcomes both in delivering community projects and working to improve community health and wellbeing.

The success of this plan is based on collaboration and strategic partnerships between government, health, education, community service organisations and community interest groups, such as the Loddon Healthy Minds Network. Individually, agencies are unlikely to have the capacity to address the range of factors that influence health and wellbeing across the municipality and as such, recognise that partnerships with other key agencies and working together is paramount to maximising health and wellbeing outcomes.

Loddon Shire is part of the Loddon Campaspe Regional Partnership, which also includes the Campaspe, Central Goldfields, Greater Bendigo, Macedon Ranges and Mount Alexander Shires. The regional partnership has prioritised health and wellbeing through the Healthy Heart of Victoria initiative which continues to fund place-based projects to address rates of obesity, chronic disease, disability and high-risk health behaviours.

Council facilitates or participates in a number of additional partnerships, networks and committees that contribute to our community's health and wellbeing, including:



Loddon's profile snapshot

To consider the determinants influencing Loddon Shire's health status, the most recent data has been examined and collated to provide the following profile snapshot. All sources have been referenced throughout and further detail on the data used during the agency consultation is available on Council's website.

Our community

The Shire

Loddon Shire encompasses a total land area of approximately 6,700 square kilometres. Predominantly a rural area with rich agricultural and goldfields heritage, it abounds with forests, rolling hills, rocky outcrops, rivers and lakes.¹ Annual rainfall varies between 250-500mm amongst communities.² The Traditional Owners of the land are the Dja Dja Wurrung and Barapa Barapa peoples and there are approximately 1,067 registered Aboriginal cultural heritage objects, sites and Places.³



Who we are



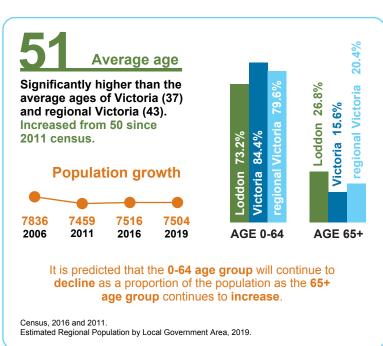
1.6%

Aboriginal and/or
Torres Strait
Islander residents,
which is double
that of Victoria.

8% residents born overseas

Top places of birth:

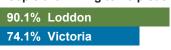
1. United Kingdom,
2. Philippines,
3. New Zealand,
4. Netherlands and
5. Germany⁴



Households with children 26% Loddon 41.5% **Victoria** regional Victoria 35.4% Households without children 62.8% Loddon 51.5% Victoria 56.9% regional J]Wcf]a Over one Persons with a profound quarter or severe disability, (27.3%) of lone all ages parents are 8.1% Loddon male, more than in Victoria 5.4% Victoria (17.8%)6.4% regional Victoria Aged 15 years & over providing unpaid assistance to persons with a disability 13.5% Loddon 11.6% Victoria 12.5% regional Victoria Census 2016 Social Health Atlas Australia Victoria, 2016.

Neighbourhood perceptions

People are willing to help each other



People can be trusted

82.9% Loddon 71.9% Victoria

Close-knit neighbourhood⁵

80.5% Loddon
61% Victoria

References:

- 1. Victorian Government, 2015.
- 2. Elders, 2021.
- 3. Victorian Government Office of Aboriginal Affairs, 2014.
- 4. Census, 2016.
- 5. VicHealth indicators survey, 2015.

How we live

Residents are home owners or purchasing

80% Loddon 64.2% Victoria 66.9% regional Victoria

Live in rental accommodation

16% Loddon 27.5% **Victoria** regional Victoria

Median weekly rent

Loddon \$131 Victoria \$330 regional Victoria

Households with rental stress

22% Loddon (Increased from 2011- was 18%) 30.4% **Victoria** 27.2% regional Victoria

Median weekly household income \$686 \$826 2011 2016 Low-income households (earning less than \$650 per week) Loddon 36% 18% **Victoria** 30% regional Victoria While more than one quarter of lone parents are low-income earners, there was an improvement in the

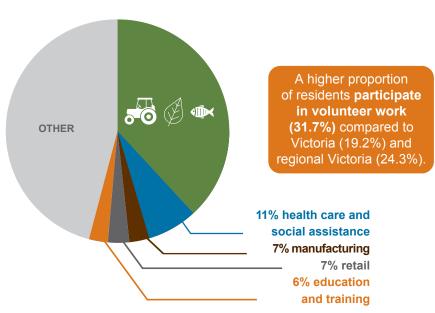
proportion of these families earning less than \$399 per week in 2016 (9%) since 2011 (19%).



What we do

Over half our employed residents work full-time and over one third work part-time.

The most popular sector of employment is agriculture, forestry and fishing (36%), significantly higher than in Victoria (2%) and regional Victoria (8%).



Proportion that left school at Year 10 or below

41.2% Loddon 25.8% Victoria 34.7% regional Victoria

Proportion completed year 12 or equivalent

27.3% Loddon 54.4% Victoria

diploma, bachelor degree or higher) 35.8% Loddon

Residents aged 15 and over holding tertiary

qualifications (vocational, diploma, advanced

50.4% Victoria 45% regional Victoria

However, a higher proportion of residents hold a vocational qualification (20.6%) than in Victoria (16.9%).

References: Census, 2016 and 2011.

Our health

Self-reported health status is poor or fair

22.9% Loddon 20.3% **Victoria**

Satisfaction with life is low or medium

25.4% Loddon 20.5% **Victoria**

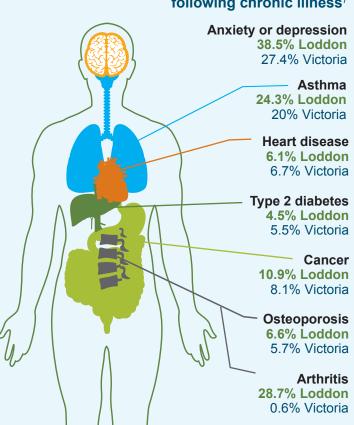
Persons with one chronic disease

22.5% Loddon 32.3% Victoria

Persons with two or more chronic diseases⁶

39.2% Loddon 25.5% Victoria

Ever diagnosed with the following chronic illness7



Cause of death, number per 100,000 persons (crude rate)8

Coronary heart Colorectal disease cancer 154.2 Loddon 34.1 Loddon 86.5 Victoria 22.9 Victoria Heart failure and Lung cancer complications, 66.5 Loddon and ill-defined 38.2 Victoria heart disease 40.7 Loddon COPD 77.4 Loddon 14.5 Victoria 30.1 Victoria Cerebrovascular **Diabetes**

disease

47.0 Loddon 32.8 Loddon 32.2 Victoria 18.8 Victoria

Health determinants

		Loddon	Victoria	regional Victoria
Unemployment	2021	5.6	6.4	5.6
rate % at March ⁹	2020	6.1	5.4	4.7
	2019	5.1	4.9	4.4
	2018	7.4	6	5.7



References:

6. Victorian Population Health Survey (VPHS), 2017.

7. Mortality over regions and times, 2015-2019.

8. VPHS, 2017.

9. Labour Force survey, 2021, 2020, 2019 and 2016; and Small Area Labour Markets estimates 2021 10. Social Health Atlas Australia Victoria, 2016.

11. Census, 2016.



Health determinants

Socio Economic Indexes for Areas (SEIFA)

The SEIFA assesses the wellbeing of communities using Census data. A ranking below 1000 indicates disadvantage- the lower the score, the higher the level of disadvantage.

Loddon: 942

regional Victoria: 977

Victoria: 1010

most disadvantaged LGA in Victoria - improved from 4th in 2011 (934)¹²

Do not meet both veg and fruit quidelines daily¹³





Loddon 60.4%

Victoria 51.7%

1 in 9 households are food insecure.

In some areas, this increases to 1 in 6.14

Consume sugarsweetened soft drink daily¹⁵



No water consumed per day16



References:

- 12. Census, 2016 and 2011.
- 13. VPHS, 2017.
- 14. Active Living Census (ALC), 2019
- 15 VPHS 2017
- 16. VicHealth Indicators Survey, 2015.
- 17. Active Living Census, 2019.

Self-reported dental health status is fair/poor

36.6% Loddon 24.4% Victoria

Current smoker

26.9% Loddon 16.7%

Victoria

Avoided or delayed visiting a dental health professional due to cost

30.1% Loddon 33.9% Victoria

Daily smoker

25.5% Loddon 14.7% Victoria

Increased lifetime risk from alcohol consumption



Pre-obese or obese

50.1% Loddon 50.8% Victoria

Increased risk from single occasion of alcohol consumption





68.7% Loddon



VPHS 2017

Barriers to meeting daily veg and fruit guidelines include¹⁷











28.6% veg 35.8% fruit 18.2% veg 19.1% fruit

13.8% veg 14.4% fruit 11% veg 14.5% fruit

15.9% veg 8.9% fruit

Insufficient physical activity time and sessions as per guidelines

43.1% Loddon 41.1% Victoria

Main barriers to meeting daily physical activity guidelines

- 1. Time poor (45.1%)
- 2. Poor health or disability (21%)
- 3. Cost (19.6%)

VPHS, 2017. ALC, 2019.

On average, people travel 20.6km to get to their activities.

Walking is the most popular physical activity among residents, with **19.6%** of the population reporting that they walked for exercise in the previous 12 months.

Most residents who walked for exercise in the past 12 months did so once per week or more (72.1%).

Health determinants

Low birthweight babies

5.6% Loddon 6.7% Victoria

Smoked during pregnancy

14.3% Loddon 8.4% Victoria Almost 60% of pregnant women did not attend antenatal care within the first 10 weeks of pregnancy, same as in Victoria.¹⁸

Average number of decayed, missing or filled primary and permanent teeth in children attending public dental services¹⁹

AGE	Loddon	Victoria
0-5 years	1	1.1
6 years	2.53	2.36
12 years	2.91	1.87

Australian Early Development Census (AEDC)

Completed by teachers as children enter their first year of school, the AEDC provides a snapshot of early childhood development.

AEDC highlights how children have developed across five domains: physical health and wellbeing, social competence, emotional maturity, language and cognitive skills, and communication and general knowledge.

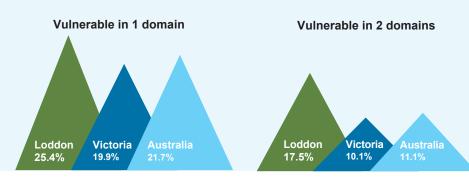
The 2018 AEDC classifies **over one quarter** of Loddon's children of school entry level as **developmentally vulnerable** in **at least one of the five domains**. This is a significantly higher proportion than that in Victoria or Australia. The proportion of children who were classified as vulnerable in **two of the five domains** was also significantly higher.

PHYSICAL HEALTH AND WELLBEING

LANGUAGE AND COGNITIVE SKILLS COMMUNICATION SKILLS AND GENERAL KNOWLEDGE

The three areas where the largest percentage of children are vulnerable

Percentage of children developmentally vulnerable in 2018



There has been a significant increase between 2015 and 2018 in the proportion of children classified as vulnerable in the language and cognitive skills domain.

AEDC, 2018 and 2015.

Bullying in schools

39.6%

of children in years 5 and 6 reported being bullied. This is the highest in the state (Victoria 15.9%).

24%

of children in **years 7 to 9** reported being bullied (Victoria 17.5%).²⁰

References:

- 18. Social Health Atlas Australia Victoria, 2016.
- 19. Dental Health Services Victoria, 2017-2019
- 20. Victorian Child and Adolescent Monitoring Systems indicators, 2018.

The plan: strategic focus areas, priorities and outcomes

Based on the available health and wellbeing evidence, supported by agency and community consultation, and with regard to the state government health and wellbeing focus areas, four strategic focus areas and two overarching focus areas have been identified. Within these focus areas, priorities and outcomes have been identified. These will inform the operational plans that will be developed annually to guide the work undertaken collaboratively by the partner agencies.





Strategic focus areas

1. Good physical health

Priority: Increase healthy start in life

The Strong Families Strong Children (SFSC) Loddon Project, funded by the William Buckland Foundation and facilitated by the North Central LLEN, has established partnerships to progress this priority; its ongoing work is strongly supported across the Shire. Its work with families and early years services to try to increase access for children and families to the services and resources they need to help children develop into the best they can be is highly regarded.

Stakeholder engagement in relation to the development of this plan as well as the Council plan, highlighted the impact that a lack of childcare has on community wellbeing and this was emphasised as an area of concern.

Outcomes:

- the Strong Families Strong Children initiative is maintained
- · all children arrive at school ready for learning
- · all children have a voice and influence
- all children are happy and enjoy healthy lifestyles
- children's connection to culture is valued and supported within service provision
- initiatives for the provision of childcare options across the Shire are identified and promoted

Priority: Reduce preventable disease

The Buloke Loddon Gannawarra Health Network (BLG) enables health, community and local government agencies across the three Shires to work collaboratively based on a shared understanding of the health needs and priorities of the Shire communities. Working in partnership increases the opportunities to ensure access and equity of health opportunities within the rural context.

- access to and participation in health screening programs is increased
- partnerships to reduce preventable disease are maintained and strengthened

2. Good mental health

Priorities:

Increase mental wellbeing Decrease suicide

The Loddon Healthy Minds Network (LHMN) is a valued, community-driven network that works with Loddon community members and organisations. There was strong support for the network to continue its work across the Shire. LHMN has established a Suicide Prevention forum, held every two years, with a focus on suicide prevention strategies for a rural context. There is ongoing support for this forum to continue to build capacity through this initiative.

Community members highlighted increased social isolation as a major mental health issue related to the pandemic. Associated with this is the increased importance of self-care during these times.

Stakeholders highlighted the range of services that can contribute to mental wellbeing and the need to build warm, welcoming, non-judgmental and connected services across the Shire. This is especially true given that many services are based outside the Shire and are visiting services that may not have a strong connection to Loddon community members and organisations.

- the Loddon Healthy Minds Network is maintained
- a reduction in the stigma relating to mental health issues
- · social isolation is reduced
- self-care initiatives are supported and promoted
- access to and engagement with mental health services is improved
- local capacity is increased in relation to suicide prevention within a rural context



3. Protect and promote health

Priorities:

Increase healthy eating and active living Reduce tobacco-related harm Reduce harmful alcohol consumption

Loddon Shire's very high smoking rates are a concern to many within the community and there is support for research to increase understandings of the drivers underlying these smoking rates.

There was community support for initiatives to increase active recreation (informal, non-competitive recreation) across the community. This is in line with the objectives of the Healthy Heart of Victoria initiative. There is growing concern about harmful alcohol consumption within the Shire, particularly in relation to community events, and the potential influence this has on young people's attitudes to alcohol consumption. Stakeholder workshops identified new opportunities for schools and other agencies to work in partnership in relation to these priorities.

There is continued support for the partnership work of the HEAL-SP (Healthy Eating Active Living and Smoking Prevention) group.

- · the Healthy Eating Active Living and Smoking Prevention group is maintained
- understandings about the underlying drivers of high smoking rates in Loddon Shire are increased
- smoking and vaping uptake rates in youth are reduced
- · rates of smoking during pregnancy are reduced
- service coordination for smoking cessation initiatives is improved
- healthy eating rates increase
- the Healthy Heart of Victoria initiative is maintained
- · participation in active recreation is increased
- · harmful alcohol consumption is reduced
- partnership work between schools and partner agencies in relation to these priorities is increased.

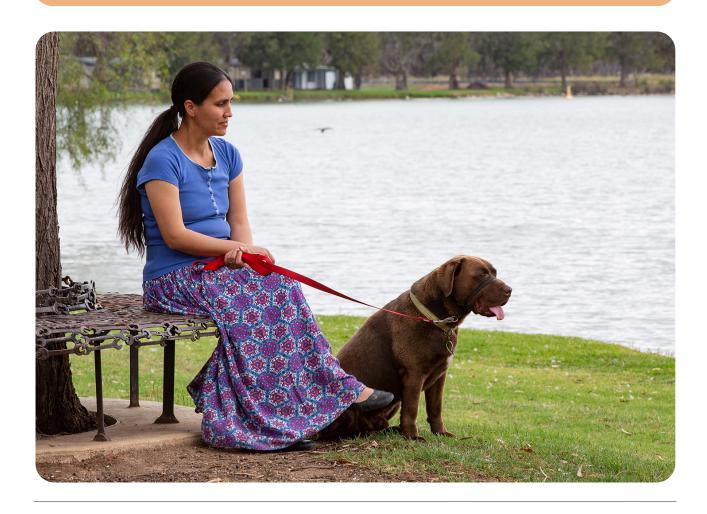
4. Feel safe and secure

Priority: Prevent all forms of family violence

The Loddon Family Violence Network (LFVN) was established in 2018 and there is strong support for its partnership work to continue to strengthen initiatives to prevent family violence and improve gender equity.

The Orange Door commenced operation in the Loddon Campaspe Region in October 2020, and is looking to establish a physical presence within the Loddon Shire. This provides opportunities for the Orange Door to work with the LFVN to develop service delivery models that are responsive to the Shire's unique strengths and challenges, enabling enhanced resourcing and coordination of family violence services within the Shire.

- the Loddon Family Violence Network is maintained
- partnerships to prevent family violence and improve gender equity are supported and strengthened
- capacity to identify and respond to family violence is increased
- well resourced and coordinated family violence services are available within Loddon Shire



Overarching focus areas

1. Climate change

Priority: Support the community to mitigate the impacts of climate change on their health and wellbeing

Outcomes:

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- cooler space options are identified and access promoted on days of extreme heat
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2. Connectivity

Priority: Reduce the health and wellbeing inequity gap created by inadequate digital connectivity

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- opportunities for improved digital connectivity across Loddon Shire are identified A Å \ [{ [e^å
- o]][¦č}ãæî•Át[Án}@æ)&^Ás[{ { `}ãcÁt ^{ à^¦•aÁs&&^••Át[Át]|ā,^Át^¦çã&^•Áæ^ identified, supported and promoted

Implementation, monitoring, review and reporting

Council is one of a number of agencies who will work collaboratively to meet the objectives in the Municipal Public Health and Wellbeing Plan. Annual operational plans will be developed in partnership with key agencies, partners and stakeholders which identifies the activities and initiatives for the following year.

As health and wellbeing is constantly evolving, having an annual operational plan provides flexibility to adapt to the changing environment and to work collaboratively, using current available evidence to guide action planning.



Loddon Shire Council's Municipal Health and Wellbeing Plan implementation framework.

The Plan will be monitored throughout the four year period by Council staff and the Loddon Community Wellbeing network. In accordance with the statutory requirement under the Public Health and Wellbeing Act 2008 the MPHWP Strategic group (facilitated by Council staff) will review the Plan annually and, if required, will recommend amendments to the Plan to Council. The purpose of this review is to learn what has been successful and what can be done better, and to highlight current gaps in resources and services.

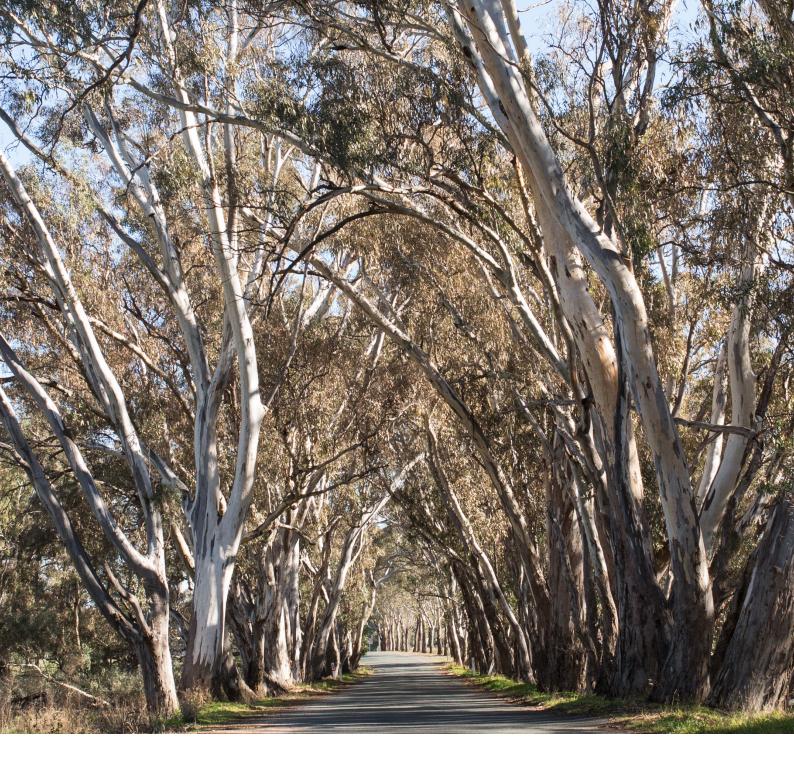
Progress on the Plan's implementation will be reported to Council on an annual basis.

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