

Sydney South West Area Health Service

Community Health Strategic Plan 2007—2012 Summary Document



SYDNEY SOUTH WEST
AREA HEALTH SERVICE
NSW HEALTH

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ISBN No: 978 1 74079 085 7

DIVISION OF HEALTH SERVICE PLANNING REPORT NO: 2007/02

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Chief Executive's Message

Since its inception in January 2005 Sydney South West Area Health Service (SSWAHS) has faced the challenges of providing services equitably to a community characterised by geographic diversity in culture, language, population density, socioeconomic status, educational attainment, transport infrastructure and local health needs.

In addressing these challenges Community Health has integrated into an Area wide management structure and developed an Area wide strategic plan to provide "an integrated and coordinated primary and community health care system working in partnerships to promote health and well being of our community".

SSWAHS has an ongoing responsibility to provide modern accessible facilities from which community health is provided and is delivering on this through facility upgrades at Marrickville, Croydon and Canterbury and planning work for new facilities at Liverpool and Redfern.

In developing this Plan, Community Health has faced the difficult task of prioritising what can be provided. A Clinical Core Business Framework has been developed. This focuses on services the evidence tells us have the greatest potential impact on health outcomes. The Framework will need to vary over time as evidence changes and new models of care emerge, however, its very existence gives confidence that community health can move flexibly to meet emerging needs.

During its five-year timeframe, the strategic vision and operating statements guiding the Plan will shape services to best meet the significantly expanding population due to growth in the South West and urban consolidation in the Inner West. There is also the general trend of an ageing population, and all these needs will only accelerate over the longer horizon of coming decades.

Maintaining strong communities requires enduring partnerships between service providers and the community. This Plan provides the framework for further enhancing Community Health partnership arrangements with other SSWAHS clinical streams, Government agencies and primary care providers including general practice. Maintaining our strong relationship with Aboriginal Community Controlled Health Services is essential.

A widespread consultation process was undertaken with our communities in developing the Plan including input from Local Councils. The strategic directions identified are wholly consistent with the future directions for Health in NSW that were developed following extensive Statewide consultation. Indeed in focussing on early intervention, reducing health disadvantage, flexibility, strengthening partnerships, evidence based services and community participation, this Plan will take a leading role in shaping service development.

I would like to thank the Community Health staff, our internal and external partners in service provision, the general community and others who contributed to development of the SSWAHS Community Health Strategic Plan 2007-2012. It provides an excellent framework for the developments that will be necessary to meet the community health needs of a growing and ageing population in the South West of Sydney.



Mike Wallace

Chief Executive

Sydney South West Area Health Service

1. INTRODUCTION

Community Health refers to a range of community based prevention, early intervention, assessment, treatment, health maintenance and continuing care services designed to improve or maintain the health and wellbeing of individuals and communities. These services are a significant and increasingly important aspect of the provision of a holistic population based health service.

Community Health services in Sydney South West Area Health Service (SSWAHS) form an integral part of the continuum of health treatment and care offered to the local community. The importance SSWAHS places on the delivery of community based services is evidenced by the recent opening of new Community Health facilities at Marrickville, Croydon and Campbelltown and the planning work being undertaken to develop new community health facilities in Redfern and Liverpool.

Community Health in SSWAHS offers a range of services, as outlined below:

Child and Family Clinical Services	Diverse Clinical Services	Community Acute/Post Acute and Chronic Clinical Services	Corporate, Integration and Support Services and Finance and Operations
<ul style="list-style-type: none"> • Early Childhood Health Services • Child Protection • Child, Adolescent & Family Health Services 	<ul style="list-style-type: none"> • Community Development • Multicultural Health • Sexual Health • Women’s Health • Sexual Assault • HIV/AIDS Services • Community Counselling • Community Nutrition • Youth Health 	<ul style="list-style-type: none"> • Community Health Nursing • Palliative Care 	<ul style="list-style-type: none"> • Service Integration • Information Management • Information Technology • Service Development • Quality and Clinical Risk Management • Occupational Health & Safety • Facilities and Resources Management • Marketing of Community Health • Workforce

These, and other community based health services are provided across the whole of SSWAHS from 138 facilities, including Community Health Centres, community clinics, schools and outreach facilities. In 2005/06, Community Health staff provided approximately 685,000 non-admitted patient occasions of service (NAPOOS) to the local community, through the delivery of a range of education, assessment, diagnostic and treatment services. In addition to these individual services, staff ran over 12,000 group programs with approximately 157,000 group participants and provided support to hospital inpatients, particularly in Ambulatory Care and Palliative Care. These services were provided by approximately 1,000 staff, across medical, nursing, allied health and administrative disciplines. By 2016, it is anticipated that Community Health could provide over 1 million NAPOOS to the local community.

The Policy and Planning Context

The delivery of community based health services is becoming a major focus for NSW, as these services have the capacity to facilitate early intervention and provide alternatives to hospital treatment. The development and expansion of such services is supported by the *NSW State Plan: A New Direction for NSW, the State Health Plan Towards 2010* and the *SSWAHS A New Direction for Sydney South West: Health Service Strategic Plan Towards 2010*.

Consistent with these directions, Community Health have identified a vision of being “an integrated and coordinated primary and community health care system working in partnerships to promote the health and wellbeing of our community”. A set of operating statements outline how this vision will be achieved across the Area. Objectives for the development and delivery of Community Health services to 2012 have also been identified.

Further, the Community Health Strategic Plan provides:

- A vision for the development of Community Health in SSWAHS to 2012 and beyond;
- A description of the operating context for Community Health within SSWAHS, NSW Health and NSW;
- Objectives for the delivery of Community Health services in SSWAHS to 2012 and with a broader outlook to 2016;
- A Clinical Core Business Framework, outlining the key clinical priorities for each Community Health service and plans for how these will be delivered;
- An action plan outlining how these objectives will be achieved.

Community Health has actively engaged a wide variety of stakeholders in the development of the Community Health Strategic Plan, including service consumers, the wider community, hospital and community health staff, local government, other government departments, non-government organisations and general practitioners. The issues raised by these stakeholders, along with extensive service and policy analysis, has informed the setting of objectives and the overall direction of the plan.



2. FUTURE DEMAND

Growth in demand for all Community Health services is anticipated across SSWAHS over the next five years and beyond. As a result, Community Health capacity will need to increase in a timely manner in order to be responsive to the increased need in the community. Much of the anticipated demand is directly related to population growth, although other significant factors include population ageing, increasing rates of chronic disease, a high rate of obesity, low breastfeeding and immunisation rates and changes to hospital models of care and technology which enable more people to be treated in the community setting.

The fast tracking of development in the South West Growth Centre (expected to house an additional 300,000 people over the next 20 – 25 years) is a further significant factor affecting the way service demand will be shaped. As development will occur on greenfield sites, without strong connections to existing service centres, the demand for additional, locally based services will intensify. SSWAHS is an active participant in planning for the land releases within the South West Growth Centre. Planning for these communities includes recognition of the likely health needs of the community, based on current trends and projections. Initial planning is currently underway for the first release precincts of Oran Park and Turner Road.

Further work is required to quantify demand for services, as information becomes available about the likely demographic mix within the South West Growth Centre. Opportunities to co-locate health services with other community services, government agencies and service providers will be explored at this time. This will include consideration of opportunities to work more closely with other primary health care providers, such as general practitioners, through the HealthOne (Integrated Primary and Community Health) program.

Over the next five years, further planning will be undertaken, in conjunction with the SSWAHS Asset Plan, to determine the infrastructure needs of Community Health. The Community Health strategic plan will inform asset planning. Future community based health facilities provided in SSWAHS will likely include a mix of services managed either by Community Health, or by Clinical Streams such as Mental Health, Oral Health, Aged Care and Drug Health. Planning work currently being undertaken in relation to Maternity Services, Obesity Prevention and Management, HIV/AIDS services, and Aboriginal Health; and as proposed for Children, and Youth, may also result in identification of additional needs for community based services.

The Delivery of Community Health Services to 2012 and Beyond

To assist in ensuring that all Community Health services are effective in meeting population need and are evidence based, a Community Health Clinical Core Business Framework has been developed which briefly outlines priority clinical activities for each service type. Development of the Clinical Core Business Framework has been a significant achievement for Community Health, in defining across the Area essential clinical service elements. It is proposed that this framework will be reviewed annually in order to be responsive to changing circumstances.

Increases in the capacity of Community Health services will allow the existing highest priority services to be provided equitably as the population grows. However, opportunities to delivery priority two and three services should also be considered, as they have also been identified as current needs within the community.

The following sections briefly outline the types of services to be delivered by Community Health to 2012 and identify the main demand drivers and future plans.

Early Childhood Health Services

Early Childhood Health services include child and family health nurses, social workers and nurse audiometry for children aged zero to five and their families. Services provided include universal and sustained home visiting, child development clinics, opportunistic immunisation, and parenting support and education. Demand for these services is increasing in line with population growth, although demand fluctuates between areas based on demographic changes. Early childhood services, delivered in accordance with the Families NSW philosophy, are essential to ensuring the health and well-being of children, families and communities in the long term.

Child Protection Services

Child Protection services are provided comprehensively for children and families across SSWAHS, where abuse or neglect has been substantiated by the Department of Community Services (DoCS). The service includes planning, program and policy development on child protection issues, counselling, medical assessment, consultation and child protection training. There are significant legislative requirements guiding these services and demand is expected to grow in line with population growth and increased reporting to DoCS.

Child, Adolescent and Family Health Services

Child, Adolescent and Family Health Services comprise allied health, nursing and medical services delivered to children aged zero to 18 and their families. The services range from health promotion and education to multidisciplinary assessment and treatment of children with developmental difficulties, including physical and/or cognitive impairment. Demand for these services will continue to grow in line with population growth, although demand may be concentrated in particular areas, subject to local demographics.

Community Development -The Hub

The Hub - Community Development program is a unique service type. It involves a partnership model between SSWAHS, other government and non-government agencies and the community of Miller in the Liverpool local government area. The Hub is designed to provide a one-stop-shop for community support and programs at a local level. Other such programs may be established in the future, subject to identified local needs. Generalist community development work is undertaken by all Community Health teams.

Multicultural Health

Multicultural Health services aim to support the diverse community of SSWAHS to access mainstream health services and to develop health literacy skills. Multicultural health services also assist specific language or cultural groups to improve their health, in identified areas, for example through the delivery of smoking cessation programs in the Arabic community. As new and emerging communities arrive in the Area, there will be a need for the multicultural health service to evolve in order to responsively cater to the needs of these groups.

Sexual Health

Sexual Health services provide diagnosis, treatment and counselling for sexual health problems, usually related to the acquisition of a sexually transmitted infection or blood borne virus. As rates of some sexually transmitted infections increase in SSWAHS and the broader community, there will be an increased demand for services. Sexual Health services target specific, high risk population groups, many of which have difficulty accessing mainstream primary care. As such, Sexual Health services will continue to focus on diagnosis and clinical screening, along with health promotion, and the

education of other service providers to detect and appropriately treat sexual health problems.

Women's Health

Women's Health services comprise both a clinical and non-clinical component. Non-clinical services focus on improving health outcomes for women across SSWAHS, through policy, program and partnership development. Clinical services are delivered to women who experience social disadvantage or who do not access mainstream health services. Again, the diversity of the SSWAHS community results in increasing demand for culturally appropriate women's health services.

Sexual Assault

Sexual Assault services include both counselling and medical services. However, recent changes have resulted in Community Health only managing sexual assault counselling services. These services are provided to both adults and children in the south west and to adults and young people at Eastern and Central Sexual Assault Service, with child sexual assault services provided by the Sydney Children's Hospital. Effective communication links and processes are essential for these networked arrangements to be successful. Demand for sexual assault counselling services is expected to increase, in line with population growth.

HIV/AIDS Community Services

HIV/AIDS Community Services are concentrated in the inner west, where the highest number of the Area's HIV notifications occur. A range of services are available including medical assessment and treatment, allied health support, individual and group counselling, health and lifestyle programs, health promotion, prevention and education services. Demand for services is likely to at least remain steady, as the expectation of declining or plateauing notification rates is matched against lengthening survival rates. Discrete HIV/AIDS services will continue to be required in the future, due to the complex and specific needs of clients, although these services should continue to be supported by mainstream health services.

Community Counselling

Community Counselling as a discrete service is currently only available in the South West. In the inner west, child counselling services are provided through the Child and Family Clinical Directorate, whilst there is only limited availability of adult counselling services. Counselling services assist people to manage a range of issues including anxiety and depression, grief and loss and self-esteem. Opportunities to expand adult counselling services in the inner west will be explored, in order to provide equity of access to counselling for all residents of SSWAHS, in partnership with non-government organisations.

Community Nutrition Services

Community Nutrition Services across SSWAHS are delivered through a range of different clinical and corporate governance mechanisms, and different models of care. Community Health aims to promote improved nutrition primarily in children and frail, older people through both direct clinical services and health promotion programs. Low breastfeeding rates, a high rate of obesity, lack of food security and population ageing will result in an increased demand for these services. An ongoing area wide management structure is yet to be determined.

Youth Health

Youth Health services, delivered in partnership with local communities, target at risk young people (aged 12 – 24) through the provision of both direct clinical services and a range of community development and health promotion initiatives. Programs generally

target issues associated with alcohol and drug use, mental health, physical activity, nutrition, sexual health and injury. There are five youth health centres in SSWAHS, complemented by a range of outreach services. To improve youth health outcomes, consistent with the priorities of the NSW Government, there is a need to continue to provide these services, and to focus services on providing evidence based outcomes.

Community Health Nursing

Community Health Nursing provides a range of services including community acute care, wound management, continence and catheter management, post-acute care, palliative care, school health services and chronic disease management. Services are available to clients in a wide range of locations including homes, workplaces and community health centres. The majority of services are provided to people aged over 65. The services are partially funded through the Home and Community Care program and partially through SSWAHS. Demand for community health nursing will increase in line with the ageing of the population, increasing rates of chronic disease and new opportunities to manage acute conditions in the community.

Palliative Care Nursing

Specialist Community Palliative Care nursing services are provided Area wide as a consultative service to Primary Health Nurses and GP's as well as hospitals, Residential Aged Care Facilities and other facilities. These specialist services operate from local Community Health Centres and use different governance models. Demand for Palliative Care services is expected to increase as a result of population growth, population ageing, increasing cancer rates and an increasing number of people expressing the desire to die at home.

The clinical services described above are supported by a Corporate Integration and Support Services structure, involving service integration, information management, information technology, service development, quality and clinical risk management, occupational health and safety, and facility and resources management. These support services have been identified as fundamental to the successful amalgamation of services into Area-wide structures, with consistent policies, programs and data collection methods.

3. IMPLEMENTATION AND MONITORING

The SSWAHS Community Health Strategic Plan is intended to guide the delivery and development of Community Health Services in the period 2007 – 2012. However, the plan is a living document and will be subject to change as circumstances change.

Community Health envisages that significant service improvements can be made through systemic improvements such as improved use of technology, development and implementation of standardised policies and practices and other service development initiatives. These improvements can and will be made within existing resources. New resources will be required to expand the capacity of Community Health to provide additional priority one services in response to increasing demand and also to provide priority two and three services over time. Business cases will be developed to provide evidence of the benefits to the community and the Area Health service of any such initiative. Opportunities to develop new service types, such as men's health, should also be considered, in response to identified community needs. Again, additional resources will be required to develop this capacity.

Implementation of the Plan will be monitored through six monthly assessments of progress against the action plan. An implementation report will be produced annually by Community Health, with updates on relevant actions also feeding into the SSWAHS Performance Reporting framework. The Community Health Strategic Plan will be completely reviewed in 2012, with a view to the development of a future Plan at that time.

Described herein are the SSWAHS Community Health objectives for each of the seven strategic directions of the NSW Health system, along with some key actions outlined in the plan for delivery by 2012.

Strategic Direction 1 Make Prevention Everybody's Business

Objectives

- 1.1 Reorient existing services to have an increasing focus on prevention, health promotion and education
- 1.2 Expand the range of preventative programs in line with emerging health and community needs
- 1.3 Work with a range of partners to reduce health disadvantage

Key Actions

- Audit existing services to determine current range of activities and percentage of time spent undertaking and related to health screening, prevention, health promotion and education
- Develop a set of minimum standards and targets for prevention, health promotion and education within existing roles
- Develop and formalise relationships with other Government and Non-Government organisations to implement community development programs in response to emerging community needs
- Develop appropriate resources, programs and partnerships to meet the needs of priority populations within each service

Key Partners in Achieving our Objectives

- SSWAHS Population Health
- SSWAHS Aboriginal Health
- Other NSW Government Departments
- Non-Government Organisations
- Communities

Strategic Direction 2 Create Better Experiences for People Using Health Services

Objectives

- 2.1 Develop and implement systems to monitor and manage demand in all services
- 2.2 Deliver services that are flexible and responsive to identified needs
- 2.3 Utilise collaborative processes involving consumer feedback and information from health care reporting systems to continuously improve the quality and safety of services
- 2.4 Enhance service integration across the continuum of care
- 2.5 Provide Community Health services in a range of safe, healthy and well maintained environments

Key Actions

- Formalise and implement the Clinical Core Business Framework for Community Health
- Develop and implement a Community Health Demand Management Policy and associated plans for each service which include:
 - Staffing profile
 - Waiting list
 - Entry and exit policy

- Review intake systems for each service and/or discipline including investigation of future options, for example:
 - Centralised intake systems
 - Triage systems
 - Clinical versus administrative intake officers
- Investigate opportunities to develop innovative service delivery strategies that include:
 - Outreach options
 - Tele-health
 - Population specific services
 - Home based services
 - Flexible hours
 - Flexible service boundaries
 - Multidisciplinary clinics
- Develop a strategy to improve the participation of consumers and community in the review and ongoing development of Community Health services in conjunction with community and consumer representatives
- Review referral pathways between Community Health and services in SSWAHS and with key external partners

Key Partners in Achieving our Objectives

- SSWAHS Clinical Stream Directors and Hospital General Managers
- SSWAHS Clinical Governance Unit
- SSWAHS Community Participation Unit
- General Practitioners
- Universities and Tertiary Institutions
- Consumer and Community Representatives

Strategic Direction 3 Strengthen Primary Health and Continuing Care in the Community

Objectives

- 3.1 Investigate opportunities to expand Community Health services across the Area
- 3.2 Strengthen the focus of Community Health services to provide early intervention
- 3.3 Deliver services consistent with the Community Health Clinical Core Business Framework

Key Actions

- Work with Health Services Planning and Population Health to develop proposals for new services in the South West Growth Centre
- Undertake a mapping exercise to determine the availability of men's health services in SSWAHS
- Investigate opportunities to increase sustained home visiting services for targeted groups, including the establishment of an sustained home visiting service for Aboriginal teenage mothers
- Develop and implement strategies to reduce avoidable hospital admissions amongst users of Community Health services, for example:
 - Chronic disease self management
 - New models of care

- Establish Community Health internet and intranet sites
- Develop and distribute printed material regarding Community Health facilities and services which is culturally appropriate and available in community languages

Key Partners in Achieving our Objectives

- SSWAHS Clinical Stream Directors
- SSWAHS Population Health
- SSWAHS Aboriginal Health
- SSWAHS Information Services Division
- Non Government Organisations
- Divisions of General Practice and General Practitioners

Strategic Direction 4 Build Regional and Other Partnerships for Health

Objectives

- 4.1 Deliver services in collaboration with a range of partners
- 4.2 Develop systems to formalise and enhance relationships with partner organisations
- 4.3 Engage and involve stakeholders in the development of Community Health policies, plans and initiatives

Key Actions

- Investigate opportunities to colocate services with relevant partners
- Develop partnerships to deliver services which address the health needs of particular target groups, including:
 - Aboriginal and Torres Strait Islander people
 - People from culturally and linguistically diverse communities
 - People from emerging communities, particularly refugees
 - Young people
 - Women
 - Older people
 - People with a disability
 - Children
 - People with chronic disease
 - People who are socially and/or geographically isolated
 - People with mental health issues
 - People with drug and alcohol issues
- Investigate opportunities to improve community participation in Community Health
- Establish Consumer and Community Participation Representatives on Community Health Area wide committees in accordance with the SSWAHS Community Participation Framework

Key Partners in Achieving our Objectives

- SSWAHS Clinical Stream Directors
- Divisions of General Practice and General Practitioners
- Local Government
- Non-Government Organisations
- Consumer and Community Representatives

Strategic Direction 5 Make Smart Choices about the Costs and Benefits of Health Services

Objectives

- 5.1 Develop and implement integrated consistent data and information management systems and reporting processes
- 5.2 Provide evidence based services through the integration of best practice evidence with clinical expertise and client values
- 5.3 Demonstrate that clients are better off as a result of the service delivered
- 5.4 Review and further develop sound financial management systems and procedures

Key Actions

- Develop and implement an Information Technology strategy which addresses infrastructure provision and maintenance and communication systems and resources
- Develop and implement data systems which support clinical practice
- Develop and implement a clinical activity reporting system that is standardised across Community Health
- Encourage staff to participate in professional evidence based practice groups
- Develop and implement a clinical supervision system and policy
- Develop, collect and report on clinical indicators for every Community Health clinical service

Key Partners in Achieving our Objectives

- SSWAHS Information Services Division
- SSWAHS Clinical Governance Unit
- SSWAHS Population Health
- Divisions of General Practice and General Practitioners

Strategic Direction 6 Build a Sustainable Health Workforce

Objectives

- 6.1 Support training and education opportunities to enable staff development and to ensure high quality care to clients
- 6.2 Create a positive work environment that values its workforce and treats staff fairly and with respect
- 6.3 Undertake workforce planning to match skills and resources to community needs
- 6.4 Apply the principles of risk management and occupational health and safety to all structures, processes and procedures

Key Actions

- Investigate opportunities for staff to improve their cultural awareness eg. through training or mentoring and recommend preferred option(s)
- Support staff to undertake further relevant qualifications through internally & externally provided courses as per the SSWAHS Learning and Development policy
- Continue to deliver Child Protection training for all SSWAHS staff
- Review equity and parity of staffing, positions and grading across Community Health services and implement recommendations of review

- Develop and implement a consistent performance management framework across Community Health Services
- Work with the Director Strategic Workforce Development and the Directors of Population Health and Allied Health to accurately compile the baseline information for the development of monthly workforce profiles
- Explore, support and expand the role of volunteers in Community Health
- Develop a Risk Management Plan to meet annual workplace health and safety targets specified in SSWAHS Performance Agreement and Working Together Public Sector Occupational Health and Safety and Injury Management Strategy 2005 -2008
- Establish a comprehensive risk register, and progressively assess and control risks according to priority

Key Partners in Achieving our Objectives

- SSWAHS Centre for Education and Workforce Development
- SSWAHS Aboriginal Health
- SSWAHS Population Health
- SSWAHS Community Participation Unit

Strategic Direction 7 Be Ready for New Risks and Opportunities

Objectives

- 7.1 Implement the corporate planning framework through the integration of Community Health strategic and business/operating plans
- 7.2 Investigate opportunities to expand the research capacity of Community Health

Key Actions

- Formally monitor the SSWAHS Community Health Strategic Plan to assess progress on implementation
- Every Community Health service develops a business/operating plan linked to the Community Health Strategic Plan
- Apply for grant funding consistent with research priorities
- Investigate opportunities to collaborate with tertiary institutions on Community Health research

Key Partners in Achieving our Objectives

- Divisions of General Practice
- Tertiary Institutions

4. CONCLUSION

The SSWAHS Community Health Strategic Plan has been developed to be consistent with key state and Area policy. Input from stakeholder groups has been essential to the development of the plan, with the issues raised by stakeholders forming the basis of both the plans objectives and actions.

Implementation of the plan involves some changes to models of care and to service delivery priorities within clinical services, along with improvements to the associated coordination and support services. Clinical governance and corporate governance are noted as being essential to the successful implementation of both the plan and the Clinical Core Business Framework.

New resources will be required over time to expand the capacity of Community Health, both in terms of infrastructure and service capacity. Community Health is an active participant in Area wide service and asset planning, highlighting the need for ongoing provision of community based services to our existing and emerging communities. Consistent with this is also the need to constantly review the outcomes of our services to ensure the provision of high quality, effective services and best value for money. To this end, consideration will be given to disinvestment in particular services over time, if the evidence does not support their ongoing operation.

The Community Health Strategic Plan for Sydney South West Area Health Service lays a clear foundation for the future development of Community Health in the Area and the initiatives contained within will be a major contributor to achieving the vision of “Healthy People – Now and in the Future”.