

Monash Health

Reshaping systems for thriving communities



**2025-2029
Community
Health - Health
Promotion Plan**

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Acknowledgement of Country

Monash Health respectfully acknowledges the Bunurong/Boonwurrung and WurundjeriWoi-wurrung peoples, the Traditional Custodians and owners of the lands where our facilities are located and programs operate. We recognise the ongoing spiritual link Aboriginal people have to their lands, culture and lore; and acknowledge that their connections build healthier families and communities. Monash Health pays respect to the Elders of the Wurundjeri Woi-wurrung and Bunurong/Boonwurrung peoples; past, present and future. We extend our respect to our Aboriginal and Torres Strait Islander employees, consumers and stakeholders.



Together with our partners and communities, we create environments that embed equity, health and wellbeing where people live, work, learn and play.

Four Year Plan

Reshaping systems for thriving communities 2025-2029

Monash Health's Health Promotion team is funded to implement the Community Health - Health Promotion Program Guidelines across Cardinia Shire, City of Casey and City of Greater Dandenong.



Guiding Documents

Our four year and annual plan are guided by the following documents:

- Community Health - Health Promotion Program Guidelines 2025-2029
- Community Health - Health Promotion Impact measures practice guide.

Alignment

This plan aligns with the following:

Monash Health Strategy 2026-2031

- Care, Reimagined. So that people live their best lives.

Local catchment documents and priority areas *

- The South East Public Health Unit (SEPHU) Strategy 2024 - 2029
- SEPHU Population Health Catchment Plan 2023-2028
- Local Municipal Public Health and Wellbeing Plans
- Women's Health in the South East (WHISE) - Good Health Down South.

State-wide documents

- Victorian Public Health and Wellbeing Plan 2023-27
- Victorian Outcome Measures Framework
- Healthy Kids, Healthy Futures plan
- Wellbeing in Victoria: A Strategy to Promote Good Mental Health 2025-35.

Key priority areas

As defined in the Community Health - Health Promotion program guidelines, 70% of our work will be focused on these four key priorities:

- Increasing healthy eating
- Increasing active living
- Reducing tobacco and e-cigarette related harm
- Improving mental health and wellbeing.

Our team will also be responsive to local identified needs, other focus areas will include, but are not limited to:

- Inclusion
- Gender equity
- Sun protection
- Injury prevention
- Sexual health.

Consultation and needs assessment

Meetings with key partners

Our team met with the following partners to discuss alignment of priorities and explore opportunities for collaboration: Cardinia Shire Council, City of Casey, City of Greater Dandenong, South East Public Health Unit, and Women's Health in the South East.

Results from setting and community survey

- The most significant change identified at settings following working with our team included, the positive impact on children and more nutritious food options.
- The health areas most relevant to settings were healthy eating, physical activity, mental health and reducing injury.
- When asked what the key health and wellbeing concerns settings would like addressed, the highest responses were mental health, healthy eating and social and emotional health.
- Respondents identified more practical resources, workshops, webinars and incursions would be helpful to create healthy changes in their setting.

Victorian Population Health Survey - local data

Cultural diversity

- Cardinia (22.9%), Casey (46.9%) and Greater Dandenong (70.7%) residents speak a language other than English at home. The City of Greater Dandenong has one of the highest rates of low English proficiency in Victoria, with 16% of its population affected—significantly higher than the state average of 4.4%. In comparison, the City of Casey reports 6%, and the City of Cardinia 2%.

Socio-Economic Indexes for Areas - Index of Relative Socio-economic Disadvantage (IRSD) Insights

- In 2021 the City of Greater Dandenong IRSD score was 887 and is ranked as one of the most disadvantaged metropolitan local government areas. The City of Casey IRSD score was 995 and has mixed advantage, and the Shire of Cardinia IRSD score (2021) was 1,021 and is moderately advantaged.

Physical activity

- Casey (19.5%) and Greater Dandenong (18.9%) residents had higher levels of 'not doing any moderate to vigorous activity (in non-sedentary adults)' compared to the Victorian average of 14.9%.
- Cardinia residents had higher rates of doing 'less than 150 minutes of physical activity per week' at 50.5% compared to the Victorian average of 47.1%.

Healthy eating

- Cardinia (62.1%), Casey (63.4%) and Greater Dandenong (60.1%) all had higher proportions of adults not meeting fruit and vegetable intake guidelines, compared to the Victorian average of 59%.
- Notably, Greater Dandenong (21.4%) had a significantly higher rate of very low vegetable consumption <1 serve/day, compared to the Victorian average of 16%.
- Cardinia (11.1%) and Greater Dandenong (11.8%) were more likely to experience food insecurity in the last year, compared to the Victorian average of 8%.

Tobacco and vaping

- The proportion of residents who reported smoking or tobacco was higher in Cardinia (21.1%) and Greater Dandenong (20.4%) than the Victorian average of 18.5%.

Mental health and wellbeing

- Casey (26.4%) and Greater Dandenong (33.1%) residents had higher levels of 'experiencing loneliness', compared to the Victorian average of 23.3%.

Practice principles

We collaborate with key stakeholders and engage with communities

To ensure local prevention initiatives are coordinated and mutually reinforcing, the Monash Health Health Promotion Team will collaborate with local partners through:

- Contributing to the **South East Prevention Leadership Action Group (SEPLAG)**, a network of health promotion funded agencies and prevention partners across the SEPHU catchment, including Better Health Network, Caulfield Community Health Service, Kooweerup Regional Health Service, Peninsula Health, Women's Health in the South East and Baker Heart and Diabetes Institute. The action group is led by the South East Public Health Unit (SEPHU) and provides opportunities for information sharing, capacity building and collaboration.
- Collaborating with **local councils** to address aligned priorities, by contributing to municipal public health and wellbeing processes and invest in maintaining strong relationships with all relevant council department stakeholders.
- Partnering with **community settings** to identify priorities, capacity building needs and co-designing approaches to ensure relevance and acceptability of health promotion initiatives.
- Contributing to **SEPHU's Population Health Catchment Plan**, participating in relevant Regional Expert Advisory and associated working groups.
- Supporting the implementation of the **SEPHU strategy**, by participating in the SEPHU Strategy Implementation Working Group and co-leading key health promotion actions within the pillars of Strengthening Community Connection and Capability and Advancing Equity in Health and Wellbeing.
- Participating in the **Joint Primary Care and Population Health Advisory Committee Project Working Group**, with the key strategic priority of prevention and management of cardiovascular disease, with a focus on reducing tobacco and vaping related harm.

We embed an intersectional health equity lens

Equity is addressed through a combination of universal approaches that impact on the structures and environments that influence our health, alongside targeted approaches to strengthen and support populations. Intersectionality refers to the ways in which different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalisation. By applying an 'intersectional health equity lens' to the focus areas of increasing healthy eating, increasing active living, reducing tobacco and e-cigarette related harm, and improving wellbeing it is apparent that social determinants, such as discrimination, gender and socio-economic status have a role in impacting on health inequalities.

We take a place-based approach

We focus on the key places and settings where people spend their time. Place-based approaches consider local needs and priorities, engage the community as an active partner to develop solutions and leverage networks and activity.

Monash Health works with the following settings:

- Alternate Leisure
- Community groups
- Early years services
- Monash Health
- Outside school hours care (OSHC) services
- Recreation facilities
- Schools
- Sports clubs.

Other settings may include, but are not limited to, community hubs, libraries and neighbourhood houses.

Local implementation of statewide and locally developed frameworks

We support settings to implement the following statewide frameworks:

- The Achievement Program with schools and early learning centres.
- The Healthy Choices guidelines are used to assess retail menus and vending machines in recreation facilities, sports clubs and the Monash Health workplace.
- Vic Kids Eat Well with schools, outside school hours care, recreation facilities, community settings and sports clubs.
- Menu Planning Guidelines for Long Day Care with long day care services.

We developed a number of local frameworks we implement in partnership with settings:

- Healthy Sports Clubs encourages clubs to create healthier environments that promote good health and wellbeing. The initiative is built around a framework that focuses on a whole-club approach. Healthy Sports Clubs has nine health areas: Healthy Food & Beverages; Physical Activity & Active Recreation; Smoke & Vape Free Clubs; Mental Wellness; Responsible Alcohol Consumption; Preventing Drug Harm; Sun Protection; Injury Prevention; and Inclusion.
- The Alternate Leisure Initiative supports settings to increase healthy eating, physical activity and inclusion in Alternate Leisure settings.

We aim to build the health promotion evidence base by performing research

- We completed the Alternate Leisure research project, with findings presented at two conferences.
- We initiated the Physical Activity and Active Recreation Equipment Loan Kit (PAARELK) research project, to support sports clubs in promoting movement among non-players.
- Two team members were awarded prestigious VicHealth Health Promotion Fellowships and will be completing the following projects, Community Leaders Enhancing Physical Activity Participation (CLEPAP) program and Early Years Movement Kit.

We monitor and measure key performance indicators through the following:

Initiative measures:

- We apply process and outcome metrics to measure project success against impact measures. Refer to appendix 2 for further information on the healthy eating, tobacco and e-cigarette, and active living impact measures.
- We use audits, benchmarking, menu assessments, action planning, pre and post surveys, interviews, focus groups, and developmental evaluation including reflective practice.

Reporting to our funding provider:

- Indicator webforms - showing annual contribution towards the Community Health - Health Promotion incremental change frameworks for healthy eating, active living and reducing tobacco and vaping related harm.
Number of settings supported to achieve: Vic Kids Eat Well Small and Big Bites, Small and Big Steps for active living and tobacco and e-cigarettes related harm.
- Narrative report Information to accompany and complement the indicators webforms to capture progress against other priority areas and greater insights on yearly progress and achievements.
A focus on local implementation of state-wide and locally developed initiatives, key projects and other strategies, such as workshops and training, networks and engagement actions.

We apply a systems thinking lens

We continue to use a detailed framework of System Change Indicators that gives meaning to the changes we are collectively creating and provide a transparent line of sight for the local system level changes that contribute to improving the overall health impacts and outcomes achieved locally.

The system elements we are collaboratively trying to create change within, are context, policy and practice, components, connections, and resources and support. The System Change Actions look beyond individual behaviour change and program reach and create a narrative of multiple interventions working concurrently to create change. These elements are the preconditions for change in the environment and community.



Context

Understanding the complexity of the system & preparing for change. Context is understood through system mapping, intelligence gathering, community demand, advocacy and vision setting.



Policy & Practice

Formalising commitments to a prevention culture. Places, place leaders and influencers formally commit to prevention through formal documentation such as policies, strategies, standards or MOU's.



Components

Coordinating initiatives, services & resources across the system such as action plans, initiatives, supporting frameworks, rewards, incentives, toolkits or training.



Connections

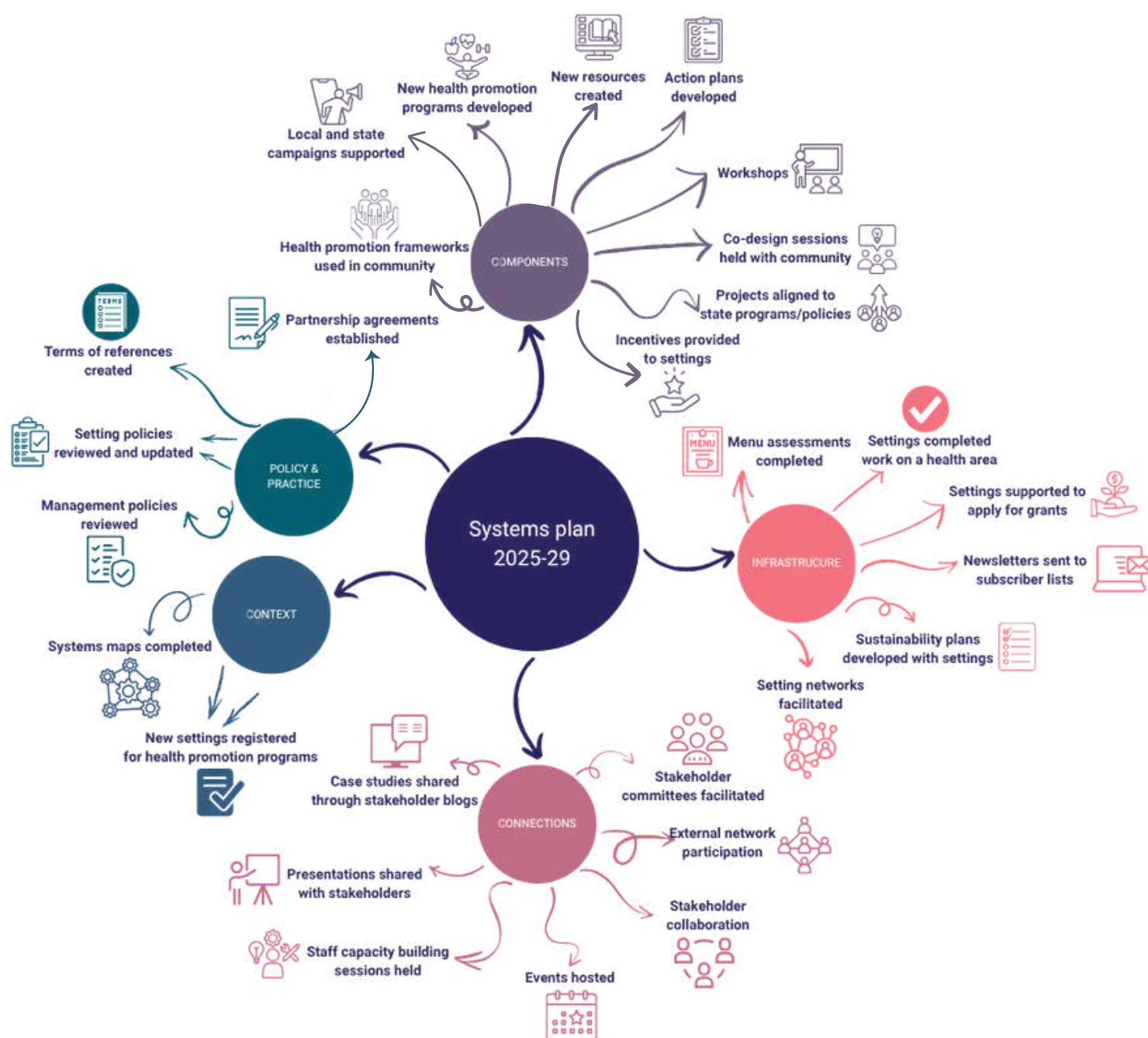
Building strong and effective linkages across the system & strengthening relationships through networks, events, communities of practice, shared decision making, shared data collection or co-design.



Resources & Supports

Committing resources, assets & supports to strengthen prevention and workforce capacity such as grants, case studies, workshops, capacity building, professional development or staffing allocation.

We influence the local prevention system by taking the following actions:



2025-2029 Priority area objectives

These objectives are in alignment with the Department of Health Victorian public health and wellbeing plan 2023-27. Furthermore, Monash Health has made health literacy a central objective across all priority areas that supports aiming to address the disadvantages and barriers experienced by our most vulnerable population groups.

Healthy eating

- Increase access, availability and consumption of a wide variety of nutritious foods, such as fruit and vegetables, as recommended by the Australian Dietary Guidelines.
- Prioritise implementation of policies that promote the uptake of healthy foods and drinks in key public settings.
- Promote healthy and more equitable, sustainable food systems across Victoria, with a focus on priority populations.
- Increase knowledge and health literacy on healthy foods and drinks.

Active living

- Increase access and opportunities for people to connect in sport and active recreation with a focus on Victorians who face barriers to participation.
- Prioritise implementation of policies that promote active living in key public settings.
- Promote movement and reduce sitting time in OSHC, schools, early years services, at home and during leisure time.
- Increase knowledge and physical literacy on the health benefits of physical activity and movement.

Reducing tobacco and e-cigarette related harm

- Prevent the uptake and reduce the harms associated with smoking and vaping, including second- and third-hand exposure.
- Prioritise implementation of policies that promote smoke and vape free environments in key public settings.
- Promote messaging, support to Quit and strengthening tobacco and e-cigarette compliance of regulation in Victoria.
- Increase knowledge and health literacy on the impacts of smoking and vaping.

Improving mental health and wellbeing

- Support community settings to promote social and emotional wellbeing through mental health activities.
- Prioritise implementation of policies that support mental health and wellbeing in key public settings.
- Increase respect, safety, connection and inclusivity in community settings.
- Increase knowledge and health literacy on mental health and wellbeing.

How we will achieve this?

Support and empower community settings to:

- Make changes to the culture and environment in settings by providing direct support to implement frameworks, such as Vic Kids Eat Well, Achievement Program, Healthy Choices, Menu Planning Guidelines, Healthy Sports Clubs and the Alternate Leisure Initiative.
- Develop or review policies that support healthier environments.
- Increase health literacy, knowledge and skills through capacity building training, workshops and physical resources.
- Create more inclusive environments to decrease barriers to participation.

Strengthen collaboration through:

- Facilitating local networks, including the Food Systems South East Network, communities of practice, and working with key partners across the catchment.

Annual Plan

2025-2026

This section demonstrates our role in delivering, supporting and coordinating preventative health initiatives to address priority areas including healthy eating, active living, reducing tobacco and e-cigarette related harm and improving mental health and wellbeing.

The delivery functions are led by Monash Health unless otherwise stated. We aim to implement sustained health promotion actions in our catchment that will have the biggest impact on health and wellbeing.

We align our functions with the Victorian public health and wellbeing plan 2023-27 and its priority areas.

This approach puts prevention at the forefront and enables people to enjoy the highest attainable standards of health, wellbeing and participation at every age.

Multi-health area approaches 2025-2026

Achievement Program

Setting:

Early years, schools.

Partners:

Cancer Council Victoria.

Health areas:

Healthy eating and oral health, physical activity and movement, mental health and wellbeing, tobacco, alcohol and other drugs, safe environments and sun protection.

Target group/equity:

Aboriginal and Torres Strait Islander communities, multicultural communities, people of low socioeconomic status, people with disabilities, people who identify as LGBTIQ+.

Timeframe:

2025-26.

Action:

- Support early years and school settings to implement the Achievement Program and achieve benchmarks and priority area recognitions.
- Support long day care services to complete a menu assessment and achieve compliance with the menu planning guidelines through one-on-one support and an incentive offer.
- Work with early years services and management companies to advocate for changes to health area policies.

Outputs:

- 14 settings supported:
 - Early years - 10
 - Schools - 4.
- 5 early years policies developed or reviewed across a range of health areas.
- 8 menu assessments completed.
- 4 health area workshops delivered to early years services to a total of 60 participants.

Planned outcomes:

- Achievement of health priority area recognitions:
 - Early years - 10
 - Schools - 4.
- Number of menus compliant with the menu planning guidelines - 4.

Alternate Leisure Initiative

Setting:

Alternate leisure businesses.

Partners:

N/A.

Health areas:

Healthy eating, inclusion.

Target group/equity:

Aboriginal and Torres Strait Islander communities, multicultural communities, people of low socioeconomic status, people with disabilities, people who identify as LGBTIQ+.

Timeframe:

2025-26.

Action:

- Support current settings involved in the Alternate Leisure Initiative.
- Facilitate two workshops on healthy eating for alternate leisure settings.
- Develop monthly newsletters for alternate leisure settings highlighting cultural holidays and significant events.

Outputs:

- 6 settings supported.
- 2 sustainability plans developed.
- 1 setting supported with incentive vouchers.
- 2 workshops delivered to a combined total of 30 people.
- 10 newsletters.
- Updated cultural calendar.

Planned outcomes:

- Number of settings actively supported to implement changes in healthy eating – 2.
- Number of settings recognised for a health area - 2.
- Achievement of active living small steps and small step categories:
 - Small step category 10 - Build knowledge of active living
 - Small step category 11 - Build confidence and skills for active living
 - Small step category 19 - Active in the community.
- 1 published research journal.

Multi-health area approaches 2025-2026

Healthy Sports Clubs

Settings:

Sports clubs.

Partners:

Local councils.

Health areas:

Healthy eating, active living, smoking and e-cigarettes, mental wellbeing, other priorities.

Target group/equity:

N/A.

Timeframe:

2025-26.

Action:

- Support currently engaged clubs and increase the number of new clubs implementing Healthy Sports Clubs.
- Support clubs to update policies or adopt new policies to support and promote the club community's health and wellbeing.
- Facilitate network meetings for clubs.
- Transfer Healthy Sports Clubs on to the Australian Sports Commission's Game Plan portal and pilot with local clubs.

Outputs:

- 25 clubs supported.
- 5 new clubs registered.
- 6 game plans created.
- 8 health area policies developed or reviewed.
- 3 network meetings held.
- 3 health area workshops delivered.
- Number of clubs involved in the pilot.

Planned outcomes:

- Number of settings supported to implement changes in healthy eating - 10.
- Number of settings recognised for a health area - 9.
- Number of settings supported to implement changes in active living - 8.
- Number of settings supported to implement changes in reducing tobacco and e-cigarette harms - 5.
- Achievement of small and big bites - 6 small bites and 2 big bites.
- Achievement of active living and tobacco and e-cigarette small steps and small step categories.

Schools' Health and Wellbeing Community of Practice

Setting:

Schools.

Partners:

Various organisations.

Health areas:

Various health areas.

Target group/equity:

N/A.

Timeframe:

2025-26.

Action:

- Deliver online quarterly Community of Practice (CoP) meetings with rotating topics of interest.

Outputs:

- 4 online CoP meetings delivered to a combined total of 93 schools.

Planned outcomes:

- Number of survey respondents self reporting:
 - The CoP was useful - 90%.
- Number of settings supported to implement changes in healthy eating.
- Achievement of active living and tobacco and e-cigarette small steps and small step categories.

Schools' Health and Wellbeing Principals' Breakfast Forum

Setting:

Schools.

Partners:

Service providers.

Health areas:

Various health areas.

Target group/equity:

N/A.

Timeframe:

2025-26.

Action:

- Deliver an in-person forum to engage school leaders in health and wellbeing priorities.

Outputs:

- 1 in-person forum delivered to at least 30 schools.

Planned outcomes:

- Number of survey respondents self reporting:
 - The forum was useful - 90%.
- Number of settings supported to implement changes in healthy eating.
- Achievement of active living and tobacco and e-cigarette small steps and small step categories.

Active living initiatives 2025-2026

Objectives

- Increase access and opportunities for people to connect in sport and active recreation with a focus on Victorians who face barriers to participation.
- Prioritise implementation of policies that promote active living in key public settings.
- Promote movement and reduce sitting time in OSHC, schools, early years services, at home and during leisure time.
- Increase knowledge and physical literacy on the health benefits of physical activity and movement.

Community Leaders Enhancing Physical Activity Participation (CLEPAP)

Setting:	Action:	Outputs:	Planned outcomes:
Community.			
Partners: City of Casey.			
Target group/equity: Women from culturally and linguistically diverse background in City of Casey.			
Timeframe: 2025-26.			
	• Upskill and support community champions to deliver physical activity programs.	• Provide training to community champion based on identified needs. • Provide one-on-one support to community champions to establish 3-6 physical activity programs.	• Number of physical activity programs delivered by community champions - 3. • Achievement of small steps and small change categories: ◦ Small step category 10 - Build knowledge of active living ◦ Small step category 11 - Build confidence and skills for active living ◦ Small step category 19 - Active in the community. • Increased self-reported feelings of social connection.

Community led activity groups

Setting:	Action:	Outputs:	Planned outcomes:
Community.			
Partners: Community leaders.			
Target group/equity: Multicultural communities.			
Timeframe: 2025-26.			
	• Support the coordination of existing and new community led walking groups. • Support creation of new activity groups.	• 6 walking groups are established and coordinated. • 2 new walking groups are initiated by community leaders.	• Achievement of small steps and small change categories: ◦ Small step category 10 - Build knowledge of active living. ◦ Small step category 11 - Build confidence and skills for active living. ◦ Small step category 19 - Active in the community.

Early Years' movement kit

Setting:	Action:	Outputs:	Planned outcomes:
Early years.			
Partners: N/A.			
Target group/equity: Multicultural children and families.			
Timeframe: 2025-26.			
	• Create and pilot a suite of physical activity and emotional regulation resources to enable early years services to embed practices into their service.	• Suite of resources created including physical activity movement ideas, emotional regulation idea cards, family resources and capacity building workshop for educators.	• Number of early years services supported to implement changes in active living – 10. • Achievement of small steps and small change categories: ◦ Small step category 10 - Build knowledge of active living. ◦ Small step category 11 - Build confidence and skills for active living.

Active living initiatives 2025-2026

Fair Access Strategy for sports clubs in recreation facilities

Setting: Sports clubs.	Approach/action: Support the development of the Cardinia Leisure Fair Access strategy.	Outputs: 1 Fair Access Strategy developed and adopted.	Planned outcomes: Number of settings supported to make changes in active living - 1.
Partners: Cardinia Shire Council, Cardinia Leisure, Women's Health in the South East.			
Target group/equity: N/A.			
Timeframe: 2025-26.			

Physical Activity and Active Recreation Equipment Loan Kit (PAARELK)

Setting: Sports clubs.	Action: Continue the PAARELK research project and pilot the loan kits at participating sports clubs.	Outputs: 7 clubs engaged in pilot project. 3 loan kits developed.	Planned outcomes: - Post observation results. - Club champion and non-player post survey results. - Number of settings supported to implement changes in active living - 7. - Achievement of small step and small step categories: - Small step category 11 - Build confidence and skills for active living. - Small step category 19 - Active in the community.
Partners: Sports clubs.			
Target group/equity: N/A.			
Timeframe: 2025-26.			

Cardinia Shire Council Falls and Injury Prevention Workshops

Setting: Cardinia Leisure facilities.	Action: Support the delivery of three falls and injury prevention workshops for older community members at Cardinia Leisure facilities.	Outputs: 3 workshops held.	Planned outcomes: - Number of settings supported to implement changes in active living - 1. - Number of attendees at each workshop. - Attendee feedback survey results. - Achievement of small steps and small step categories: - Small step category 10 - Build knowledge of active living - Small step category 11 - Build confidence and skills for active living.
Partners: Cardinia Shire Council, Cardinia Leisure, Monash Health Aged and Community Care team.			
Target group/equity: Older populations.			
Timeframe: November 2025.			

Active living initiatives 2025-2026

Contribute to regional active living initiatives

Setting:	Approach/action:	Outputs:	Planned outcomes:
Setting: All settings. Partners: South East Public Health Unit (SEPHU), Cardinia Shire Council, City of Casey, City of Greater Dandenong, community health and other prevention partners. Target group/equity: N/A. Timeframe: 2025-26.	• Support SEPHU active living initiatives and associated working groups. • Participate in the SEPHU Regional Expert Advisory Group for falls prevention and contribute to shared actions across the catchment. • Explore opportunities to partner with local councils on active living initiatives.	• Number of meetings attended.	• Number of collaborative initiatives implemented.

Healthy eating initiatives 2025-2026

Objectives

- Increase access, availability and consumption of a wide variety of nutritious foods, such as fruit and vegetables, as recommended by the Australian Dietary Guidelines.
- Reduce children's exposure to marketing of discretionary foods and drinks to reduce consumption.
- Increase knowledge and health literacy on healthy foods and drinks.

Vic Kids Eat Well (VKEW)

Settings: Outside

School Hours Care (OSHC), schools, sports clubs.

Partners: Cancer Council Victoria.

Target group/equity: N/A.

Timeframe: 2025-26.

Action:

- Support schools, OSHC and sports clubs to implement VKEW and achieve small and big bites.
- Provide incentives for settings to support engagement and progression of actions and develop revised rewards system.
- Deliver healthy eating incursions to OSHC services to engage students and educators.

Outputs:

- Number of settings supported with VKEW
 - Schools - 16
 - OSHC - 50
 - Sports clubs - 2.

Planned outcomes:

- Number of settings actively supported that have implemented or actively maintained at least one Small bite
 - Schools – 6
 - OSHC – 41
 - Sports clubs – 4.
- Achievement of small and big bites
 - Schools – 9 small and 5 big bites
 - OSHC – 111 small and 48 big bites
 - Sports clubs – 2 small and 1 big bite.

Healthy Choices

Settings: Monash

Health, recreation facilities.

Partners: N/A.

Target group/equity: Multicultural children and families.

Timeframe: 2025-26.

Action:

- Support Monash Health to achieve alignment with Healthy Choices Policy Directive for Victorian Health Services.

Outputs:

- Number of vending machines audited
 - 58 across 12 sites.

Planned outcomes:

- 100% of Monash Health vending machines will be compliant with the Healthy Choices policy directive.
- Health service to be compliant with policy directive (including having an employee healthy choices catering procedure in place).
- Monash Health to be fully compliant with mandated reporting requirements of Healthy Choices for Healthy Eating Advisory Service.

Action:

- Support Recreation Facilities with menu assessments to enable them to achieve Healthy Choices.

Outputs:

- 14 menu assessments completed.

Planned outcomes:

- Number of facilities meeting Principle 1 of the Healthy Choices Guidelines - 3.
- Achievement of small and big bites - 2 big bites and 4 small bites.

Healthy eating initiatives 2025-2026

Cooking Together Tubs

Setting: Early years.	Approach/action: Continue the rollout of the Cooking Together Tub project to early years services.	Outputs: 20 services loan a Cooking Together Tub. - Capacity building presentation created for early years services.	Planned outcomes: Number of early years services supported to implement changes in healthy eating – 20.
Partners: N/A			
Target group/equity: N/A			
Timeframe: 2025-26.			

Cook's Network

Setting: Early years.	Approach/action: Facilitate Cooks Networks to early years services to increase their capacity to provide nutritious foods to children in their service.	Outputs: 2 sessions delivered.	Planned outcomes: - Number of long day care providers supported to implement Menu planning guidelines for long day care - 8. - Number of long day care providers supported that have achieved compliance with the Menu planning guidelines for long day care - 4.
Partners: N/A			
Target group/equity: N/A			
Timeframe: 2025-26.			

Dairy Mural Project

Setting: Alternate leisure, schools.	Action: - Work with local schools to design and implement dairy murals at Myuna Farm - highlighting dairy benefits. - Work with the on-site cafe to increase dairy food and drink items.	Outputs: 1 dairy mural completed with at least 2 schools. 2 workshops with the schools on dairy benefits. 1 launch workshop at the farm.	Planned outcomes: - Number of settings supported to implement changes in healthy eating - 1. - Achievement of small and big bites - 3 small bites. - Number of new dairy items added to cafe menu - 2 drinks and 2 foods. - Increase the knowledge of community members and school children on the benefits of dairy food and drink items. - Dairy mural influenced community members' dairy intake.
Partners: Myuna Farm			
Target group/equity: Multicultural children and families.			
Timeframe: Ongoing.			

Farm to school

Settings: Schools, local farms.	Action: Explore feasibility of a farm-to-school program with 1 school and 1 local farm.	Outputs: Farm to school program facilitated.	Planned outcomes: Teacher reports farm-to-school program added to student learning and that students were more likely to try fruit or vegetables as a result of the program.
Partners: Myuna Farm.			
Target group/equity: Multicultural children and families.			
Timeframe: 2025-26.			

Healthy eating initiatives 2025-2026

Food activity resource booklet

Setting: Schools, OSHC.	Action: Develop a food activity resource booklet for schools and OSHC to support Vic Kids Eat Well and positive language around food.	Outputs: 1 booklet developed.	Planned outcomes: Case study from at least 1 school and 1 OSHC captured, indicating the resource is useful and applicable to setting and they would recommend the resource to colleagues.
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Food from Home

Settings: All settings and community groups.	Action: Provide support for Food from Home social marketing posts, to encourage local communities to grow their own fruit and vegetables and overcome barriers to healthy food access.	Outputs: 40 social media posts. 6 blog posts.	Planned outcomes: Number of people reached, people engaged, impressions, new followers and growth during financial year.
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Food systems network

Settings: Community health, local councils.	Action: Lead the local food systems network, providing opportunities for information sharing and collaboration.	Outputs: 3 network meetings held.	Planned outcomes: - Number of survey respondents self reporting: - The network has better enabled them to share information with key partners - 80% - Most significant change.
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Healthy eating initiatives 2025-2026

Healthier Partnerships Project

Settings: Sports clubs.	Action: Continue the pilot project and support sports clubs to create action plans to embed healthy practices and secure healthier sponsors.	Outputs: 4 sports clubs working towards completing Healthier Partnerships. 4 action plans created. 2 policies adopted.	Planned outcomes: - Number of settings supported to implement changes in healthy eating - 4. - Number of small bites achieved - 2. - Number of new sponsors. - Pre and post survey results with club champions.
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Nutrition Resource Pack

Setting: Early years.	Action: - Expand the reach of the Nutrition Resource Pack (NRP) project with early years services and share resources with external health organisations. - Present evaluation findings of NRP project at an upcoming conference to share learnings.	Outputs: - Number of new early years services implementing NRP - 12. 1 capacity building workshop delivered for services. 1 capacity building workshop delivered for stakeholders from other health organisations.	Planned outcomes: - Number of services supported to make change in healthy eating - 12. - Number of external health organisations utilising the NRP to support their local settings - 3.
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Nutrition Training

Settings: Community setting or group.	Action: Deliver capacity building training to community settings to embed nutrition knowledge, enabling settings to achieve health promotion action.	Outputs: 12 nutrition presentations with at least 60 participants. - Increased attendee knowledge and confidence in nutrition and providing healthier food and drink options.	Planned outcomes: - Number of survey respondents self-reporting: - Increased knowledge after training - 60%. - Increased skills/ confidence after training - 50%. 1-3 months post training have utilised knowledge gained in training sessions - 50%. 60% of surveyed health promotion staff reported feeling the training delivered acted as an incentive or reward to continue further engagement/participation of the involved setting(s).
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Tobacco & e-cigarettes initiatives 2025-2026

Objectives

- Prevent the uptake and reduce the harms associated with smoking and vaping, including second- and third-hand exposure.
- Prioritise implementation of policies that promote smoke and vape free environments in key public settings.
- Promote messaging, support to Quit and strengthening tobacco and e-cigarette compliance of regulation in Victoria.
- Increase knowledge and health literacy on the impacts of smoking and vaping.

Smoke & Vape free signage and messages

Setting: Recreation facilities, schools, sports clubs.	Action: • Support recreation facilities to update their existing smoke-free signage. • Support recreation facilities to disseminate education material/messages about smoking and vaping.	Outputs: • 2 recreation facilities supported with updated signage. • 4 recreation facilities supported with educational material/messages.	Planned outcomes: • Number of settings supported to implement changes in tobacco and e-cigarette prevention - 2. • Achievement of tobacco and e-cigarette small steps and small change categories: ◦ Small step category 5 - Voluntary smoke-free environments. ◦ Small step category 7 - De-normalise smoking and vaping (from e-cigarettes). ◦ Small step category 9 - Build knowledge and self-efficacy to stop smoking or vaping.
Partners: N/A.			
Target group/equity: N/A.			
Timeframe: 2025-26.			
	Action: • Provide updated 'no smoking and vaping signage' as an incentive for schools that engage with our team on wellbeing priorities.	Outputs: • 10 schools supported with updated signage.	Planned outcomes: • Number of settings supported to implement changes in tobacco and e-cigarette prevention - 10.
	Action: • Provide updated 'no smoking and vaping' signage to sports clubs as an incentive to create a smoke and vape free policy and share smoking and vaping cessation information.	Outputs: • 5 clubs supported with updated signage. • 5 tobacco and e-cigarette policies developed or reviewed.	Planned outcomes: • Number of settings supported to implement changes in tobacco and e-cigarette prevention - 5. • Achievement of small steps and small change categories: ◦ Small step category 5 - Voluntary smoke-free environments. ◦ Small step category 7 - De-normalise smoking and vaping (from e-cigarettes). ◦ Small step category 9 - Build knowledge and self-efficacy to stop smoking or vaping.

Tobacco & e-cigarettes initiatives 2025-2026

Outer Eastern Football Netball values-based messaging project

Setting:	Action:	Outputs:	Planned outcomes:
Sports clubs.			
Partners: Eastern Health, GoodSports, Outer Eastern Football Netball (OEFN).			
Target group/equity: N/A.			
Timeframe: 2025-26.			
	Create and disseminate values-based messaging on smoking/vaping and alcohol to OEFN clubs by holding an education workshop in collaboration with Good Sports, providing updated policies, no smoking and vaping signage and cessation packs.	4 clubs engaged in the project. - Number of clubs who attended workshops. - Number of clubs who disseminated the values-based messaging assets. - Number of tobacco and e-cigarette policies developed or reviewed.	- Workshop survey results. - Achievement of small steps and small change categories achieved: - Small step category 5 - Voluntary smoke-free environments. - Small step category 7 - De-normalise smoking and vaping (from e-cigarettes). - Small step category 9 - Build knowledge and self-efficacy to stop smoking or vaping.

Vaping Education research and incursions

Setting:	Action:	Outputs:	Planned outcomes:
Schools.			
Partners: N/A.			
Target group/equity: N/A.			
Timeframe: 2025-26.			
	- Investigate train-the-trainer models to support Quit's vaping curriculum. - Pilot incursions among Year 5/6 students to support smoking and vaping prevention.	1 model investigated. 2 incursions delivered.	- Number of settings supported to implement changes in tobacco and e-cigarette prevention - 2 - Achievement of small steps and small change categories - Small step category 7 - De-normalise smoking and vaping (from e-cigarettes). - Small step category 9 - Build knowledge and self-efficacy to stop smoking or vaping.

Contribute to regional reducing tobacco and vaping related harm activity

Setting:	Action:	Outputs:	Planned outcomes:
All settings.			
Partners: South East Public Health Unit (SEPHU), local councils, community health and other prevention partners.			
Target group/equity: N/A.			
Timeframe: 2025-26.			
	- Participate in the SEPHU Regional Expert Advisory Group and contribute to shared actions. - Participate in the Local Drug Action Team (LDAT) for City of Greater Dandenong. - Explore opportunities to partner with local councils on tobacco and vaping related initiatives.	Number of meetings attended.	Number of collaborative initiatives.

Improving mental health and wellbeing & other priority initiatives 2025-2026

Objectives

- Support community settings to promote social and emotional wellbeing through mental health activities
- Prioritise implementation of policies that support mental health and wellbeing in key public settings
- Increase respect, safety, connection and inclusivity in community settings
- Increase knowledge and health literacy on mental health and wellbeing.

Contribute to regional mental health and wellbeing activity

Setting:	Action:	Outputs:	Planned outcomes:
All settings.	• Explore opportunities to partner with local councils on improving wellbeing, social connection and inclusion. • Identify where our work aligns with the Wellbeing in Victoria strategy 2025-2035 and explore opportunities for collaboration with partners to promote mental health.	• Number of meetings attended.	• Number of collaborative initiatives.
Partners: Local councils, community health, South East Public Health Unit (SEPHU) and other prevention partners.			
Target group/equity: N/A.			
Timeframe: 2025-26.			

Gender Equity Resource Tubs

Setting:	Action:	Outputs:	Planned outcomes:
Early years.	• Continue the rollout of the Gender Equity Tub project to early years services.	• 10 services have loaned a Gender Equity Tub.	• Number of services that have used the GE resource tub, with educators reporting increased confidence and knowledge in challenging gender stereotypes and creating more inclusive learning environments - 10
Partners: Fvree From Family Violence (FVFREE).			
Target group/equity: Multicultural children and families.			
Timeframe: 2025-26.			

Appendix 1: Alignment of priorities with key local partners

	Healthy eating	Active living	Reducing tobacco related harm	Mental wellness and other
Cardinia Shire Council	Increase consumption of nutritious and sustainably produced food.	Increase participation in walking, cycling, active and passive recreation among underrepresented groups.	Decrease exposure to and uptake of smoking, vaping, gambling and harmful alcohol and drug use. Decrease short and long-term harm from tobacco, vaping, gambling, alcohol and drug use, on individuals and communities.	Increase community sense of belonging, inclusion and acceptance. Increase equitable opportunities for civic participation and diverse leadership through volunteering and programs.
City of Casey	Healthy eating and active environments.	Healthy eating and active environments.	Tobacco, vaping, alcohol and gambling harm.	Connection and participation. Community empowerment.
City of Greater Dandenong	Improving access to health information and service awareness, including increasing healthy eating and food security.	Increasing participation in physical activity opportunities, including access to parks, playgrounds and open spaces.	Improving access to health information and service awareness, including...reducing harmful tobacco/vaping and other drug use.	Social connection and wellbeing - Improving mental wellbeing and a sense of community, including liveability and health promoting public spaces as well as community connection and events.
South East Public Health Unit		Improving active living. Preventing hospital admissions due to falls.	Reducing vaping (e-cigarette) and tobacco use and related harms.	
Women's Health in the South East (WHISE)	Size-inclusive practice.	My body, my voice.		

Appendix 2: Impact measures

Healthy Eating

1. Number of specified settings that the CH-HP program provider has actively supported to implement changes in healthy eating.
2. Number and proportion of specified settings that the CH-HP program provider has actively supported that have implemented or actively maintained at least one small bite.
3. Number of small bites achieved or actively maintained in specified settings actively supported by CH-HP program providers.
4. Number of big bites achieved in specified settings actively supported by CH-HP program providers.
5. Number of ECS (long day care providers) that are actively supported by CHHP program providers to implement Menu planning guidelines for long day care.
6. Number and proportion of ECS (long day care providers) that are actively supported by CH-HP program providers that have achieved compliance with the Menu planning guidelines for long day care.
7. Number of PHS that are actively supported by CHHP program providers to implement Healthy choices: policy directive for Victorian public health services.

Tobacco & E-cigarettes

1. Number of specified settings that the CH-HP program provider has actively supported to implement changes in tobacco and e-cigarette prevention.
2. Proportion of settings that have developed or reviewed a written tobacco and e-cigarette policy while being actively supported by CH-HP program providers.
3. Number and proportion of settings that the CH-HP program provider has actively supported that have achieved change in at least one small change category.
4. Number of small change categories where achievement has been made in settings actively supported by CH-HP program providers.
5. Number and proportion of small change category achievements made in settings targeting potentially vulnerable and disadvantaged in settings that were actively supported by CH-HP program providers.

Active Living

1. Number of specified settings that the CH-HP program provider has actively supported to implement changes in active living.
2. Number and proportion of settings that have developed or reviewed a written active living policy while being actively supported by CH-HP program providers.
3. Number and proportion of settings that the CH-HP program provider has actively supported that have achieved change in at least one small step category.
4. Number of small step categories where achievement has been made in settings actively supported by CH-HP program providers.
5. Number and proportion of small step category achievements made in settings targeting potentially vulnerable and disadvantaged in settings that were actively supported by CH-HP program providers.

