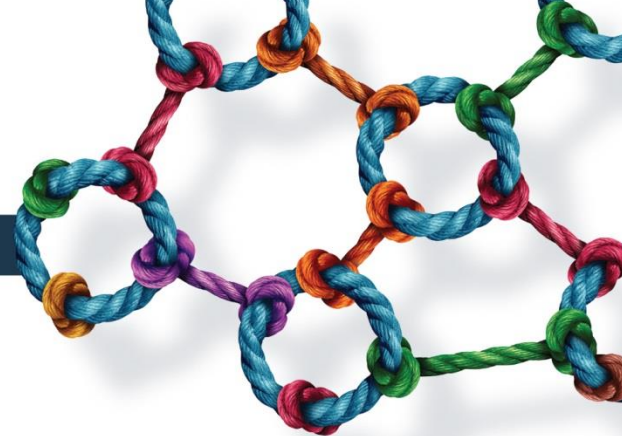


ANTICIPATORY CARE PROJECT

ACTION LEARNING TO IMPROVE HEALTH IN TASMANIAN COMMUNITIES

Newsletter No. 5 – July 2020



FOUR TASMANIAN COMMUNITIES LEADING THE WAY IN ANTICIPATORY CARE

The Tasmanian Department of Health (DoH) in partnership with the University of Tasmania (UTas), The Australian Prevention Partnership Centre (TAPPC) and four Tasmanian communities is involved in a project focusing on anticipating chronic conditions.

The four communities involved are Ulverstone, Flinders, Clarence and the northern suburbs of Launceston. These communities were identified as key locations to focus on learning about what can be done at the local level to help people stay well in their community with less need for hospital and acute clinical services.

This newsletter highlights some of the great outcomes and learnings that are emerging after 18 months of working to improve health in their local communities.

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Back:
Prof Judi Walker, Alison Oliver, Fakington Wilde, Emily McKinnon, Michael Monticchio,

Front:
Tom Galpin, Georgia Axton

Image courtesy of TAPPC
preventioncentre.org.au/news-and-events/prevention-centre-news/how-four-tasmanian-communities-are-leading-the-way-in-anticipatory-care/



This project is funded by the Australian Government through the National Partnership Agreement on Improving Health Services in Tasmania



The Australian Prevention Partnership Centre
Systems and solutions for better health



Institute for the Study of Social Change

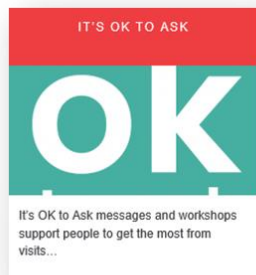


Clarence

Adaptation and future planning

In February this year, Madfinch Consulting completed an evaluation finding that Help to Health has assisted Clarence residents to find out what health services and supports are available and to be more confident in navigating the health system. Relationships have been built between organisations and they are sharing more information and working better together to improve health and wellbeing for the community.

With funding for the project coming to an end and the challenges of COVID-19, the team has had to rethink how to deliver many of the activities. The popular Clarence Talks are now being delivered online and the H2H Leadership Group is exploring other ways to continue and further develop the H2H program. A new Facebook Group, the *Clarence Service Online Forum* is being developed to help services connect and better help the community.



Our next Talk is *Helping your child cope with anxiety* with Anja Zimmermann, Founder Calm Kidz Program. This will be live streamed to the [Live Clarence Facebook page](#).

Our next **Help to Health Friends Meeting** will be after this talk at 11:30am. Friends will receive an invite for Microsoft Teams.

SAVE THE DATE!

Findings from the Clarence H2H project will be presented at an online meeting being held at 9 am on 6th August 2020.

Contact us:
 email: helptohealth@ccc.tas.gov.au
 phone: 0438 096 465
 visit: www.liveclarence.com.au



Connecting Care - Ulverstone

A Healthy, Educated and Connected Community

The newly formed Central Coast Connecting Care Roundtable met on 30th June 2020 to wind up the DoH funded Anticipatory Care project. The project has left a lasting legacy. The group believes that Connecting Care model can be translated to other communities.

At the meeting, members reflected on the shifts that occurred during the project including:

- a more community-driven approach to improving health;
- the importance of 'local' rather than a one-size fits all approach;
- the opportunity to create a recognisable Connecting Care brand and a wealth of resources to support community health and wellbeing into the future.

The impacts of COVID-19 on the project and community more broadly were discussed as well as the important facilitation role of Council and the need for decision-makers to include a health and wellbeing focus.

Under the leadership of the new Roundtable, work will continue on the Connecting Care portal, the local resource directory and a range of health literacy initiatives. Connecting Care has a broad vision for the future – to create a healthy, connected Central Coast community.

A community forum to present the findings and recommendations from the Connecting Care project will be held at the Gnomes Room, Pier 1 on Tuesday 25 August 12 – 1.30 pm.

www.connectingcasetas.com.au

www.facebook.com/connectingcasetas



More information?

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Flinders Island

Cultural competency

Cultural safety was identified as a priority project for *Our Health Our Future* from the surveys conducted, through research, focus groups and from the Causal Loop Analysis workshop. Then along came the global pandemic COVID-19 and plans were altered. The project engaged Evolve Communities to deliver cultural competency training online. There were 2 x seven sessions delivered; Group 1 for staff at Flinders Island Aboriginal Association Inc (FIAAI) and Group 2 for staff from hospital, school, GP clinic and council with a total of 50 participants.



Our sincere thanks to everyone who has contributed. We acknowledge the emotional toll for our Aboriginal leaders revisiting history to be able to inform others.

More information is available at
www.facebook.com/ohofflindersisland/
 or
<https://ohof.com.au/>

Alcohol Awareness



Throughout the project the team have looked at providing resources around alcohol awareness. The overwhelming success of the poster competition has produced hats, bags, postcards and banners. We have also put together education packs for the hospital, Flinders and Cape Barren Island school, GP clinic and FIAAI, delivered face to face training and written articles for the local newspaper.

Next steps:

The team are writing up the evaluation of the Cultural Competency initiative and working on a final report for all the other activities that have been delivered.

The findings from *Our Health, Our Future* will be reported back to the Flinders community at an event to be held in late July/early August.



Northern Suburbs of Launceston

Hi everyone!

I'm Bethany Amari and I am based at Starting Point Neighbourhood House. I am excited to be part of this extremely important project. I wish to focus on empowering community members to acknowledge that their health is important and that they do have access to support.



I am excited to see how the Launceston Area Advisory Group (LAAG) is going to progress into the future. I feel it's critical that all service providers are on the 'same page' when it comes to supporting community members. It will build trust and respect for those providing and receiving care and support.

Hopefully we will see less people falling into the gaps of not being able to access quality care that would prevent chronic conditions due to cost and availability. And, for those who have ongoing chronic conditions that you feel supported and have easy access to the care you require.

I'm excited to announce that based on the success of Adventure Play in 2019, the Australian Government has provided funding to continue and expand the program across the northern suburbs for the next two years.

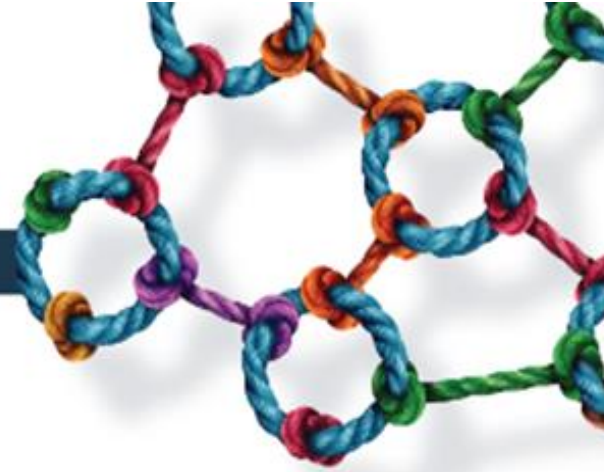
We are also having conversations with local services in Ravenswood area about collaborating and art installations with the community.

I am planning to have a "cooking on a budget education session" run by Susannah from Chat Tas as well as a Yoga – Gentle stretch activity that will run weekly at Starting Point Neighbourhood House.

I been able to promote the rent-a-bed initiative - community members can rent out a garden bed in the MACS garden. This gives access to community members who may not have the space or skills to be able to grow fresh, spray free produce.

Bethany
Health and Wellbeing Project
Starting Point Neighbourhood House
E: Bethany.amari@ravenswood.org





Fakington Wilde, Councillor Janie Finlay and Georgia Axton got together to discuss ongoing changes and needs regarding bus routes for the northern suburbs.

Health, Visual Arts and Advocacy

At Northern Suburbs Community Centre, the team has delivered a broad range of projects, including Boom Adventure Play, working with Metro Tas to promote and improve local bus transport, and other projects like the pictured artwork here. Four panels have been created by different groups, including the “Peeps and Peeps 2.0” after-school groups, Mowbray Heights Primary students and a mix of young people from across the community during Youth Week celebrations. The artwork is to be installed at the entry of Mowbray Medical to celebrate, encourage and nurture the connection between our local health services and the community.

The Our Community, Our Care (Anticipatory Care project) officially ended on 30th June 2020, but the team plan to continue many projects and activities including strengthening the Local Advisory Group as an advocacy forum to help connect and unify a strong local voice aimed at improving the liveability and general health and wellbeing of residents across the northern suburbs.

A presentation about our findings and learnings is available at <https://youtu.be/Prj4iMHMOI>



Artwork by young people from Mowbray Heights Primary School and the Peeps after school group.



www.facebook.com/ourcommunityourcare



Review of the AC Framework

The Anticipatory Care (AC) Framework guided the development of the overall AC project.

The Framework is evidenced based and emerged from a discussion paper designed to adapt the UK model of Anticipatory Care to a Tasmanian context. As the Anticipatory Project draws to an end it is timely to consider the veracity and relevance of the AC Framework.

Flora Dean, Susan Banks and Therese Riley have been reviewing the Framework; mapping the actions of participating communities onto the Framework and discussing gaps.

Whilst far from finished, the review so far has highlighted the need to:

1. Expand the system boundary from health care to community care

The current AC Framework is orientated towards traditional notions of a 'health care system'. One based on a medical model of care concerning individual patients and health care providers. However, this orientation renders invisible the work of other professionals and organizations in community contexts that focus on community wellbeing. By community wellbeing we are referring to initiatives and efforts designed to improve the daily lives of community members. This often means tackling issues more closely aligned with the Social Determinants of Health, such as, food security, discrimination and poverty.

By expanding the boundary of the AC Framework to be inclusive of a wider range of professionals, organizations and practices, Anticipatory Care will more closely reflect the complexity of people's lives. In practice, this means modifying the language in the framework to be more inclusive of multi sectorial involvement in the health and wellbeing of communities.

2. Re-imagine enablers of Anticipatory Care

Strengthening a local Anticipatory Care system pays attention to amplifying enabling conditions. However, the medical orientation of the Framework leads to a limited interpretation of each of the enabling factors outlined in the AC Framework. For example, 'Health Workforce' excludes volunteers, NGO staff, teachers, shop owners etc. The AC project has shown that the work of people outside the health sector may be just as important as health professionals to the health of community members.

3. Expanding Priority Areas to Reflect the Dynamics of the AC system

The priority areas outlined in the AC Framework reflect a person-centred model of care. This is an important approach that acknowledges the rights of people to be at the centre of decision-making regarding their own health. However, this approach doesn't take adequate account of the broader contextual factors that influence health and make up the AC system in communities. We recommend the inclusion of three new priority areas:

- Place and Identity – Understand the cultural and narrative history of a community and how this influences health and wellbeing
- Shared Goals and Values – work together to identify shared goals (values and language) that can align the system (individuals and organisations) to improve health
- Adaptability and Agility – a way of working that understands that systems evolve and change. Individuals and organizations need to be strategically opportunistic to manage this change.



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Change**

So much to learn!

The local Anticipatory Care projects in Ulverstone, Clarence, the northern suburbs of Launceston and Flinders Island are now winding up.

UTas is finalising reports for each participating site.

Early in the project, through local mapping, consultations and data gathering, themes for change and action were identified in each community. The final reports will provide analyses of how each community delivered activities to address these local health themes and what changes have occurred over the life of the project to the local AC system.

Susan Banks, PhD

**Senior Research Fellow,
Anticipatory Care Project**

www.utas.edu.au/profiles/staff/sociology/susan-banks

“We used action learning and systems thinking. Action learning is participatory and invites people affected by a phenomenon to work together to learn about it, to make sense of what its causes might be, and to try different ways to improve the situation.

To understand the AC system, we gathered and analysed quantitative and qualitative data from, and about people, who live or provide services in the ...site. We wanted to know how they understood health, about their experience of the health system, and what supports or gets in the way of health for people here.

Our analysis helped us to understand what makes up the AC system in (each) community... Then we used a systems thinking tool, causal loop analysis, to explore... how parts of the system affect one another, and to find opportunities where acting on one part of the system might have the greatest benefit for the whole system.

Themes for action and change

Clarence



Geographical and physical barriers

Unwillingness to 'cross the bridge' (go outside own geographical area or 'village'), coupled with lack of transports options

Emotional or psychological barriers

Access relies on people trusting and feeling safe in the services or facilities that support their health

Resource barriers

For some, the cost of a non-bulk-billed GP visit is prohibitive
Competitive funding, short-term contracts, and business models leave no room for outreach or collaboration

Social disconnection barriers

Involvement with your community or peers, and knowledge of what is available; people want to see familiar health or social care providers

Ulverstone and the 7315 area



Beliefs and attitudes

Individual and organisational beliefs and attitudes about health and the health and social care system

Navigating the system

The need for accessible health and social care information to navigate the system for both service providers and people who have or may experience chronic conditions

Connection

Better collaboration and communication among those involved in providing anticipatory care activities

Northern Suburbs of Launceston



Safety

All parts of the anticipatory care system need to be physically, emotionally and psychologically safe

Access

Stigma, a lack of resources, exclusion and restriction stop people from benefiting.

Connection

Connection and collaboration between the parts of the system and the people in it are necessary

Resources

The system relies on resources. People need financial and other resources, and the services need to be there

Flinders Island



Processes

...coordination, coherence, connection, and collaboration and the problems of a system that is fragmented by isolation, distance, and the mix of service models each with their own processes

Access

The findings show that exclusion or restriction, isolation, and emotional and physical risk are barriers to effective anticipatory care. We need to ensure that options are culturally, emotionally, and psychologically safe

Relationships

Relationships appear to be the core of effective anticipatory care here... relationships can be supported by processes, and are foundational to access, safety and connectedness

For more information about the Anticipatory Care Project:

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