



Health Promotion Action

2018-2019
Year in Review



Health
Central Coast
Local Health District



Directors Report

Welcome to another year of the Central Coast Health Promotion Service's work and achievements.

Each year our annual report focuses on a theme or principle that underpins our work. Previous editions have focussed on partnerships and advocacy. This year is all about how we research and evaluate our work, and how we are growing the capacity of our team in this area.

Health Promotion has a strong track record in evaluating our work to ensure we are delivering the most effective and efficient health promotion projects. On display is a demonstration of how the team integrate this into all projects - with all the challenges of 'real world' evaluation, where there often has to be some creativity and lateral thinking to achieve the outcomes we aim for.

I invite you to read about our flagship research project - Thirsty? Choose Water! - which aims to encourage young people to swap sugary drinks for water. This project has grown from the seed of an idea initially piloted on the Central Coast, then tested in Illawarra Shoalhaven Local Health District, before being awarded Translational Research Grant Scheme funding for two years to be delivered in 61 schools across three Local Health Districts. Following successful implementation, this project has now secured further funding to test the approach in two regional Local Health Districts through the Medical Research Future Fund (MRFF).

We have significantly increased links with our Research Office and have been very busy in disseminating our work. Over the past 12 months we have had six quality improvement projects

approved, fifteen presentations at conferences and seminars, one journal article accepted in the Health Promotion Journal of Australia, earned two Central Coast Local Health District (CCLHD) Quality Awards, and submitted four projects to the 2019 Premier's Awards and NSW Health Quality Awards.

To continue to evolve and improve our capacity in research and evaluation, we have prioritised significant professional development opportunities and sought out new partnerships to further strengthen the skills we have across our whole team.

It has been another busy year as we evolve with shifting priorities and challenges. However, as always, the Health Promotion team has responded with the energetic passion, commitment and professionalism that continues to define our approach. I thank the whole team sincerely for their hard work and hope you enjoy reading about the contribution we make towards improving the health of the Central Coast community.

**Director
Health Promotion
and Population Health Improvement
Central Coast Local Health District**

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Students were surprised at how much sugar was in drinks. After the lessons more students could identify how long it takes to “walk off” a can of soft drink (90 minutes) and identify the effects of dehydration by checking the colour of their wee!

After one year more than 167,196.5 litres of water was consumed from the 31 chilled water stations. This would overflow a 6-laned, 25m swimming pool.



After intervention, the percentage of students who reported carrying a water bottle every day increased from 50.93% at baseline to 54.01%. A proportion of students reported a decrease in Sugar Sweetened Beverage consumption at home and after sport.

Thirsty? Choose Water!

A Translational Research Grant Scheme (TRGS) Research Project

Why are we doing this?

Can a behavioural intervention and chilled water stations, alone or combined, increase water consumption and affect changes in students' knowledge, attitudes or consumption of Sugar Sweetened Beverages (SSB) in year 7 secondary school students?

The Thirsty? Choose Water! research project promotes drinking water by installing chilled water stations and providing supporting education in secondary schools. It aims to increase students' water consumption and displace or reduce Sugar Sweetened Beverage (SSB) consumption.

How did we do it?

The project is a randomised controlled trial and uses a two by two factorial study design to see if education alone or combined with providing chilled water stations makes a difference to secondary students knowledge and behaviour in regards to their water and SSB consumption.

The project has been offered to secondary schools across the Central Coast, Illawarra

Shoalhaven and South Western Sydney Local Health Districts (LHDs). It is now being offered in 2 regional areas for 2019-2020 - Mid North Coast and Hunter New England LHDs.

Achievements

- 61 schools from 3 LHDs took part in the research project
- All 61 participating schools now have chilled water stations installed
- Over 60% of year 7 students completed the online survey
- School Immunisation Nurses were engaged from the 3 LHDs to support the 'drink water' message in the 15-minute waiting period after vaccination by providing pull up banners and a board game for students to play
- Website material was added and updated to reflect information needed by the schools to support the research
- More than 365,000 litres of water were consumed from 31 chilled water stations after one year

- Some schools recorded over 20,000 water bottle refills
- Water is the drink of choice on a daily basis for most young people surveyed
- In the intervention group, a statistically significant reduction in the daily consumption of SSB was seen from Time 1 to Time 2.
- An increase in the number of students who reported carrying a water bottle every day
- Most teachers found the lessons and resources 'very useful' or 'useful' and would teach the content again.
- Students knowledge increased after the lessons: for example, more students could correctly identify how long it takes to 'walk

off a can of soft drink (90 minutes) and the effects of dehydration on the colour of their wee!

Partners

- South Western Sydney Local Health District
- Illawarra Shoalhaven Local Health District
- Secondary schools in the 3 LHDs
- NSW School Infrastructure - Hunter Central Coast, Illawarra and South West Sydney
- Thirsty? Choose Water! Advisory Group

For more information, go to:

www.choosewater.com.au



Activate Your Space

Why are we doing this?

Does reactivating under-utilised outdoor space increase physical activity opportunities, and lead to a more physically active community?

Activate Your Space aims to increase physical activity in local communities by encouraging the use of outdoor environments. The project targeted families with children aged 16 years and under living in the North Wyong postcodes of 2262 and 2263, and in particular, those who are insufficiently active.

Phase 1 of Activate Your Space involved starting a weekly parkrun event at San Remo, using the existing shared pathway which hugs the picturesque Budgewoi Lake.

Parkrun is an organisation that offers free weekly 5km walk or run events in 360 Australian locations. The parkrun model was considered favourable for Activate Your Space because it has proven sustainability, high participation, encourages community connectedness, and is open to everyone.

How did we do it?

A literature overview provided insight into strategies to increase the use of outdoor space, participation in physical activity, the concept of 'place making', and the use of infra-red technology.

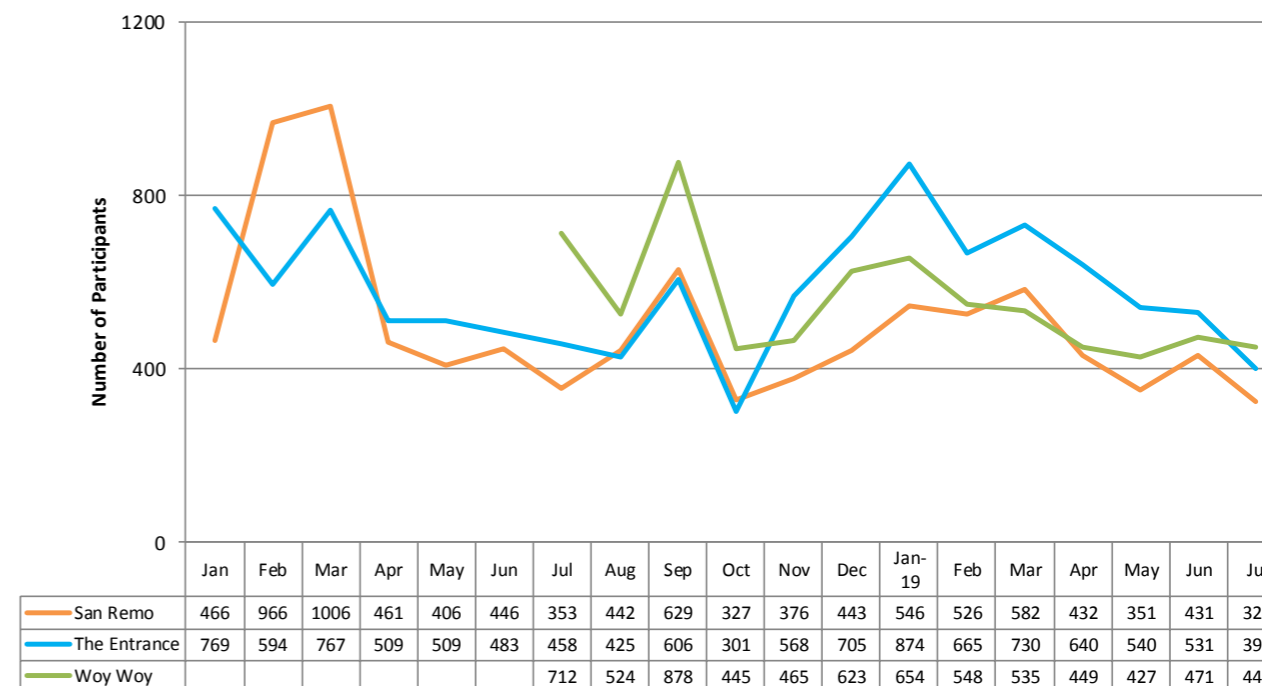
Stakeholder consultations within the San Remo community helped to assess both the community interest in participating in a weekly parkrun event and the best site to host a parkrun. Partnerships were formed with parkrun, the San Remo Neighbourhood Centre, and Central Coast Council, which facilitated the implementation of the San Remo parkrun and its ongoing promotion.

Marketing activities included:

- Social media promotion on Facebook and Instagram.
- Promotional flyers delivered to over 7000 homes in San Remo/ Blue Haven (2262).
- Cross promotion of parkrun at the PDHPE Network and Go4Fun program in Blue Haven.

Figure 1

Monthly Participation at Central Coast parkruns 2018-2019



Infra-red people counters and onsite visual observations were used as objective measures to determine if parkrun contributed to an increase in overall pathway traffic:

- Infra-red sensors recorded the daily number of pathway users by time of day for 12 months. Sensors were installed on the San Remo shared pathway and a comparison pathway at Chittaway Bay.
- Onsite visual observations counted the number of people by sex, estimated age, transport mode, time of use, and whether people were alone, in a group, walking a dog, or pushing a pram. Counts occurred seasonally on 8 separate occasions between December 2017 (baseline) and December 2018.

Achievements - parkrun

Outcomes for parkrun were measured by analysing data from parkrun participants to examine:

- Number of weekly participants

- Proportion of participants by age-group, postcode, and estimated physical activity level.

- Comparison with attendances at other parkruns

Parkrun successfully attracted the intended target group:

- 43% of participants were from the 2262 and 2263 postcodes. Another 38% were from nearby 2259.
- 26% were young people (<=17 years) and 44% were 30-49 years (likely being children and parents)
- 71% were estimated to be insufficiently active at registration.

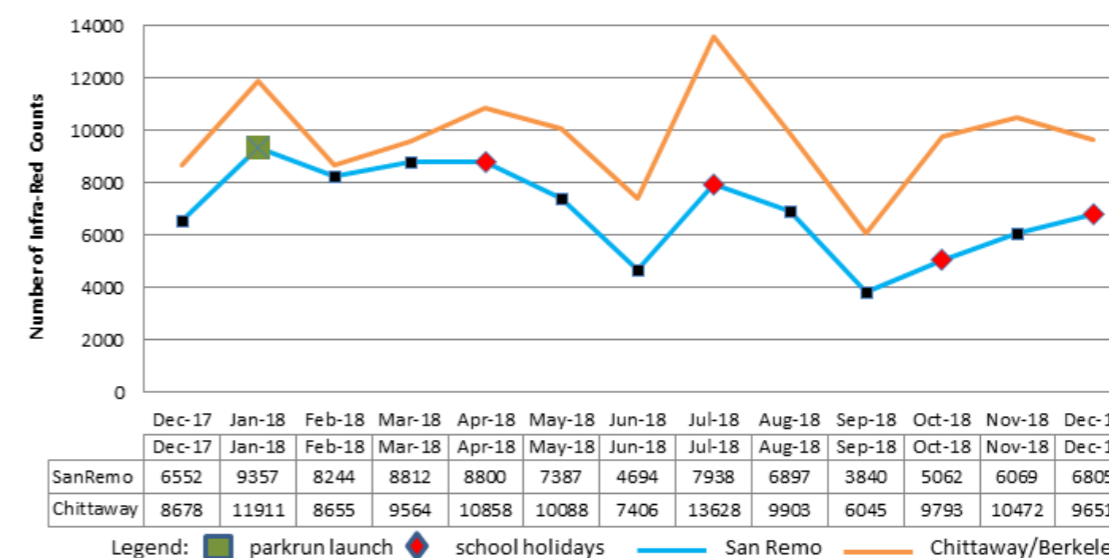
Monthly participants ranged from a minimum of 327 in October 2018, to a maximum of 1006 in March 2018. Participation appears to be largely influenced by the weather, with higher participation in warmer months. Other Central Coast parkruns follow a similar pattern.



Figure 2

Monthly Participation Traffic by Infra-Red Count over 12 months

San Remo (intervention) and Chittaway (comparison) Shared Pathways



Achievements – pathway traffic

Pathway usage at both San Remo and Chittaway Bay fluctuated similarly, with increases during school holidays and decreases in colder weather (except July). See figure 2.

At the 12 month follow up, there was a small increase in overall pathway usage at both San Remo and the comparison site. The unexpected increase at the comparison site was likely due to the installation of a new children’s playground in July 2018.

A total of 1720 pathway users were observed on the 8 separate observation days. Walking was the most commonly observed transport mode (58% of pathway users), followed by cycling (33%).

A more detailed pathway usage report of the infra-red monitoring and observed counts is available from the Health Promotion Service.

This evaluation suggests that increasing the use of outdoor space requires multiple strategies.

Strengths

- Stakeholder consultation gains local knowledge and support
- Infra-red sensor count gives accurate trends of pathway traffic
- Objective and qualitative measures combined adds depth to results and future directions

Look out for...

Future work will explore other initiatives to increase outdoor space usage and may include: assessment of playground usage, follow up physical activity profile of insufficiently active parkrun participants, implementation of parkrun in other locations, and installation of exercise equipment along the San Remo shared pathway.

Partners

- parkun
- Central Coast Council
- San Remo Neighbourhood Centre



The Active Over 50 program

Why are we doing this?

For two decades, Central Coast older adults enjoyed the benefits of Active Over 50. This physical activity and falls prevention program was initiated and coordinated by the Health Promotion Service between 1996 and June 2017. It offered over 100 organised physical activity classes each week in 30 venues, and was delivered collaboratively with fitness centres and fitness providers in the community. Classes included aqua fitness, ballroom dancing, gentle exercise, strength training and tai chi. Annual attendances peaked at 58,000 in 2009. Over this time, the program evolved and improved into a product of high demand

How did we do it?

When the program first started, falls prevention and physical activity programs for older adults were non-existent, particularly in fitness centres; specialised fitness instructor training was lacking; and availability of physical activity programs into which allied health staff could refer clients was limited.

Strong partnerships and collaboration changed the physical activity landscape on the Central Coast. This included the Health Promotion Service and Fitness Australia, the local fitness industry, fitness instructors, GPs, allied health professionals, registered training organisations, and other fitness industry educators. The result was a reputable and effective program, strong local fitness industry infrastructure, a skilled workforce specifically trained to deliver older adult physical activity, and a demand for older adult physical activity in fitness centres and community venues.

By December 2015, an audit showed 14 centres (67%) provided physical activity classes for older adults - 38% offered Active Over 50 classes, and 29% offered 'non' Active Over 50 classes (older adult classes without the support of the Health Promotion Service). It was evident that the demand for organised physical activity for older adults was strong enough to motivate some fitness centres to offer classes without the support of the Health Promotion Service.

Achievements

After careful consideration, the Health Promotion Service decided that the Active Over 50 program was sustainable enough to continue independently, and ceased coordinating the program in June 2017. Providers of Active Over 50 classes were given 12 months' notice to prepare for the transition and were encouraged to continue their classes. Providers were also encouraged to register their classes on the NSW Government 'Active and Healthy' website, a free website that promotes physical activity classes for older adults.

It is now two years since the Health Promotion Service transitioned out of the Active Over 50 program. An evaluation was conducted to determine the ongoing sustainability of the program by:

- Completing an audit of organised physical activity classes for older adults currently available in Central Coast community venues and in fitness centres

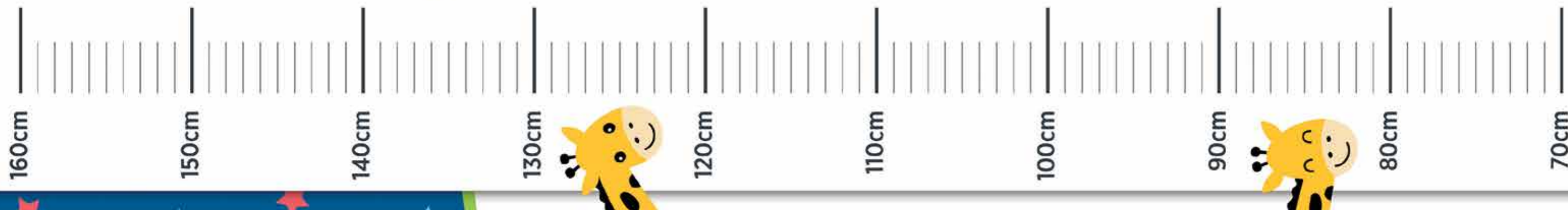
- Assessing the types of classes that are currently on offer
- Surveying former Active Over 50 instructors to assess the proportion of former Active Over 50 classes remaining

Look out for...

The findings from this follow up will be used to inform future physical activity initiatives for older adults by examining:

- the number of former Active Over 50 classes still available
- new providers of physical activity for older adults
- reasons why classes may have ceased or continued
- use of the 'Active and Healthy' website

HOW tall am I?



8 habits for healthy families
Information is relevant for children aged 2 years and older

- 1 Drink water instead of soft drink, juice or cordial
- 2 Eat at least 5 serves of vegetables and 2 serves of fruit every day
(For 2-5 year olds, eat 2 1/2 serves of vegetables and 1 serve of fruit)
- 3 Start each day with a healthy breakfast
- 4 Know your portion/serve size
- 5 Choose healthier snacks and fewer treat foods
- 6 Limit screen time
(no more than 1 hour a day for 2-5 year olds, and up to 2 hours a day for children 6 years and older)
- 7 Be active for at least 1 hour a day, every day
- 8 Get enough sleep
(10-12 hours a night for under 12yrs; 8-10 hours a night for over 12yrs)

For more information go to healthpromotion.com.au

GO 4 FUN

get healthy
Assessment & Coaching Service

NHSW GOVERNMENT

Implementing Routine Growth Assessment of Children

Why are we doing this?

All children who receive care from CCLHD facilities are required to have their growth assessed on a routine basis. This allows staff to identify when a child is above or below a healthy weight, and offer parents/carers advice, support and referral to other services.

How did we do it?

In partnership with CCLHD departments, Health Promotion developed resources for clinical teams and parents/carers. This aimed to assist clinical staff in providing supportive care with guidance for where to refer patients and their families as needed. Family friendly resources also encouraged the family to seek ongoing support by using a local service directory.

Health Promotion staff were active members in the Premier's Priority Childhood Obesity Steering Group, which directed and supported this work.

Achievements

- Development of family friendly resources including the 'How tall am I' chart
- Development of clinical resources including the Model of Care Service Directory, to support staff when reviewing and responding to assessment of growth in children
- Partnership between Health Promotion and CCLHD clinical teams to provide locally tailored resources, in response to identified needs

Look out for...

Health Promotion will continue contributing to the Implementing Routine Growth Assessment in Children project, in partnership with CCLHD clinical teams.

Partners

- Central Coast Kids and Families
- Nutrition Services CCLHD
- Oral Health Service
- CCLHD Premier's Priority Childhood Obesity Steering Group



Munch & Move

Why are we doing this?

The importance of the first 2000 days of life (conception to age 5) to a child's health throughout their lifespan is now well recognised. It is a critical time for cognitive, social, emotional and physical development. However, statistics demonstrate that almost one in four Australian children are overweight or obese by age 5. The early childhood education and care sector provides an ideal setting to provide much of the physical activity and nutrition that children require.

Current Australian guidelines are for children 1-5 years of age to be physically active for at least 180 minutes every day. However, a recent study of childcare services in the Illawarra area of NSW found that children move for less than 20% of their time in care. This reinforces the project's aim to support childcare services in promoting and providing opportunities for physical activity.

How did we do it?

Munch & Move is a state-wide program with local support. It provides a framework of 16 practices addressing physical activity, healthy eating and screen time for services to achieve.

The NSW Office of Preventive Health (OPH) provides training for educators, resources, and events such as conferences and Healthy Menu Planning workshops. The Health Promotion Service supports this locally with:

- local workshops
- consultations with services on practice achievement
- Cook's Network meetings
- menu and policy reviews
- development of local resources
- local promotion of OPH organised events

Success is evaluated by the number of services achieving the 16 practices, participation levels in local activities and participant evaluation surveys.

Achievements

The level to which Munch & Move is established on the Central Coast is reflected by the high participation rate and the proportion of Munch & Move practices that are adopted - 130 of the Central Coast's 139 services (94%) are currently actively participating in Munch & Move. Sixty-

four per cent of the Central Coast's Munch & Move services have adopted at least 65% of the practices, which is 4% above the key performance indicator target for the state.

In November 2018, 13 participating services were acknowledged at a special 10 year anniversary breakfast. These services had been active participants in Munch & Move since the beginning of the program in 2008!

More than 50 services requested our Munch & Move transition to school resources, including healthy lunchbox information and a storybook, and a games card to encourage families to get active every day.

Training offered:

- The Healthy Eating and Active Play Conference in March was attended by 42 service directors and lead educators representing 34 Central Coast services
- Forty-four cooks and directors from 28 services attended Healthy Menu Planning workshops
- Thirty-five educators and directors from 22 services joined teachers from primary

and high schools to participate in the staff wellness evening 'Be Well, Teach Well'

- Three Cooks Network meetings were held with up to 15 service cooks at each meeting

Look out for...

- Munch & Move training is now available self-paced online. We're aiming to have more educators trained using this resource.
- We will be encouraging more services to have their menus reviewed by Nutrition Services

Partners

- CCLHD Nutrition Services
- NSW Office of Preventive Health
- Local Health Districts
- Central Coast Early Childhood Education and Care Services
- Central Coast Early Childhood Educator's Network
- TAFE NSW Ourimbah Campus
- Ngiyang Child and Family Health Service NSW Department of Education



Move Like A Mariner

A local highlight this year was the successful running of a joint initiative with A-League football team the Central Coast Mariners. The 6-week 'Move Like A Mariner' program addressed some of the Munch & Move physical activity practices, particularly around having daily opportunities for fundamental movement skill development.

Thirty-four services from across the Central Coast participated with 1918 children actively huffing and puffing as part of the project. Each participating service received new physical activity equipment sponsored by the Central Coast Mariners. One hundred and seven early childhood educators attended the Move Like A Mariner training workshop, and 80% of services reported doing the Move Like A Mariner activities every day of the 6-week program.

Surveys conducted pre- and post-program demonstrated that:

- educator confidence to teach fundamental movement skills rose from 35% to 97%
- participation in daily physical activity rose by 30%

Feedback from services included:

“Thank you. A great initiative supported by both government and local sporting identities to have our children being more active and being of healthy mind and body”.

“Thank you for letting Explore and Develop Wamberal be a part of the Move Like A Mariner program. It provided educators with new ideas of fundamental movement skills and engaging activities for the children”.

Services can't wait for Move Like A Mariner to run again. We'll be enhancing the resources and welcoming more services in the second year of the program, which commenced in August 2019.

Partners

- Central Coast early childhood education and care services
- Central Coast Mariners



Go4Fun

Why are we doing this?

Go4Fun is a free 10 week healthy lifestyle program available to children 7-13 years of age who are above a healthy weight, and their families. Go4Fun encourages children to develop healthy habits, fosters families learning together, and supports parents/carers to provide healthy home environments.

On average, children who completed the program achieved statistically significant improvements in self-esteem, increases in vegetable, fruit and water consumption, and increases in physical activity.

How did we do it?

This year has had a strong focus on improving access to Go4Fun for Central Coast families via:

- innovative promotional activities - the CCLHD Go4Fun Campaign focused on encouraging healthy lifestyles, family participation and fun, and included advertising on radio, Facebook and digital marketing. The two key objectives were to:
 - increase awareness and reach
 - increase registrations

Overall, digital marketing and radio were the most successful strategies. Facebook promotion appeared most successful when 'organically' shared ie posted by a local organisation to their online community.

- equity and strategic distribution of programs - there are greater proportions of children above a healthy weight in areas of disadvantage. In consideration of this, six of the seven Go4Fun programs delivered in 2018/19 were held in areas of greatest disadvantage: Blue Haven, San Remo, The Entrance, Woy Woy, and Berkeley Vale. Programs were also distributed across geographical areas of the Central Coast, making the program more accessible to families.
- partnerships - new partnerships aimed to increase reach, awareness and registrations for Go4Fun:
 - Schools as a host venue: School led advertising and promotion via social media, newsletters, flyers, word of mouth, parents/carers association, and electronic noticeboard.
 - Cross-promotion: A partnership with parkrun promoting a flyer and location specific Facebook group.
 - Clinical staff: GP packs distributed and in-services conducted to Oral Health, Physiotherapy, Paediatrics and Occupational Therapy within CCLHD.
- integration - Go4Fun promotional activities were integrated with current school health promotion activities, for example at PDHPE Network meetings, joint presentations to school staff and, via the SWAP IT program.

Achievements

- Digital display and radio were identified as the most successful media strategies to increase reach, awareness and registrations. We will use this information to guide the promotion of other HPS projects.

- Go4Fun was hosted by a local primary school for the first time
- Integration of Go4Fun with other health promotion projects was achieved.
- 790 children have participated in Go4Fun over the last 8 years
- Among Central Coast children attending the program between term 1 2017 - term 2 2019:
 - 68% of participants increased the number of days that they met the National Physical Activity Guidelines
 - 64% of participants decreased the frequency of sweet snack food consumption
 - 60% of participants decreased the frequency of confectionary food consumption

'We loved Go4Fun. My kids really looked forward to it every week.' - Kelly

'My job as a mother became much easier due to this program' - Inga

Look out for...

- Aboriginal Go4Fun, to be delivered in partnership with Yerin Aboriginal Health Services
- Continued communication strategies including radio, digital marketing and MMS messaging
- Launch of a new state-wide Go4Fun website

Partners

- Central Coast Primary Schools
- Community organisations
- Children and families
- CCLHD clinical staff
- Office of Preventive Health
- parkrun



Live Life Well @ School

Why are we doing this?

Since 2008, the Live Life Well @ School program has supported primary schools to enable and promote healthy eating and physical activity to students and their families. The state-wide program is delivered through the NSW Office of Preventive Health, and aims to:

- get more students more active, more often
- improve healthy eating habits

How did we do it?

A variety of professional learning opportunities and resources are offered to schools:

- Regular professional development workshops and network meetings including the PDHPE Network and Central Coast School Garden Interest Group for teachers, as well as the Central Coast Canteen Network for canteen managers. Workshops are registered to provide NESA professional development points.
- All schools are offered curriculum based health activities as part of an annual 'Health Week' in term 2. These stage-based programs include student cards to complete, background information and teacher guides, and information for families

- Transition to school resources are offered to all schools to provide to families of children starting school the following year.
- New infographics with healthy eating and physical activity messages are emailed to schools each term for distribution to families via the school newsletter or Facebook page.
- Additional resources are also offered, including playground stencils and gymnastics equipment to borrow, and Crunch&Sip® and Fruit and Veg Month resources.

Achievements

Workshops and resources were provided to support schools to adopt the 11 state-wide Live Life Well @ School practices. Central Coast schools continue to meet these practices which promote healthy eating and physical activity, and enhance student's fundamental movement skills.

Health Week activities were conducted by 47 schools in term 2, 2019. Resources were distributed to over 10,000 students, including:

- Vege Adventure, to promote fruit and vegetables during Crunch&Sip® break for kindergarten, year 1 and 2 students

- Q4:H2O, to promote water as a drink to year 3 and 4 students
- How RU travelling?, to encourage physical activity, healthy food and active travel to school to year 5 and 6 students

Transition to school resources continue to be well utilised, with 50 schools distributing over 3,000 of each resource to parents of children starting school in 2019.

As a result of ongoing review and feedback with teachers and parents, two new resources were developed:

- Make Their Meals Count- a series of photos of meals and snacks which demonstrate how to feed a child healthy foods over the day
- How will you get active today?- to encourage children to become more physically active

New infographics were produced each term and emailed to all primary schools on healthy eating, physical activity and screen time. These are regularly used in school newsletters.

Look out for...

The state-wide Live Life Well @ School program is under review in 2019 with a view to implement a new model in 2020. Consultation is underway

with local schools, Local Health District staff, and the education sector. The review will look at the program's aims and objectives, desirable practices, branding, resources, and ways that technology can be used to facilitate implementation.

Partners

- Central Coast Primary School Principals and staff
- NSW Department of Education
- Central Coast School Education Region
- Broken Bay Diocese Catholic Education Commission
- Association of Independent Schools
- NSW Ministry of Health
- Office of Preventive Health
- Local Health District Live Life Well @ School project officers
- Nutrition Service CCLHD
- Healthy Kids Association



Central Coast Healthy School Canteens

Why are we doing this?

School canteens have been identified as a critical component in influencing the decisions students make with food and drink choices.

From the 'What NSW Children Eat and Drink' report published in 2017, it is known that:

- only 1 in 20 children (5%) eat the recommended amount of vegetables daily
- 1 in 2 children (50%) are eating unhealthy snacks everyday
- nearly 1 in 2 children (45%) regularly consume sweetened drinks.

We aim to work with school canteens to increase the number of healthier food options available. This work is guided by the NSW Healthy School Canteen Strategy.

How did we do it?

We supported school canteens by:

- evaluating their menus and providing feedback on areas of improvement
- providing funding incentives for canteens to purchase equipment that would help them improve the food and drink choices available to students
- holding Canteen Network meetings for both primary schools and secondary schools, to provide opportunities to network with others about a range of canteen related topics
- supporting the Central Coast Canteen Managers Facebook group to allow easier communication and collaboration between and with canteens



- providing subsidies to become members of the Healthy Kids Association, enabling canteens to gain access to valuable resources and information
- providing primary and secondary schools with local recognition through the Central Coast Healthy Canteen Award

Achievements

In the past 12 months the Central Coast has accomplished 75% of public primary schools and 60% of public secondary schools achieving the NSW Healthy School Canteen Strategy.

Four Canteen Network meetings were held for primary schools, with a total attendance of 79 across all 4 meetings. Four meetings were held for high schools, with a total attendance of 36.

Thirty-one primary schools and 10 high schools were represented at Canteen Network meetings over the year.

Look out for...

Ongoing support for school canteens will be provided in the year ahead, to continue the fantastic work that has happened over the past 12 months. We will continue to encourage all Central Coast school canteens to lead the way in helping students make healthier food choices.

Partners

- Nutrition Services CCLHD
- NSW Healthy Kids Association
- NSW Ministry of Health
- Central Coast Canteen Managers
- Central Coast School Principals
- P&C Staff
- NSW Menu Check Service



Personal Development Health & Physical Education Network

(PDHPE)

Why are we doing this?

The Central Coast Primary School PDHPE Network aims to provide quality professional development opportunities for local schools to up-skill teachers. These are provided across all areas of the K-10 PDHPE syllabus, particularly in physical activity and healthy eating.

Data from a small sample of school principals in the NSW School Physical Activity and Nutrition Survey 2015 (SPANS) shows that 89% perceive that a lack of expertise among teachers is a barrier to the delivery of physical activity and development of fundamental movement skills. The PDHPE Network aims to address this barrier.

How did we do it?

Being an advocate for healthy eating and physical activity, the Health Promotion Service provides opportunities for educators to participate in regular workshops facilitated by highly regarded and experienced presenters:

- Term 3 2018 - Pam Williams, a registered Ausdance Safe Dance instructor and current teacher at NAISDA Dance College, facilitated a very energetic and creative urban dance workshop. Pam broke down the components of dance and showed how to teach these within the PDHPE syllabus.
- Term 4 2018 - the Departments of Education's School Sports Unit presented an introduction and practical session surrounding their iPlay program.

- Term 1 2019 - our own Chad Partridge demonstrated how to incorporate physical activity in cross curricular subject areas like literacy and numeracy.
- Term 2 2019 - a different approach was taken with a very engaging presentation by Dr Darren Morton focusing on the wellbeing of teachers. Darren shared strategies that teachers can use in their daily lives to feel their best, and spoke about how this can help teachers in the classroom.

Achievements

Over 130 individual teachers from over 50 local schools attend at least one PDHPE workshop over the past 12 months.

Look out for...

More exciting and engaging opportunities to learn from other high quality presenters will be provided in the year ahead. The PDHPE Network will continue to strive for excellence in providing the best opportunities to not only help our teachers succeed but also to benefit students on the Central Coast.

Partners

- NSW Department of Education Curriculum Support
- NSW Department of Education School Sports Unit
- NASIDA Dance College



Central Coast School Garden Interest Group

Why are we doing this?

The NSW School Physical Activity and Nutrition Survey 2015 (SPANS) shows that approximately 40% of schools have a school garden. These are generally set up and maintained by enthusiastic teachers and students. For some schools, the establishment of a school garden has extended to a whole of school commitment, by linking the garden to:

- the curriculum
- cooking classes
- environmental programs (such as worm farms, composting and reducing waste)
- the school canteen

Providing a forum for schools to share their knowledge, ideas and progress of their gardens is valued by teachers.

How did we do it?

Two after-school meetings are held each year, with a different school hosting and showcasing their school garden and program. Guest speakers provide information on topics of interest.

Participants are surveyed after each meeting to determine the usefulness of the presentations, ideas for future topics, and any resources that would be useful to support schools with their gardens. This information guides the development of future meetings and support strategies.

NESA professional development points for attending the meetings are available to teachers.

A closed Facebook page allows members to share ideas and issues.

Achievements

Term 4, 2018 meeting:

- 18 teachers from 13 schools attended the meeting hosted by Narara Public School
- Tour of Narara Public School garden and a discussion on the school garden plans
- Guest speaker: Dave Grant, a horticulturalist from Bunnings, ran a Q&A session.

Term 1, 2019 meeting:

- 15 teachers from 12 schools attended the meeting hosted by Woy Woy South Public School
- Tour of Woy Woy South Public School garden and discussion of their vegetable garden plan.
- Guest speaker: Sharon Carson from Rumbalara Environmental Education Centre presented on the 'Wiping out Waste' project

Look out for...

Many schools run cooking sessions with their students, often using produce from their garden. A recipe book collating recipes from local schools is currently being compiled to share with this group.

Partners

- Central Coast primary schools



Be Well, Teach Well

Why are we doing this?

The Health Promotion Service partners with many educational settings to deliver programs to promote healthy eating and physical activity for children and their families. These include Early Childhood Education and Care Services, Primary Schools, Out of School Hours Care Services, and Secondary Schools.

We acknowledge the support and the important role staff who work in these settings play. We also recognise the importance of the personal health and wellbeing of these educators and teachers in order to create a healthy environment for children in their care.

How did we do it?

Be Well, Teach Well was a professional development evening to promote and support the overall health and wellbeing of staff in Early Childhood Education and Care Services, Primary Schools, Out of School Hours Care Services, and Secondary Schools.

The guest speaker, Dr Darren Morton, is an internationally recognised wellbeing researcher and educator, and Fellow of the Australasian Society of Lifestyle Medicine.

Dr Morton's inspirational presentation included a summary of the many facets of personal health and wellbeing, and provided many practical skills and strategies to improve wellbeing and mood.

Achievements

One hundred and eighteen local teachers and educators attended the event with 90% providing feedback via a survey on the night.

The most common reasons given by participants for attending the event were to learn strategies to manage workplace stress (76.2%) and to learn strategies to manage personal stress (68.6%).

Overall the event was very well received, with 85.8% of participants reporting the evening met their expectations a great deal. In addition, the vast majority of attendees reported finding the event extremely useful (78.3%).

Be Well,
Teach Well
Looking after you first

Responses to the survey question 'What three key ideas from this evening will you put into action?' were qualitatively grouped into categories. From these, the most common themes participants indicated they would put into action were:

- Positivity & Using Positive Talk (95.3%)
- Spending Time Outdoors (66%)
- Gratitude (35.8%)
- Improving movement (34%)
- Giving (16%)

Twenty per cent of respondents also indicated they would be taking away these key ideas for implementation with students, as well as with other staff in their education setting.

Look out for...

To reinforce the messages from the event, all attendees were offered the opportunity to access the online wellbeing program The Lift Project. The Lift Project brings together

scientifically-proven strategies from the fields of neuroscience, positive psychology and lifestyle medicine. It has proven results including 'clinically significant reductions in depression, anxiety and stress' (American Journal of Lifestyle Medicine) and 'significant improvements in overall mental health and vitality' (TEACH Journal).

An analysis of the uptake and perceived benefits of this program will be investigated. This will help guide our future work in promoting and supporting the overall health and wellbeing of staff and students in educational settings.

Partners

- Early Childhood Education and Care Services
- Primary Schools
- Out of School Hours Care Services
- Secondary Schools



Future Directions for Physical Activity

A qualitative investigation

Why are we doing this?

Gaining insight into possible strategies to increase participation in physical activity within the Central Coast community is the key aim of this qualitative project.

Evidence shows that regularly active people enjoy physical and mental health improvements, longer life, and fewer serious health issues compared with people who are insufficiently active.

Newer evidence confirms that any physical activity is better than none, and benefits can

be gained from moderate intensity bouts of 8 minutes or more. Where possible, 150 minutes of moderate physical activity per week is the recommended minimum for adults.

Currently, 56.8% of Central Coast adults are estimated to be sufficiently active for health compared to 57.2% in NSW.

Almost 3% of Australia's total disease burden is attributable to physical inactivity. Physical inactivity also increases the risk for chronic diseases and contributes individually to the disease burden of:

- Diabetes- 19%
- Bowel and uterine cancers -16% each
- Dementia - 14%
- Coronary heart disease-11%
- Breast cancer -11%
- Stroke - 10%

How did we do it?

The project combines evidence from a literature review with expert opinions gathered via qualitative interviews with local Health Promotion Officers.

Interviews have been conducted, recorded and transcribed. Qualitative data analysis is underway using NVivo software.

Look out for...

The final report will contain recommendations, which may guide a range of programs and/or activities aimed at increasing physical activity participation. This is expected to be completed by the end of 2019.



Get Healthy Information and Coaching Service

Why are we doing this?

The Get Healthy Information and Coaching Service (GHS) is a free phone-based coaching service aimed at supporting adults make lifestyle changes regarding:

- Healthy eating
- Physical activity
- Alcohol reduction
- How to reach and maintain a healthy weight, and
- Healthy weight gain during pregnancy

It provides information and support designed to help adults make healthy behaviour changes. The GHS is based on evidence that telephone and web based coaching are effective in changing healthy eating and physical activity behaviours.

The CCLHD Service Agreement with the Ministry of Health identifies a target for Health Professional referrals to the GHS.

How did we do it?

The Get Healthy Service has been promoted through a number of presentations to CCLHD departments. This has played a key role in embedding the GHS in clinical practice and strengthening referral pathways.

Consultation with partners is an important component of GHS work locally. This provides guidance around ways for the Health Promotion Service to improve referrals to the GHS. One recent improvement has been the adoption of an 'opt out' approach to referrals rather than 'opt in'. This has contributed towards the meeting of referral targets, and has been well received by both staff and patients.

Monthly GHS data from the Office of Preventive Health is reviewed, which helps to ensure we meet our referral targets.

Achievements

The Health Professionals referral target for 2018/19 was set at 384, and at the end of this period 838 referrals were made, more than double the target. Within this total a Get Healthy in Pregnancy target of 200 referrals was set. At the end of the period 486 referrals were made, which is nearly 2.5 times the target.

Look out for...

We are partnering with the Pharmaceutical Society of Australia to deliver a training evening to local pharmacists. Pharmacists will be trained on the GHS and encouraged to refer their patients as standard practice. Script covers promoting the GHS will be offered to participating pharmacists.

Training offered:

Six presentations have been delivered to CCLHD departments.

Partners

- CCLHD health professionals including: Midwives, Physiotherapists, Dietitians, Occupational Therapists, Sleep Investigation Unit, Mental Health, and Osteoporosis Re-fracture Prevention
- North Gosford Private Hospital Maternity Unit





Alcohol Sales to Minors

Why are we doing this?

Current statistics show that 15-17 year olds have the second highest rate of alcohol-related Emergency Department visits in New South Wales. Early uptake of alcohol is a strong predictor of problem drinking behaviour later in life. Further, studies indicate that if a minor purchases alcohol they are more likely to drink at riskier levels and take part in binge drinking behaviour.

Ongoing studies by the Health Promotion Service between 2012 and 2019 show the compliance rates of retailers checking the ID of young people purchasing alcohol to be low and inconsistent. The Health Promotion Service recruited teenagers 18-19 years of age to attempt to purchase alcohol from packaged liquor outlets (PLOs) without producing ID. Currently it is illegal for anyone under the age of 18 to attempt to purchase alcohol. Although sales to 18 and 19 year olds are legal, if a sale

is made without checking ID it does represent a likelihood of selling to minors at other times. During 2018/19, three surveys took place with retailers failing to check ID between 21% and 33% of the time.

Following each survey, several interventions aimed at retailers were implemented. This standard intervention included:

- Presentations at local liquor accord meetings
- Conveying survey results to local licencing police and Liquor & Gaming Compliance Operations for possible surveillance purposes
- Mailing a joint letter to all PLOs conveying details of the survey. This letter was co-signed by local Police District Superintendent Commanders, the Liquor & Gaming Compliance Director, and the CCLHD Chief Executive.

In addition, in 2018 a new intervention was developed. We partnered with Liquor and

Gaming in conducting site visits with inspectors to PLOs that failed to ask for ID. Each interview began with an explanation and background of the survey followed by the individual PLO's results dating back to 2012. Results were presented both verbally and in writing. This was followed up with two general questions on compliance:

- Why do you think a sale was made without requesting ID?
- What do you think are the barriers to obtaining consistent ID checks?

PLOs were resurveyed after these site visits to determine if there were any changes to practice. Survey results show that there was a decrease in sales without ID being produced from survey 5 to survey 6 (both conducted in late 2018), and from survey 6 (late 2018) to survey 7 (mid 2019), indicating that this intervention may have had an impact.

Achievements

- The proportion of sales without checking ID decreased by 11.9% from the first survey in 2018 to the third survey in 2019.
- Strong partnerships were formed across sectors.
- A news article was published on the Liquor & Gaming NSW website, outlining the project and partnership - www.liquorandgaming.nsw.gov.au/news-and-media/mystery-shopper-id-sting-helps-industry-stay-on-right-side-of-law

Partners

- Liquor & Gaming NSW
- Brisbane Waters Police District
- Tuggerah Lakes Police District



“I saw the number for the Quitline...I felt quite good after making the call”.

Pregnant Mother

Quitline®
13 7848



Reducing smoking in pregnancy

Why are we doing this?

Smoking during pregnancy is harmful to the health of both the mother and the unborn child. Reducing smoking in pregnancy is a priority set by the Ministry of Health.

Locally, CCLHD has above average rates of smoking in pregnancy – 13.6% of pregnant mothers on the Central Coast smoke, compared to 8.8% across NSW. The rate of smoking in pregnancy is 32.6% among Aboriginal mothers (compared to 42.4% across NSW as a whole) and 12.4% among non-Aboriginal mothers (compared to 7.2% across NSW as a whole).

How did we do it?

A partnership was established with CCLHD Maternity Services, and a midwife was identified as a ‘champion’ for the project. This midwife was supported to attend a behaviour change workshop in Canberra with a representative from Health Promotion.

A behaviour change methodology was then adopted to develop a system map, and possible opportunities for intervention were identified. It was determined that conducting an intervention

with midwives was a suitable approach. Midwives from Maternity Services were surveyed about their current practice in delivering smoking cessation support to pregnant women and possible opportunities to enhance this support. Survey results identified a need for training and resources to improve smoking cessation support, and opportunities to enhance referrals to Quitline.

Smoking cessation training sessions were organised with the State-wide Smoking Cessation Training Team, with these rolling out from July 2019.

A quality improvement application was submitted to the Research Office to enable evaluation of the smoking cessation training workshops and any changes to practice, and determine outcomes in terms of referrals to Quitline and rates of smoking in pregnancy.

Achievements

Partnerships were established with Maternity and State-wide Smoking Cessation Training Team

Stopping smoking is the single most important thing you can do as a mother to contribute to the future health of your child.

Dr Megan Griffiths

Key results from 17 completed midwife surveys included:

- 59% reported that providing smoking cessation support fits ‘extremely well’ or ‘very well’ within the scope of providing antenatal care
- 82% reported being either ‘somewhat confident’ or ‘unconfident’ in providing smoking cessation care
- Approximately 80% of pregnant women who smoke receive smoking cessation support at booking in, and 70% at follow up visits
- Approximately half of pregnant women who smoke refuse referral to the Quitline. Midwives directly referred fewer women to Quitline (33%) as opposed to encouraging women to contact Quitline themselves (81%)

Look out for...

Training will be delivered by the State-wide Smoking Cessation Training Team in July and August 2019. Following training, evaluation of changes to midwives knowledge, skills and confidence in providing smoking cessation support will be conducted. Further evaluation will be conducted to determine changes to practice such as increased referral rates to Quitline, and the impact smoking rates.

Partners

- CCLHD Maternity Service
- NSW State-wide Smoking Cessation Training Team



CCLHD's smoke-free by-law

Assessing the responses of smokers to requests to stop smoking on CCLHD grounds

Why are we doing this?

In 2013, CCLHD implemented a smoke-free by-law to enhance existing no smoking policies. The by-law made it an offence to smoke on CCLHD grounds, with a \$300 fine applicable for breaches of the by-law.

Enforcement of the smoke-free by-law has been the responsibility of Health Promotion, Public Health and Security, as these departments have Authorised Inspectors who can issue fines. However, all staff can advise people who smoke that smoking is not permitted on CCLHD grounds if they feel safe to do so.

Anecdotal reports suggest that some staff are hesitant to approach people smoking due to concerns of negative or aggressive responses. However, Health Promotion staff who currently monitor and enforce the smoke-free by-law report there is a low risk of aggression.

The project aims to:

- Collect data recording the interactions between Health Promotion staff and people who smoke
- Change the perceptions of CCLHD staff in regards to approaching and interacting with people who are smoking on CCLHD grounds
- Contribute to the evidence base and share our findings with other practitioners who may be involved in similar work elsewhere.

How did we do it?

During enforcement patrols, Health Promotion staff approach people who smoke using a standard protocol. For the first 100 interactions the protocol was as follows:

- Patrol Gosford or Wyong Hospitals in pairs wearing NSW Health ID badge
- Wear a high visibility vest noting staff as 'tobacco compliance officers'
- Conduct the interaction in a polite manner
- Greet the person smoking and introduce the staff

- Inform the person of the smoke-free by-law, and that a fine can be issued for smoking on hospital grounds
- Ask the person to extinguish their cigarette, and to move off site if they wish to smoke
- Provide the person with a cigarette butt bin to extinguish their cigarette
- Advise the person on the availability of Nicotine Replacement Therapy

After the first 100 interactions, adjustments to the protocol were made to reflect an approach that all CCLHD staff could make if they were to see someone smoking on site. This included Health Promotion staff not wearing high visibility vests and not providing butt bins.

Health Promotion staff collect data assessing interactions using an electronic recording tool. As well as recording data on the details of the incident, staff complete the Modified Overt Aggression Scale (MOAS). Data will be collected on 200 interactions.

Achievements

To date, over 150 interactions have been completed. Only 2 incidents of minor verbal aggression ('shouts angrily, curses mildly, or makes personal insults') have been recorded. There have been no incidents of physical, self or property related aggression. This is indicating the protocol may be safe and effective way to approach people smoking and request them to stop smoking.

Look out for...

The final findings will be shared with CCLHD staff and through peer-reviewed literature. The intention is that our methodology will provide staff with a model of how to conduct an intervention with very low risk of receiving an aggressive response.



Quit smoking support from financial counsellors

Why are we doing this?

The prevalence of smoking remains substantially higher among people of a lower socioeconomic status (13.1% of people in the most socioeconomically disadvantaged quintile smoke, compared to 4.9% in the least socioeconomically disadvantaged quintile). People who are socioeconomically disadvantaged and who smoke are also more highly dependent on nicotine and are less likely to intend to quit. Further, regular smoking exacerbates financial stress and poverty both for adults and children.

Surveys of people who smoke who are clients of community services indicate they are open to receiving smoking cessation assistance from these services as they are a trusted source of advice and support and can offer more personalised support. The integration of smoking cessation support in organisations already working with disadvantaged groups has been shown to be effective in decreasing smoking rates.

How did we do it?

A scoping survey of local financial counsellors was conducted in 2018 to gauge the interest of counsellors in providing smoking cessation support to clients and the need for this. Results from the survey indicated that 53% of financial counselling clients smoke, and counsellors were very interested in being able to support their clients to quit smoking.

A capacity building approach is proposed to up-skill financial counsellors in providing smoking cessation support, by training counsellors and providing them with resources to facilitate referral to the Quitline. This is the standard model of intervention.

In addition, a nicotine replacement therapy (NRT) voucher component will also form a part of the intervention. NRT vouchers are to the value of \$100 and entitle the bearer to receive any form of NRT to this value from community pharmacists. Financial counselling organisations will be randomised into receiving the standard model of intervention or the standard model

plus NRT vouchers. The project will determine to what extent each model of intervention supports low socioeconomic people to quit smoking.

The project was pitched to the University of Newcastle/University of New England Joint Medical Program as a research project for 3rd year medical students to complete.

Achievements

A student group accepted the project and commenced working on it in early 2019. Thus far, the group has completed a research proposal, literature review, and draft research protocol.

Look out for...

The project will be submitted for Human Research Ethics Committee ethics review. Following ethics approval, the project will enter its implementation stage in 2020. Medical students will deliver a portion of the intervention and complete a report on their component of the program by the end of 2020.

Partners

- Financial counselling organisations
- University of Newcastle/University of New England Joint Medical Program and 3rd year medical students
- Pharmacy Guild of Australia



Smoking cessation support in mental health

Why are we doing this?

Recent studies have pointed towards substantial mental health improvement associated with smoking cessation. A body of evidence which is still under dispute but of great interest links smoking initiation with subsequent mood deterioration.

People with mental health problems remain one of our 'harder targets' for smoking cessation, and combined with substance abuse disorders may make up nearly half of all people who smoke over 34 years of age. Despite their mental health co-morbidity, smoking related illness is the major cause of death in this group. This is generally well recognised by mental health practitioners, but the immediacy and risks of their mental health illness takes priority on the whole where practitioners feel that smoking cessation is a risk to their patient's mental health outcomes.

This project aims to reorient practitioners working in the mental health field to see smoking cessation as a potential treatment for mood disorders and not just a secondary long term physical health concern.

How did we do it?

A preliminary look at the literature indicates that smoking cessation can have benefits for mental health as great as or better than antidepressant

medication. Further investigation is required to assess the current provision of smoking cessation support by mental health practitioners, and a broader analysis of the literature on this topic.

Achievements

A rapid fire presentation detailing the concept of this project was delivered at the 2019 Health Promotion Forum. An abstract has also been accepted for presentation at the Oceania Tobacco Control Conference in Sydney in October 2019. This indicates the potential interest and appetite amongst the health promotion community to working in this space.

Look out for...

The next steps for this project will be to collect data from a sample of Central Coast psychologists and psychiatrists to determine their current practice in regards to smoking cessation support, and their willingness to implement enhanced support for their clients.

Partners

Central Coast psychologists and psychiatrists



Falls Are Preventable

65+ living independently in the community

Why are we doing this?

A fall can be serious and can lead to loss of confidence and independence. Approximately one quarter of people aged 65+ experience a fall at least once a year with 50% falling more than once. No other single cause of injury, including road trauma, costs the health system more than falls. In NSW each year, falls lead to approximately 33,000 hospitalisations and more than 800 deaths. (HealthStats NSW, www.healthstats.nsw.gov.au/Indicator) Between 2016 and 2026, the number of persons aged over 60 on the Central Coast is expected to increase by 20,295 (23.2%) and comprise 28.9% of the total population⁴. This makes falls prevention an increasingly important part of Health Promotion work. (Central Coast Council area population and age structure - <https://forecast.id.com.au/central-coast-nsw/population-age-structure?AgeTypeKey=3>)

How did we do it?

Presentations on Active Healthy Ageing were delivered to senior groups to help empower individuals to take actions that reduce their risk of falls.

We consulted with partners to produce resources to promote risk factors of falls. Falls prevention resource packs were provided to hospital patients who require surgery following a fall. Additionally, one-on-one or group sessions were conducted for patients by Occupational Therapists and cross-disciplinary Allied Health Assistants to address risk factors of falls. Training has been provided by the Health Promotion Service to facilitate clinicians in delivering these sessions.

Achievements

The presentations and resources are in high demand:

- 10 presentations given to 400 people
- 2,000 falls prevention packs distributed to patients
- 2,000 Falls are Preventable DVDs distributed to GP Practice Nurses

Look out for...

- Up-skilling of Aged Care students by conducting training on falls prevention as part of the TAFE course.
- Supporting falls prevention work with Home Care Packages and Commonwealth Home Support Program providers by training staff, helping them to identify possible falls risks in the client's home.

Partners

- Seniors organisations
- Stepping On facilitators
- CCLHD departments including Occupational Therapist, Geriatric Rehabilitation Unit, Osteoporosis Re-fracture, and Transition Care



Research partnership projects

SWAP IT

Why are we doing this?

The SWAP IT program aims to support parents and carers to pack healthier lunchboxes by providing information about how to swap 'sometimes' foods for 'everyday' foods. The primary outcome of the SWAP IT trial is to reduce the average energy content (kilojoules) of discretionary food and drinks packed in the lunchbox.

It is based on the knowledge that:

- 86% of students bring a packed lunch from home
- Food in school lunchboxes accounts for up to a third of a child's daily energy intake
- Studies with Australian primary school children reported that the average lunchbox contains more than 3 serves of 'sometimes' foods

Few interventions have targeted the nutritional content of school lunchboxes. Systematic reviews of these interventions have found a limited impact in reducing the overall average energy content of school lunchboxes.

SWAP IT encourages swaps from 'sometimes' foods to 'everyday' foods. This is to increase the quality of lunchbox foods, reduce fat, sugar and salt, and reduce the overall kilojoule content from 'sometimes' foods and drinks.

SWAP IT recognises that a barrier to improving foods packed for children is a difficulty to effectively reach parents. Therefore, SWAP IT uses an existing school smartphone app (SkoolBag) to deliver healthy lunchbox messages direct to parents.

A pilot randomised control trial of SWAP IT was conducted in 2017 involving 12 Hunter New England Local Health District (HNELHD) primary schools. It found a decrease in average energy content of discretionary foods packed in the

lunchbox. HNELHD received a Translational Research Grant to extend the SWAP IT program to CCLHD and Mid North Coast Local Health District (MNCLHD).

How did we do it?

SWAP IT includes four main interventions:

- Development of tailored School Lunchbox guidelines
- Resources to support change, for parents and children
- Series of 10 SkoolBag messages direct to parents
- Curriculum resources based on the Australian Guide to Healthy Eating.

Evaluation of the SWAP IT program includes a 'lunchbox look' and surveys for students, teachers and principals. The 'lunchbox look' consists of photos of all the lunchboxes of consenting students, with subsequent nutritional analysis.

Achievements

Health Promotion has worked in partnership with HNELHD to provide this program to Central Coast schools. Four Central Coast schools were recruited to the trial and those randomised to the intervention arm have commenced the implementation phase.

Look out for...

Results of the SWAP IT trial will be available after the project's completion. This will inform the future direction of SWAP IT for CCLHD.

Partners

- Hunter New England Local Health District (lead)
- Mid North Coast Local Health District



Physical Activity 4 Every1 (PA4E1)

Why are we doing this?

Currently, most adolescents are inactive, with 81% not achieving recommended levels of physical activity. Physical Activity 4 Every1 (PA4E1) is an innovative whole-school physical activity program for NSW secondary schools. The aim of PA4E1 is to increase physical activity and promote a healthy weight among adolescents. Schools are an ideal environment to promote physical activity in young people as they have the curriculum, facilities, resources and access to adolescents to help them be more active.

How did we do it?

Schools were supported to implement and maintain 7 practices over 2 years (2017-2019). These evidenced-based practices have been shown to make a positive difference to students' physical activity levels and their overall health. Implementing the practices in schools is a team effort, which is why a suite of support strategies were developed to work with schools to help them make positive changes for their school and students.

Schools are supported by a local support officer to implement 7 physical activity practices based on the Health Promoting Schools framework. Most practices are based around school sport and PE lessons, but some are 'whole of school' practices, including the development of supportive policies, linking with community sporting groups and communicating with parents.

Achievements

Schools participating in the PA4E1 intervention have had access to higher quality PDHPE lessons, and have had notable increases in the number of students participating in a wider range of physical activity opportunities.

Look out for...

The trial is due to be completed at the end of term 3 2019, so keep an eye out for the results soon.

Partners

- Hunter New England Local Health District (lead)
- Mid North Coast Local Health District
- Kincumber High School
- St Joseph's Catholic College East Gosford

Good for Kids. Good for Life. physical activity program - Physically Active Children in Education (PACE)

Why are we doing this?

The aim of the PACE program is to support primary schools and teachers in scheduling 150 minutes of planned physical activity each week, as required by the Department of Education (DoE).

Eight Central Coast primary schools are participating in this research program in different capacities. The program highlights the potential benefits in improving physical activity levels among children including academic, physical, mental and social health outcomes.

How did we do it?

In order to improve the physical activity health outcomes among students, schools are supported by a local support officer to implement six key strategies:

- Increasing participation and the amount of time students are active during PE lessons
- Increasing participation and the amount of time students are active during school sport
- Introducing active energisers into the classroom
- Integrating physical activity into other subject areas like maths and English
- Developing policies to make a commitment to increase physical activity and scheduling this into classroom lessons
- Making links with families about the importance and benefits of physical activity.

Achievements

The trial is due to be completed at the end of term 3 2019, so keep an eye out for the results in the following months.

Partners

- Hunter New England Local Health District (lead)
- Mid North Coast Local Health District
- Central Coast primary schools



Short & sharp

NSW Healthy Food & Drink Framework

Health Promotion continues to demonstrate strong leadership in implementing the NSW Healthy Food and Drink Framework at CCLHD facilities. Since the first stage of Framework implementation in 2017 which saw the removal of sugary drinks from sale, healthier food choices have increased across staff and visitor cafés in 2018/19. CCLHD performed above the NSW state-wide results for all of the Framework's 13 practices. Some key achievements over the last 12 months include:

- Providing more everyday food choices in staff and visitor cafés
- Greater marketing and promotion of everyday foods rather than occasional foods

Childhood Obesity and Healthy Eating Active Living (COHEAL) subcommittee

Together with the Regional NSW (previously Department of Premier and Cabinet), CCLHD and various local government agencies have been working together to tackle childhood obesity on the Central Coast. In line with the NSW Healthy Eating and Active Living Strategy, the cross agency committee are implementing a refreshed action plan for 2019-2020 to support our community to make healthy lifestyle changes and create an environment that supports healthier living.

Healthy Food & Drink practice	Removal of sugar sweetened drinks	Availability (75% everyday foods)	Quality (Health Star Rating ≥ 3.5)	Product size	Marketing
CCLHD	100%	84%	100%	98%	95%
NSW	96%	62%	93%	91%	80%

Partners

- Regional NSW (previously Department of Premier and Cabinet)
- Central Coast Council
- Transport for NSW
- Department of Planning and Environment
- Department of Education - Central Coast
- Office of Sport - Central Coast
- TAFE NSW
- Department of Communities and Justice (previously Family and Community Services)



www.healthpromotion.com.au

We are excited with the fresh new look and feel of the Health Promotion website!

With this update comes a greater level of:

- what we can deliver to our community
- how we can engage our community, and
- how we can measure elements of our projects through this medium

The new platform enables project officers to plan more strategically and record specific process and outcome measures when people engage with the website.

Features include:

- short video clips that introduce project officers and their project
- scroll features friendly to all devices
- sections for professionals and the general public
- interactive components allowing people to register for events and courses, provide feedback, download resources and more
- more detailed data tracking and collection

What did we achieve?

Since the launch of the new website earlier this year, www.healthpromotion.com.au has recorded:

- 8,175 users
- 9,903 sessions
- 18,749 page views
- An average session duration of 1:36
- 80% of the audience being from Australia

Some of the most viewed web pages were:

1. Home page: 1,767 views
2. The Magic Lunchbox: 1,712 views
3. Kids and Families: 945 views

The most downloaded resources included:

1. The Magic Lunchbox book: 644
2. The Magic Lunchbox teacher resource: 431
3. The Magic Lunchbox food cards: 385

We host a YouTube channel, CCHHealthPromotion, which houses video content produced by the service. The videos capture various parts of our work, including PDHPE Network meetings, Aboriginal art project videos, project overviews, and short interviews with Health Promotion Officers.

In 2018/19, our YouTube channel had 42,378 views, and 89,108 minutes of content was watched by our audience. The average view duration was 2:06. Our videos received 137 likes and 399 shares.

The videos with the most views on our channel were:

1. Game Sense - Netball - Session One - Team Warm-up: 8,022 views
2. Warm-up for Primary School Children: 6,100 views
3. Getting off the floor safely after a fall: 6,062 views
4. Falls Prevention - reducing hazards at home: 2,873 views

5. Game Sense - Video Six - Invasion Game: 2,469 views

Key demographics of YouTube channel viewers:

- 69% female
- 86% 25-34 years

The top countries of YouTube channel viewers were:

- Australia: 24.8%
- United States: 16.3%
- United Kingdom: 13.4%

Most traffic to our videos came from within YouTube:

- Suggested videos: 30.1%
- YouTube search: 28.6%

Twenty-six per cent of traffic came from external web sources such as Google searches and www.healthpromotion.com.au.



Presentations

Australian Health Promotion Symposium

- Critical reflections on health promotion practice – poster presentation
- Move Like A Mariner: partnering with a professional sporting organisation to increase physical activity in early childhood education and care services – poster presentation

Public Health Prevention Conference

- Utilising intersectoral partnerships to increase identification checks of young people purchasing alcohol – oral presentation
- Thirsty? Choose Water! Enticing secondary school students to choose water as their drink – Public Health Prevention Conference – oral presentation
- Make Their Meals Count improves indicators of food literacy for parents – table top presentation

CCLHD Research Symposium

- Thirsty Work! The story of Thirsty? Choose Water! From a Pilot to a Translational Research Grant – oral presentation
- Move Like A Mariner: partnering with a professional sporting organisation to increase physical activity in early childhood education and care services –oral presentation
- Creating a smoke-free Aboriginal community through art – lightning talk
- Bite & Bounce at OSHC, a partnership between the Health Promotion Service and Outside School Hours Care (OSHC) to promote healthy eating and physical activity for 5-12 year olds and their families – oral presentation

- Activate Your Space: Increasing Outdoor Space Usage in a Disadvantaged Community on the Central Coast of NSW – oral presentation
- A protocol for intervention with smokers on hospital grounds. Simple but important steps to ensure a safe low stress and successful outcome – lightning talk

Health Promotion Forum

- Smoking cessation as a treatment for mental health
- Alcohol sales to minors
- Nicotine Replacement Therapy in vending machines

Other presentations

- Central Coast testimonial – the art of partnerships – presentation at state Get Healthy Service face-to-face network meeting

Publications

Health Promotion Journal of Australia

- Implementing and enforcing a smoke-free policy and by-law on hospital grounds at Central Coast Local Health District.

Major Committees

CCLHD Breastfeeding and Infant Feeding Reference Group

Supports the implementation of a comprehensive and integrated plan for breastfeeding on the Central Coast in line with the policy framework document.

CCLHD Premier's Priority Childhood Obesity Steering Group

Directed and supported the implementation of routine growth assessment of children.

COHEAL subcommittee

Delivers an integrated approach to enhance the health and wellbeing of children both now and into the future through cross-agency collaboration

Health Promotion Forum Steering Committee

Supports the organisation and delivery of the annual Health Promotion Forum professional development day for the NSW health promotion workforce.

Healthy Food and Drink Policy Implementation Group

Guides the delivery of the Healthy Food and Drink Framework on the Central Coast.

Live Life Well @ School State-wide Key Contact Group

Guides and supports the implementation of the state-wide Live Life Well @ School program in primary schools.

Munch & Move Key Contacts Group

Guides and supports the implementation of the state-wide Munch & Move program in early childhood education and care services.

Thirsty? Choose Water! Advisory Group

Supports the Translational Research Grant project.

Tuggerah Lakes and Brisbane Waters Liquor Accords

Aim to improve safety and reduce alcohol-related anti-social behaviour, offences and violence. The Accords are made up of local liquor retailers including pubs, clubs, and packaged liquor outlets, NSW Liquor and Gaming, Police, Central Coast Council, Roads and Maritime Services and CCLHD.

Tobacco Control Network

Shares information about projects, ideas and challenges in local areas as related to Tobacco Control and Smoking Cessation and the implementation of the NSW Tobacco Strategy.

Smoke-free Health Care Working Group

Works to implement the NSW Health Smoke-free Health Care Policy by ensuring that CCLHD grounds are smoke-free, and that staff and patients are supported to manage their nicotine dependence.



Awards

CCLHD Quality Awards 2018

[Bite&Bounce@OSHC](#) - 1st place, Keeping People Healthy category

[Activate Your Space 2262](#) - Chief Executive Award, Caring for the Coast category

Premier's Awards 2019

[Make their Meals Count](#) - A guide to feeding your child over a day (pending outcome)

[Reducing Primary Supply of Alcohol to Minors](#) (pending outcome)

NSW Health Quality Awards 2019

[Thirsty? Choose Water!](#) Enticing secondary students to choose water as their drink (pending outcome)

[Reducing primary supply of alcohol to minors](#) (pending outcome)

Research & quality improvement projects

Ethical clearances

Amendment to [Thirsty? Choose Water!](#) to include Mid North Coast LHD and Hunter New England LHD under original approvals for Translational Research Grant

Quality Improvement projects

[Alcohol Sales to Minors \(AS2M\)](#) - Investigators: Hannah Bartman & Lyndon Bauer

[Be Well, Teach Well](#) - Investigators: Nicole Kajons & Jane Whatnall

[Evaluation of the resource known as *Make their Meals Count - A guide to feeding your child over a day \(4-8 year olds\)*](#) - Investigators: Jane Whatnall & Lesley Marshall

[Future Directions for Physical Activity on the Central Coast](#) - Investigators: Gina Stuart

[Investigating the behavioural drivers of the provision of smoking cessation support by midwives in CCLHD Maternity Service](#) - Investigators: Luke Giles, Nicola Morley & Lyndon Bauer

[Reducing smoking in pregnancy](#) Evaluating a comprehensive approach to the delivery of smoking cessation brief interventions to pregnant women - Investigators: Luke Giles, Nicola Morley & Lyndon Bauer



Our team

This year we are introducing team members who lead, guide and support research and evaluation within our service.

Sam Batchelor | Manager, Health Promotion Service

Sam has been with us now for almost 4 years! She has worked in health for over 20 years in clinical, project, research and evaluation, and management roles. Sam has experience across a range of settings including health promotion and public health, mental health, palliative care and aged care. She is an Occupational Therapist by training and also has a Graduate Certificate in Public Health Research and Evaluation and a Masters of Public Health.

Sam has a strong interest in Research and Evaluation, and is a member of the CCLHD Operational Research Committee. She has been an author on several peer reviewed journal papers and also enjoys the opportunity to be a reviewer of academic papers.

In her role, Sam provides support to the Director, oversees the tobacco and alcohol portfolios, and work to enhance the Research and Evaluation capacity of the service. Along with Gina and Lyndon, Sam supports the team on all areas of Research and Evaluation, and liaises closely with the CCLHD Research Office.

Sam has observed a growing interest within the service regarding research and evaluation, with Thirsty? Choose Water! securing two rounds of competitive funding; several quality

improvement projects underway; as well as awards, conference presentations, and publications by the team.

Gina Stuart | Health Promotion Officer

Gina Stuart is a senior health promotion officer with over two decades of experience in population health. Gina has worked in tobacco control, overweight and obesity, falls prevention, and physical activity.

Demonstrating achievements in population health has been at the core of Gina's work since the beginning. Taught by great mentors, Gina learned early on that an outcomes approach, together with a sound evidence base and good local knowledge, helps to plan and implement measurable, realistic objectives. Some of Gina's implementation and evaluation work includes:

- Results of a smoking cessation intervention for Wyong Hospital pre-admission clients
- Motivation of older adults to attend organised physical activity
- Results of strength training programs for older adults in Central Coast fitness centres
- Change in shared pathway traffic following implementation of parkrun, using infra-red people counters and onsite observation.

Gina says that evaluation is crucial. "It allows not only the measurement of achievements, but an opportunity to critically reflect on project outcomes – either positive or negative – to inform future work".

Gina has a background in nursing and midwifery, and is nearing the completion of a Master of Public Health. When not at work, you can find Gina somewhere in nature, camera in hand!

Dr Lyndon Bauer | Health Promotion Officer

Lyndon has always had an interest in research, and was known as the 'mad scientist' in his school days. He started working in the Health Promotion Service to research the outcomes of brief smoking cessation interventions versus intensive smoking cessation interventions in various settings. He has also completed work to map the places where tobacco could be purchased across the Central Coast, and to survey high school students on their smoking status. More than a decade of work on tobacco availability and sales to minors resulted in world leading changes to the enforcement of prohibition of tobacco sales to minors.

Lyndon is a published author in several journals, with articles on the topics of tobacco sales to minors, compliance of ID checks in bottle shops, cannabis and road death, and iodine deficiency in primary school children.

In his work outside Health Promotion, Lyndon works as a General Practitioner and has conducted research around the provision of emergency primary care, which ultimately resulted in the establishment of two clinical after-hours services. Lyndon is also a conjoint senior lecturer with University of Newcastle and provides training for medical students. He is currently supervising two student research projects.

Liesl Greenwood | Team Leader, Healthy Eating Active Living

Liesl was appointed to the Health Promotion Service's new position - Healthy Eating Active Living (HEAL) Team Leader in late 2018. Liesl had previously worked on the Munch & Move program, and prior to that worked as the Community Relations Manager at Hornsby Ku-ring-gai Hospital. Liesl also has previous management experience during her time at the Australian Sports Commission.

Liesl oversees a well-established and knowledgeable team as they continue to lead HEAL initiatives across the Central Coast community. Liesl works closely with the Director to continue to forge strong partnerships across government and non-government agencies to ensure HEAL is prioritised.



