



# Central Highlands Primary Care Partnership Smiles 4 Miles A Multi site Model



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## **A PCP Multi Site Model**

### **Introduction**

Primary Care Partnerships (PCP's) were developed by the Victorian Government in 2001 with 31 PCP's across the state.

PCP's have 4 key areas of work-Integrated Health Promotion; Service Coordination; Partnership development; and Integrated Chronic Disease Management. PCP's generally work across a number of local government areas. Each PCP operates depending on their membership and the needs of their communities. PCPs work to facilitate relationships between agencies, coordination of services to develop a more seamless system for the consumer and to improve health and wellbeing outcomes.

Smiles 4 Miles (S4M) is a state wide early intervention oral health program of Dental Health Services Victoria (DHSV) delivered into preschools to promote healthy environments for children. The health of children is impacted by a multitude of factors including physical, environmental and emotional. Most preschool aged children attend either formal or informal preschools/ playgroups. These settings are a great opportunity to be able to expose children and their families to early intervention and primary prevention healthy behaviours and environments that will impact on their long term health outcomes.

S4M as an oral health promotion program has two key approaches: The Foundation (prevention) program via preventative messages being delivered in the preschools and the Access ID and Referral (treatment) which is encouraging at risk children to be referred into the dental service. S4M uses a multifaceted approach to deliver the program:

- Drink well encouraging water as the preferred drink
- Eat well increasing the consumption of fresh fruit and vegetables
- Clean well encouraging regular tooth brushing
- Play well learning about safe active play
- Stay well encouraging sun smart behaviour and links to local health services.

Preschools participating in the program do so, on a rewards system where upon completion of the criteria the preschool is recognised as a health promoting preschool and may market themselves to the community as such.

S4M is based in preschool and playgroup settings and promotes the early intervention and primary prevention in oral disease and promoting healthy habits from a young age. The Treatment arm of the program is about encouraging children to see a dentist and referring them to a local service where capacity permits, this component is specifically tailored to meet the needs of a local region and falls under the Early Childhood Oral Health Program (ECOPH) program. All preschool aged children have priority of access to public dental clinics in Victoria. The overall aim of the project is to promote lifelong oral and general health starting from a young age.

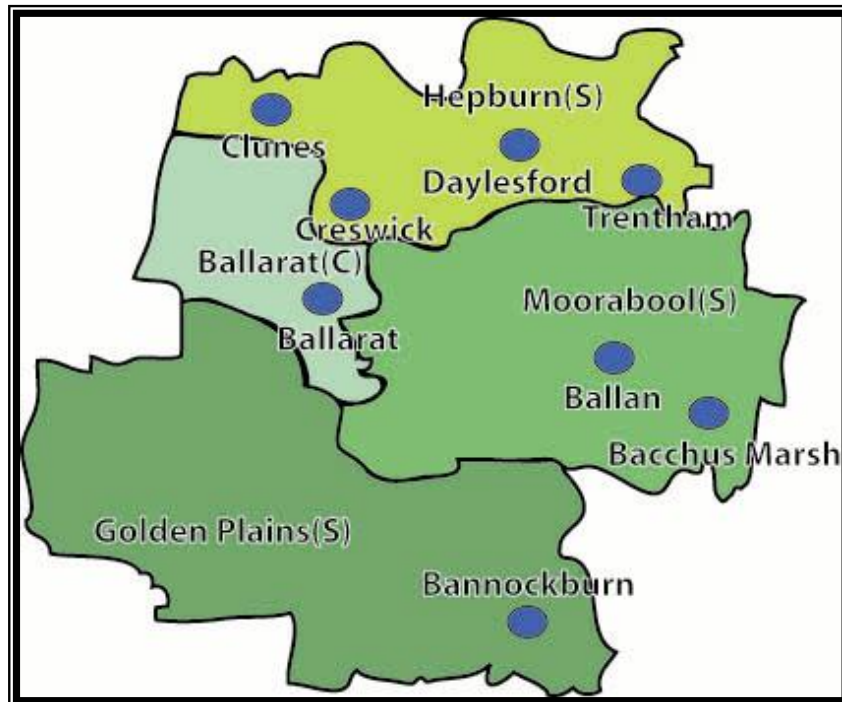
The core components of S4M program delivery include:

- Training of Preschool staff
- Parent engagement sessions
- Supporting Preschools to implement nutrition policy

- Support settings to ensure curriculum activities reinforce key messages
- Support preschool staff to complete the applicable surveys on key messages
- Smiles 4 Miles awards
- Planning and Reporting to DHSV

In the CHPCP model, the program messages are promoted in preschools across the Central Highlands Catchment area (please see map below).

### Central Highlands Primary Care Partnership Catchment Area



### Background

The Smiles 4 Miles program is an initiative of Dental Health Services Victoria, delivered differently across the state depending on the needs of the community and agencies delivering the program. Commonly the program is delivered by Local Government, or a local health agency. The program links with existing universal services such as Best Start, Maternal and Child Health Services, Neighbourhood Renewal, Playgroups, Preschools and Immunisation services. In most sites S4M is linked with other overall child wellbeing initiatives including obesity prevention, dental care and general health (Success Works, *evaluation of Smiles 4 Miles*, 2006: x).

The Central Highlands Primary Care Partnership (CHPCP) is located approximately one hour west of the Melbourne metropolitan area and encompasses the City Of Ballarat, Golden Plains, Hepburn and Moorabool Shires. It has a total area of approximately 7025 square kilometres (see map) with a population of approx 147, 387 (ABS 2006, Department of Planning and Community Development, *find your local council* [accessed July 2008]). CHPCP has 33 member agencies with a range of different focuses including Health, Welfare, Disability, Local government, sports and other human service organisations.

CHPCP is currently undertaking a restructure to life stage platforms. The Child and Family Platform and the Aged and Disability platforms have been established, the youth platform is currently under development. This new structure allows for a

greater breadth of work and involvement from member and non member agencies. The priority HP areas of work are increasing physical activity, mental wellbeing and social connectedness and nutrition and oral health.

CHPCP currently have a staff team comprising of Executive Officer, Service Coordination Officer, Health Promotion Officer and Administration Officer.

Responsibility for the implementation of the S4M lies with the Health Promotion Officer.

Smiles 4 Miles has been incrementally implemented in Central Highlands Primary Care Partnership (CHPCP) since June 2005. Within the Central Highlands Region there is no Kids Go For Your Life or the Romp and Chomp programs that are featured in other areas. The program began in the Hepburn Shire Local Government Area with Hepburn Health Services to deliver to the local preschools. Central Highlands also received seed funding to implement the program in Golden Plains Shire. The program expanded to include the City of Ballarat Council and Moorabool Shire.

Central Highlands PCP has recognised that Oral Health is a key issue impacting on the populations overall health and wellbeing and as such has food, nutrition and oral health as one of it's Health Promotion priority areas.

Central Highlands PCP has contracted three member agencies to deliver the program in their local government area including Hepburn Health Services (Hepburn Shire), Ballarat Community Health Centre (Golden Plains Shire and City of Ballarat) and Djerriwarrh Health Services (Moorabool Shire). The program is delivered by a range of allied health practitioners including a Health Promotion Officer, Dietician and a Dental Therapist. This multidisciplinary group meets on a bi monthly basis to give support and discuss the delivery of the program in their catchment.

Smiles for Miles is currently being delivered across the Central Highlands catchment in 26 preschool settings (Hepburn 5, Ballarat 7, Moorabool 7, Golden Plains Shire 7) and is about to expand within the City of Ballarat by 5 to make a total of 31 settings in the 2008-2009 funding period. The Foundation component of the program is delivered in all of the 26 settings with approximately 1500 children participating in the program. The Access ID and Referral component is well established in Hepburn Shire through access to the public health clinic at Hepburn Health Service and is in the process of being established in the City of Ballarat.

The way the program has been delivered has changed as the program has expanded to cover the larger geographical catchment and develop into the model as described in this document. This model is being developed to add to the evidence base which underpins S4M and to explore different methodologies for delivering the program. It is anticipated that this model will be used to inform the development of current and future Smiles 4 Miles sites in other areas. The multi site model will explore the effectiveness of delivering S4M across multiple Local Government areas and some of the benefits and challenges of delivering the program in this way.

## Grampians Region Dental Clinics

The following describes the current delivery of public dental health services in the Grampians Region.

Planning catchment	Eligible population	No. of chairs	Eligible population per chair
Central Highlands	60,959	12	5,080
Wimmera	16,163	8	2,020
Grampians Pyrenees	14,018	3	4,673
Total	91,140	23	3,963

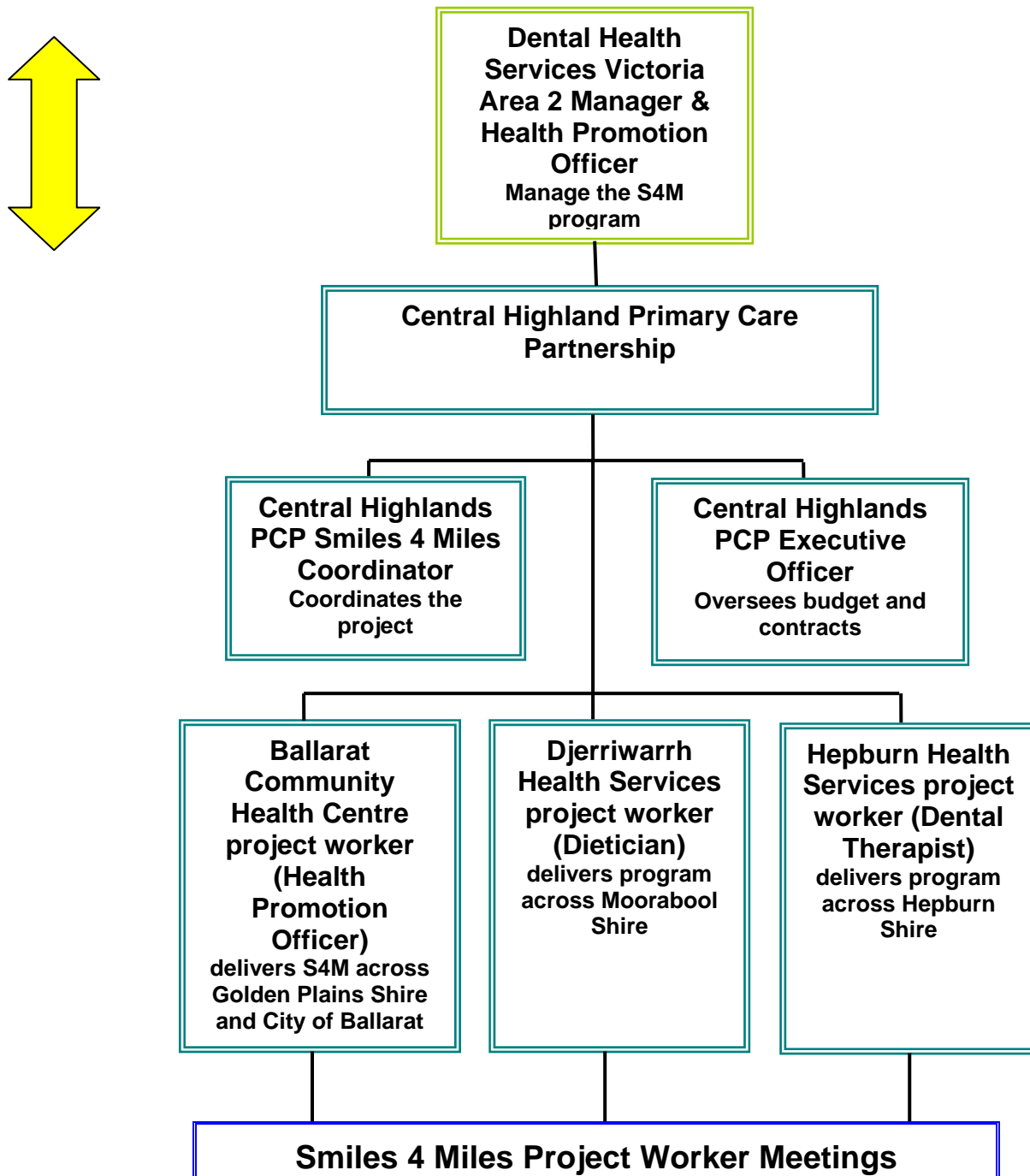
### Dental clinics

Ballarat Dental Clinic (8)  
East Grampians Health Service (1)  
Edenhope District Memorial Hospital (1)  
Hepburn Health Service – Creswick (1)  
Hepburn Health Service – Daylesford (1)  
West Wimmera Health Service (2)  
Wimmera Health Care Group  
Dimboola (1)  
Wimmera Health Care Group  
Horsham (2)

### Mobile dental vans

Ararat Mobile Dental Van (2)  
Ballarat Mobile Dental Van (2)  
Horsham Mobile Dental Van (2)

## CHPCP Model Structure



This chart indicates the flows of communication and the roles and responsibility of each person. DHSV communicate in most instances with the CHPCP S4M Coordinator or through the PCP Executive Officer (Manager). Project workers are welcome to communicate directly with DHSV but the majority of communication is through the PCP Coordinator. Smiles 4 Miles project workers have regular contact through bi monthly project worker meetings and email and phone contact.

## Health Promotion projects with similar delivery design

CHPCP has delivered another program in a similar way called the Fad diets Don't Work program, this was successfully delivered by 2 agencies across 2 local government areas successfully.

Fad Diets Don't Work was a Go For Your Life program which engaged teenagers in the community to discover their opinions on fad diets. This program was conducted in August 2006 using Lead On Ballarat and Ballan and District Health and Care. Two sessions were held one in Ballan and the other in Ballarat. The use of multiple agencies in this program meant that it was able to draw on the expertise of multiple people with in different areas of expertise, with a health agency and youth agency focused on building the capacity of the community through young people. The program was delivered using multiple strategies including youth theatre, workshops and focus group sessions. The program was able to be delivered in 2 local government areas therefore increasing the awareness of the teenagers involved in the program of their local service providers and in some cases establishing a relationship with those service providers.

Primary Care Partnerships have a key role in promoting and facilitating the development of partnership and partnership was one of the key successes through the delivery of the Fad Diets Don't Work Program.

Primary Care Partnerships are increasingly being used as the vehicle of choice for partnership work and funding submissions, this has been demonstrated by a number of recent program including the Forever Active program and Footsteps to Fitness. Both of these programs have been delivered utilised a lead agency with the guidance of a steering committee of partners. The Forever Active Program has been rolled out utilising one of our member agencies Central Highlands Sports Assembly. The Forever Active program had the key deliverables of:

- To establish a network that will provide project workers (who work with older adults) with opportunities to come together to discuss and plan potential physical activity programs,
- Develop partnerships,
- Promote existing programs,
- Have access to the latest research
- Consult with participants in a coordinated manner,
- To introduce new physical activity opportunities for older adults in the Central Highlands Region
- To provide older adults with specific physical activities and competitions.

This project was based on working in partnership with agencies offering physical activity opportunities for older adults to prevent duplication and increase awareness of what is on offer.

The Footsteps to Fitness program utilises a lead agency Ballarat District Nursing and Health Care to deliver the program. The overall development of the program has come from the steering committee who consist of Vision Australia, Delacombe Renewal, Department of Veterans Affairs, Central Highlands Sports Assembly, McCallum Disability Services, Ballarat Community Health Centre and Central Highlands Primary Care Partnership. As members of the CHPCP, these agencies work together to oversee the delivery of Footsteps to Fitness in the City of Ballarat. This collaborative partnership has shaped the direction of program which encourages walking for all abilities. Delivering programs in this manner ensures the skill development of practitioners in agencies.

The CHPCP structure comprises a number of networks which bring multiple agencies together. These including the Child and Family Platform, which work together on issues identified by children and families, Central Highlands Aged and Disability Alliance which draws agencies together to work in partnership on issues facing the aged and disabled populations, a Youth Platform is about to be implemented (please see diagram). CHPCP staff facilitates this work on a regular basis and develops partnership across the sector. PCP's are increasingly working across departments including Department of Human Services, Department of Planning and Community Development, Department of Justice and other relevant state and commonwealth departments.

## **Working in multiple Local Government Areas**

Delivering the program across multiple local government areas can be a challenging experience. The way the program has been developed allows allocation of key workers within their local area who have local knowledge to implement and support the program. This ensures maximum coverage of the Central Highlands catchment. This would not be achieved if there was a sole worker to cover the whole catchment. The Project Worker delivering within each of the LGA's means that Preschool Teacher training, and the required travel to each Preschool becomes achievable. With a large geographical distance in some cases between preschool teachers, it was difficult to conduct a single training session across the region. This overcomes the barrier of finding a suitable time for DHSV and preschool teachers to arrange training. All workers within this region have a S4M flip chart and other relevant materials to be able to deliver training.

Having a local worker in their own service area also increases the awareness of the public of their local service providers as well as the S4M program. Smiles 4 Miles has links to local networks and a range of plans and other services such as Maternal and Child Health and Best Start across the Central Highlands region, including the CHPCP 2006-2009 Community Health Plan.

## Literature Review

Smiles 4 Miles is delivered differently across the state depending on the current and future needs of the area in which the program is being delivered. In most areas across the state the program is delivered by single agencies, or in a local government area. More recently Primary Care Partnerships have become involved through the engagement of DHSV.

Smiles 4 Miles in the City of Greater Geelong is delivered by Barwon Health. The program is implemented in 41 Preschool settings across the City of Greater Geelong and was part of the initial pilot program of Smiles 4 Miles in 2003. The program started in 6 preschool and expanded to become the 41 that are currently implementing the program. Smiles 4 Miles is delivered from 5 campuses of Barwon Health with coordinators for all of the sites, under the coordinator there are multiple workers who implement the program in the preschool. The coordinators at each of the 5 sites report to the key coordinator who oversees the delivery of S4M at all of the sites.

The S4M program in the City of Greater Geelong is comprised of both Foundation (Prevention) and Access ID and Referral (Treatment) components focused S4M in the City of Greater Geelong works in partnership with Romp and Chomp and Kids Go for Your Life. The Romp and Chomp program has key messages of healthy eating, active play and healthy drinks messages. Barwon health also works in partnership with the Kids Go for Your Life which supports the key messages of incorporating healthy eating and increasing physical activity into children's lives. These programs link together in the Geelong Kinder Cluster to imbed these key messages and policy into preschools, together they alleviate the sometimes overwhelming pressure placed on Preschool teachers, parents and children through seemingly competing programs.

Working with Romp and Chomp and Kids Go for Your Life has changed the way that the program is delivered in Geelong. These three programs work collaboratively across the region with regular meetings occurring across Senior Level Management, Middle management level and project managers. These three tiers of management meet on a regular basis to discuss the strategic direction of the projects and to develop joint resources for future use.

S4M in the City of Greater Geelong encourages preschool teachers, parents and children at participating centres to complete a feedback survey on their opinions of the program, this is encompassed as a classroom activity for the children of the centres. Parental engagement sessions are completed at every kinder every year, they area all completed in 2 weeks with multiple allied health professionals involved. Preschool teachers are involved in professional development each year through the Greater Geelong Kinder cluster. The Smiles 4 Miles program in this catchment has a great coverage with a rigorous system in place to support it's delivery.

The index of Relative Socio-Economic Disadvantage (IRSED) is one of four Socio-Economic Indices for Areas (SEIFA) measured by the Australian Bureau of Statistics. This index is derived from Census attributes such as low income, low educational attainment, high unemployment, jobs in relatively unskilled occupations and other variables that are believed to reflect disadvantage such as wealth, living conditions, indigenous status and single parent families. According to the IRSED the City of Ballarat was ranked as the most disadvantaged LGA in the CHPCP catchment. It had a score of 993.4, and was ranked 24<sup>th</sup> of the 78 LGAs across Victoria. The second most disadvantaged in our catchment area was Hepburn Shire (26<sup>th</sup> in

Victoria; score of 994.0), followed by Golden Plains (43<sup>rd</sup>: score of 1014.2) and the least disadvantaged LGA in the CHPCP was Moorabool Shire (48<sup>th</sup>; score of 1017.0) Given the size of the City of Ballarat LGA (approx 90,000) it was decided that the identification of preschools most in need of the S4M program could take place through the Best Start program and key demographic data. This was to ensure that the preschools that were selected were in the most disadvantaged areas of Ballarat. In the other Local Government Areas the program is delivered into all preschools in the area as there are smaller numbers and this is within the capacity of the workers to do so.

The 2006 the State of Victoria's Children report (DHS, 2006) stated that nearly one third of children aged between 6 months and 12 years had never seen a dentist. S4M is a key program in the Central Highlands catchment utilised to address this issue. Smiles 4 Miles sites are selected based on high rates of decayed missing and filled teeth and areas with a low socio economic index.

Regional Victorians are more likely to have poor dental health than those living in metropolitan areas. In rural Victorian regions dental conditions are one of the top five causes of hospital admission that could be avoided with better preventative care. Rural regions have more than twice the rate of hospital admissions for dental conditions than metropolitan regions. The difference in hospital admissions for dental conditions between rural and metropolitan regions lies primarily with children aged 0-9 years. (Department of Human Services. *Improving Victoria's Oral Health: 2007:13*).

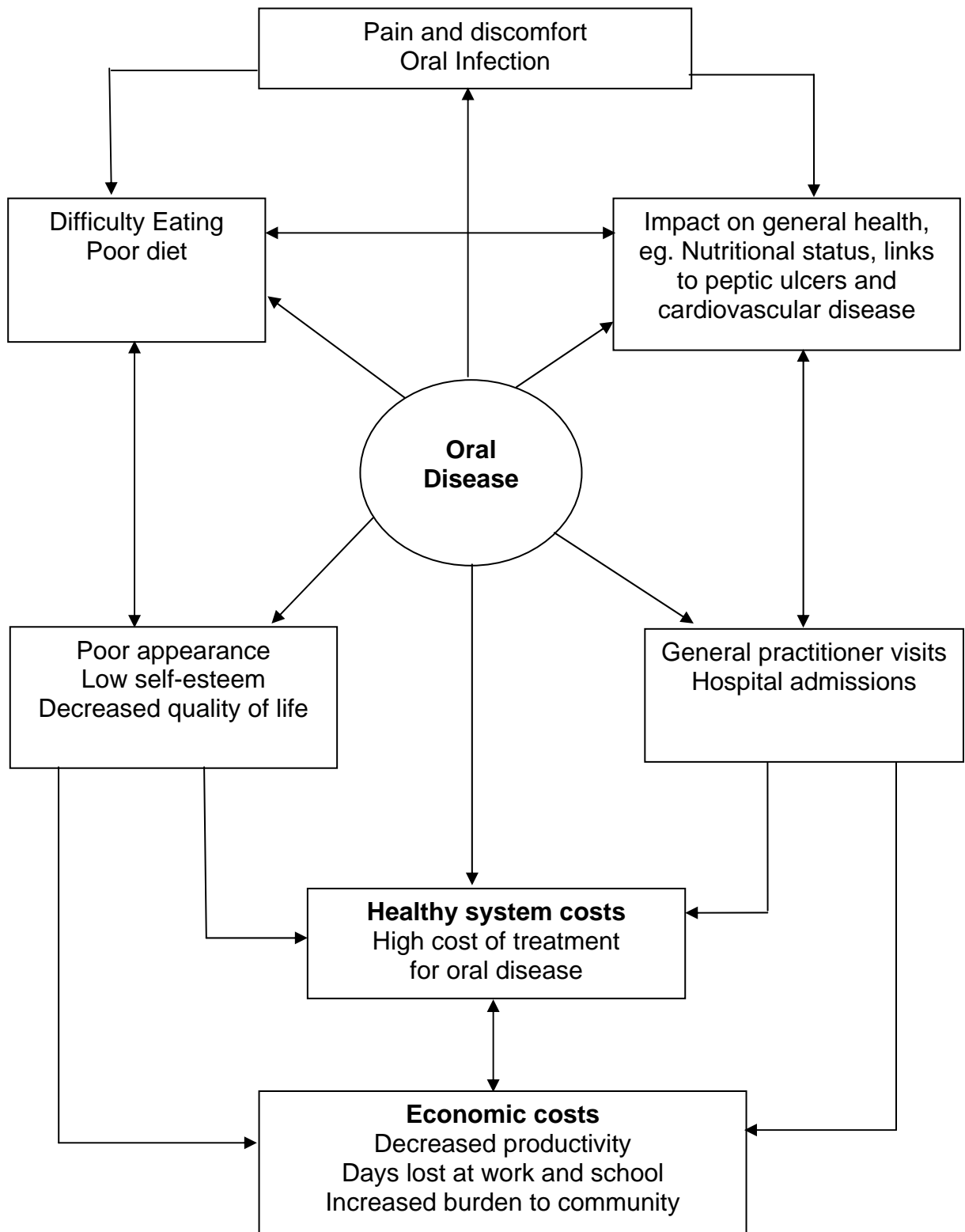
In the Grampians region, dental conditions were second only to diabetes complications for the total highest ACSC admissions. Ambulatory care sensitive conditions (ACSCs) are those for which hospitalisation is thought to be avoidable if preventative care and early disease management are applied, usually in an ambulatory setting (ACSC 2004-2005 update). In the Grampians region there was a marked difference in the ACSC admissions for oral health from 1997-98 data to 2004-05 data the difference ranged from 4.1 per 1,000 population to approx 5.2 per 1,000 population (Department of Human Services *Improving Victoria's oral health, 2007:12*).

Good oral health is an important aspect to the overall health and wellbeing of a person.

Smiles 4 Miles builds on Australia's National Oral Health Plan (*Healthy lives healthy mouths, 2004:vi*) which contains the 4 key themes of:

- Recognising that Oral Health is integral part of general health
- A population health approach, with a strong focus on health promotion and the Prevention and early identification of oral disease
- Access to appropriate and affordable services including health promotion, prevention, Early Intervention and treatment for all Australians.
- Education to achieve sufficient and appropriately skilled workforce, and communities that effectively support and promote oral health (Department of Human Services *Improving Victoria's Oral Health: 2007, ix*)

### Impact of oral disease



(Department of Human Services: *Improving Victoria's oral health* 2007:9)

Oral Health is fundamental to overall health, wellbeing and quality of life. Periodontal disease contributes to cardiovascular disease, preterm birth and low birth weight. Oral disease is associated with aspiration pneumonia, hepatitis C, HIV, infective endocarditis, otitis media and nutritional deficiencies in children and older adults (AHMAC 2001).

## **Key Areas for Implementation of S4M across Multiple Sites**

### Organisational Requirements:

All agencies who receive funding from the Primary Health Branch of DHS are required to write a three year strategic Health Promotion plan which includes priority areas of Health Promotion work.

The following provides an overview of some of the key areas to be considered when implementing S4M in a multi site model.

### PCP

- Planning – there are clear planning processes in place in the PCP, nutrition or oral health as priority area of the PCP to ensure commitment to the work.  
Links to other key stakeholder via PCP planning processes
- Engagement of Key Stakeholders in target area
- Capacity of PCP to coordinate the delivery Smiles 4 Miles, including planning and evaluating.
- Ability to “value add” to the program
- Flexibility
- Clear delivery mechanisms.

### Agency

- Member of Primary Care Partnership
- Clear planning processes in place and a link to the PCP plan.
- A culture that supports the implementation of S4M and health promotion messages.
- Capacity to deliver the program
- Ability to link with other programs within the agency such as dietician
- Links to other supportive structures and organisations
- Identified in priority areas of work

All contracted agencies are member agencies of CHPCP and have nutrition as a priority of their health promotion work. Other plans regionally that have identified oral health as a priority such are the Ballarat Health Services Population Health and Advisory committee, which has identified oral health as a priority. Golden Plains Health Planning forum and the Moorabool Health and Wellbeing Committee Local Area Plan has identified dental health as an issue.

Improving nutrition and oral health is one of the priority areas of the PCP. The S4M program is key to improving the nutrition and oral health status of preschool aged children and their families in communities across the catchment. The PCP has had a key role in the implementation of fluoride in the Ballarat water supply. The primary care partnership has further developed and established it's relationship with the Public Dental Clinic in Ballarat. This relationship been developed through the access ID and Referral component of the S4M program and in partnering in a submission to reduce the dental clinic waiting list.

## **Roles and Responsibilities**

### DHSV:

- Regular contact with CHPCP coordinator
- Contract arrangements for coordinating PCP
- Oversees planning and reporting requirements
- Coordinates S4M resources to agencies
- Ensures project is running to timelines
- Provide resources for program delivery
- S4M award certificates
- Training
- Liaison with CHPCP

### CHPCP Coordinator:

- Facilitates and oversees the delivery of the program across the catchment.
- Coordinator regular contact with DHSV and the project workers
- Facilitation of regular project worker meetings
- The coordinator in close consultation with the project workers develops the S4M plan and reports for DHSV for the Central Highlands catchment
- The Coordinator ensures that guidelines and timelines and funding requirements and payments are met as required by DHSV
- Contract arrangements for contracted agencies

### Contracted Agency Project Workers:

- Deliver the S4M program into the preschool settings
- Project workers are involved in writing the plan and reports for their own catchment (see diagram page 4 for catchment areas)
- Regular contact with S4M coordinator, implementation settings and DHSV as required.
- Undertake training so that they are able to train preschool teachers and deliver parent engagement sessions on a regular basis
- Ordering resources and award certificates for preschools
- Regular attendance at bi monthly project worker meetings
- Delivery of information sessions to other workers and meetings as required
- Utilise other organisational resources and skills within their agency

## **Delivery Design System**

### **Evaluation**

As the program has been implemented over a number of years the effectiveness has grown, there are clear results across the region which demonstrate the behaviour change and change in what the children are bringing in their lunchbox and water bottles over the course of the school year. All lunchbox and water bottle surveys across the catchment show an increase in healthy snacks and drinks and a decrease in the amounts of high fat, salt and sugar foods and drink.

### **Risks**

- Contracting 3 PCP member agencies to deliver the program in 4 local government areas, which can limit resources to each area.

- Requirement for ongoing funding as the program is not yet able to be sustained independently from DHSV
- Balancing differing work loads can mean that pressing issues are dealt with first.
- Staff turnover in contracted agency, PCP and preschool staff and DHSV can create communication issues and delays in implementation.

### **Challenges**

1. The coordinator being the key contact for DHSV is not necessarily aware of the specifics that occur in each individual preschool settings.
2. Ensuring that all information is passed on from DHSV to the project workers and that all project worker information is passed on to DHSV can present some difficulties in communication across multiple sites.
3. Small amount of time allocated through limited resources, this can mean that timelines can be difficult to adhere to if the preschool teacher is away.
4. Planning for implementation within the Central Highlands catchment required changes to the planning templates. In the 07-08 plan, it was discovered that the plan would be easier to follow and report on if it was split into agency specific areas of work. This has occurred in the 08-09 plan.
5. Being one contact point for DHSV can mean that the planning, reporting and information sharing with DHSV takes longer than it would with one person delivering S4M.
6. Drought has meant a reduction in drinking water quality making the water less palatable.
7. Occasionally a Preschool may not want to engage in the program.

### **Strategies for addressing some of the challenges**

- Gathering specific information from each project worker at the beginning of the year, is used to address challenge 1 (please see appendix 1).
- Regular email and the bi monthly project worker meetings facilitates information flow and addresses challenge 2
- Changes to the planning templates to meet the needs of delivery addresses challenge 4 (see appendix 2)
- Allowing extra time for planning and reporting addresses challenge 3
- DHSV attendance at some project worker meetings for feedback and information is used to address challenge 2.
- Building relationships with preschools who are involved in preschool clusters to engage a number of preschools at once addresses challenge 3

### **Benefits**

Working across a larger area on less resources can be problematic is also a strength of the program because of the multiple professions of people delivering it and the support that this provides.

- The program is delivered utilising a dietician, a health promotion officer and a dental therapist. This delivery design allows for shared learning's and support across multiple professions and greater coverage across the Local Government areas. In each contracted agency other skills from other disciplines are utilised.
- Because of the coordinator role is embedded in the delivery of the program, it ensures the program is sustainable enough to roll out without a high demand for DHSV.

- Part of the strength of involving the PCP in the delivery of the program is the ability to link it in with other work of the PCP. Nutrition and Oral health is a priority area of the PCP and this ensures that S4M is part of our ongoing work. A large proportion of CHPCP member agencies identify nutrition as a priority area of work.
- S4M is seen as a vital part of a multi pronged approach to oral health across the Central Highlands catchment
- A range of other networks and committees have flagged oral health as an issue and promote discussion of oral health and nutrition as relevant.
- The reach of the program is across 7025 square kilometres and approximately 1500 children for one point of contact for DHSV.

## **Sustainability**

Currently Smiles 4 Miles is heavily reliant upon the ongoing support required for the settings to implement.

The annual turnover of preschool children means that each year potentially provides a new client base with which to work. The establishment of the program in the policies and procedures of the settings is critical. The engagement of preschool clusters is valuable in maximising training and information opportunities. The cost of resources such as lunchboxes and drink bottles while providing a valuable marketing tool is costly and may need to be reviewed regarding sustainability. For the future of the program if possible it is recommended that these resources continue. Discussion with Department of Education and Early Childhood development needs to occur for the program to be part of the core preschool curriculum requirements at a state-wide basis to further embed preschool engagement.

In the Central Highlands Region the way in which the program is delivered means:

- There is decreased reliance on DHSV as, project workers know that they are able to contact the program coordinator for the day to day running of the program. There is also a large amount of peer support that occurs through the project workers.
- Project workers are able to deliver training to relevant groups like new preschool teachers or other allied health staff within the organisation
- Organisations delivering the program have identified nutrition as a priority area this commits agencies to the work as it aligns with their strategic priority
- S4M project workers are able to engage other allied health staff to help deliver messages the key messages of the program
- All agencies involved in the program provide extra resources on top of what they receive in funding this ensures that the program has good reach and that agencies are strongly committed to the delivery of the program in their local area
- Engage preschool clusters in supporting the implementation
- Engagement of dental clinics in access identification & referral

## **Future of Smiles 4 Miles**

To ensure the future of Smiles 4 Miles in this catchment it is recommended that:

- Agencies adopt the program as part of their health promotion work.
- That there is a continuation of the Smiles 4 Miles resources
- DHSV provide funding according to the levels of implementation required including
  1. New preschools
  2. S4M implemented but not yet embedded.

3. S4M embedded into the preschool setting and requiring maintenance support only.

## **Summary**

The model as developed by CHPCP has been shown to be effective in both cost and outcomes. The use of contracted CHPCP member agencies has also seen commitment and provision of other support from the agencies in delivering the program. S4M accreditation as a health promoting preschool provides marketing status for preschools to engage parents. As a state-wide initiative, S4M has progressed to be well recognised early intervention Health Promotion program and we look forward to continuing to progress it's development into the future.

## References

Australian Health Ministers' Advisory Council (AHMAC) Steering Committee for National Planning for Oral Health 2001, *Oral health of Australians: National planning for oral health improvement: Final report*, South Australian Department of Human Services.

Australia's National Oral Health Plan (*Healthy lives healthy mouths*, 2004 :vi

Department of Human Services *Improving Victoria's oral health*, 2007:12

Department of Human Services (DHS) 2006b, *the state of Victoria's children report*, Office for Children, Victoria DHS

The index of Relative Socio-Economic Disadvantage (IRSED) is one of four Socio-Economic Indices for Areas (SEIFA) measured by the Australian Bureau of Statistics

<http://www.health.vic.gov.au/pcps/about/index.htm>

Preschool Contact information as developed in S4M Area 1

ORGANISATION	POSTAL ADDRESS	CITY	P/CODE	PHONE	FAX.	EMAIL	SESSION TIMES	BEST CONTACT TIME	TOTAL NUMBER OF CHILDREN 3 and 4 yr old if applicable	RESOURCES ORDERED FOR FOLLOWING YEAR / date
						Teacher name				
NUMBERS OF DRINK BOTTLES	NUMBERS OF LUNCH BOXES	NUMBERS OF OTHER RESOURCES	KINDER TEACHER TRAINING COMPLETED / date	PARENT ENGAGEMENT COMPLETED/ approx date	NUTRITION POLICY UPDATED OR IMPLEMENTED / date	LUNCHBOX SURVEY ONE / date	LUNCHBOX SURVEY two / date	RESOURCES ARE DELIVERED TO CENTRE/ date		

Extracted from excel document and altered to fit word.

# ***Smiles 4 Miles***

## Oral Health Promotion Plan

To be read in conjunction with ***Smiles 4 Miles*** program and related funding structure July 2008 – June 2009

Central Highlands Primary Care Partnership

*Smiles 4 Miles (S4M)* Oral Health Promotion Plan

July 2008 – June 2009

Date	12/5/08
Organisation	Central Highlands PCP
Program Manager	Helen Wade
Contact details	<a href="mailto:helenw@chpcp.org">helenw@chpcp.org</a> 5339 4051 15 Violet Grove Wendouree
Program Coordinator	Stacey Newman
Contact details	<a href="mailto:staceyn@chpcp.org">staceyn@chpcp.org</a> 5339 4207 15 Violet Grove Wendouree
Core program element	PREVENTION
Extension program element (if applicable)	Access Identification and Referral

This planning template includes:

Part one                    Foundation Program  
Part two                    Extension Program

All sites are required to fill in part one. Only those sites applying for extension program funding should complete part two.

Table 1: Program aims, objectives and description

<b>Program Aim:</b>
<ul style="list-style-type: none"> <li>To provide public oral health services and prevention programs for Victorian preschool-aged children</li> </ul>
<b>Objectives:</b>
<ul style="list-style-type: none"> <li>To develop health promotion strategies to prevent or reduce risk of oral disease</li> <li>To gain access to families considered at highest risk of oral disease in order to:</li> <li>To identify children at highest risk of oral disease and refer appropriately for care</li> </ul>
<b>Program description:</b>
<p><i>Smiles 4 Miles</i> involves the interlinking of two key oral health strategies for preschool aged children:</p> <ul style="list-style-type: none"> <li>Integrated health promotion programs focusing on building capacity and supportive environments in the early childhood sector</li> <li>Targeted treatment services focusing on children at highest risk of oral disease</li> </ul>

Based on the overarching aim of the *S4M* program (Table 1) please fill out the following template that describes the strategic approach to be applied by your site in 2008/2009. You will need to identify the key projects/deliverables that will be accomplished within each key result area, and define how and when those outcomes will be measured.

- Key result areas (KRAs)
- Key deliverables (KDs)
- Key performance indicators (KPIs)
- Timeline
- Outcome – to be left blank for final reporting\*

\* Consultative progress appraisal, based on the information you provide in this document, will take place as follows:

- verbal two-way consultation with DHSV Area staff in December 2008, (and on a minimum of monthly basis throughout the year)
- written report based on completed outcomes in June 2009
-

## **The Significance of Oral Health in the Central Highlands Region.**

The Central Highlands Primary Care Partnership (CHPCP) is located approximately one hour west of the Melbourne metropolitan area and encompasses the City Of Ballarat, Golden Plains, Hepburn and Moorabool Shires. It has a total area of approximately 7025 square kilometres. The index of Relative Socio-Economic Disadvantage (IRSED) is one of four Socio-Economic Indices for Areas (SEIFA) measured by the Australian Bureau of Statistics. This index is derived from Census attributes such as low income, low educational attainment, high unemployment, jobs in relatively unskilled occupations and other variables that are believed to reflect disadvantage such as wealth, living conditions, indigenous status and single parent families. According to the IRSED the City of Ballarat was ranked as the most disadvantaged LGA in the Central Highlands Primary Care Partnership catchment. It had a score of 993.4, and was ranked 24<sup>th</sup> of the 78 LGAs across Victoria. The second most disadvantaged in our catchment area was Hepburn Shire (26<sup>th</sup> in Victoria; score of 994.0), followed by Golden Plains (43<sup>rd</sup>: score of 1014.2) and the least disadvantaged LGA in the CHPCP was Moorabool Shire (48<sup>th</sup>; score of 1017.0)

Of the family households across Central Highlands, 34.4% are families with children under 15 years of age. The highest percentage of families with children less than 15 years is in the Golden Plains Shire (37.6%). Single parent families represent 14.3% of family households across Central Highlands, with the City Of Ballarat having the highest percentage of single parent families (18.1%).

In the Grampians region, dental conditions were second only to diabetes complications for the total highest ACSC admissions. Ambulatory care sensitive conditions (ACSCs) are those for which hospitalisation is thought to be avoidable if preventative care and early disease management are applied, usually in an ambulatory setting (Department of Human Services, *ACSC 2004-2005 Update: Victoria*)

The admission rate ratios in the Grampians region were significantly higher than the Victorian averages for several conditions including dental conditions. There were 1,076 admissions in the Grampians regions in 2004-2005, which represented a dental admissions rate per 1000 persons of 4.6 compared with the Victorian state average of 2.2. Of all the regions in Victoria, the Grampians Region has the highest rate of hospital admissions for dental conditions. Dental disadvantage within regional Victoria is significant. Dental waiting lists in many locations within regional Victoria are substantial. General public dental waiting time for Ballarat at May 2008 was 46 months and for dentures was 56 months. (VOHA, 2006).

As well as long waiting lists many regional Victorian areas do not have community water fluoridation. Water fluoridation has been shown to have protective effects against dental caries at all ages, reduces the socio-economic inequalities in incidences of dental caries, and has been shown to specifically reduce the incidence of dental caries in Victorian children (Department Of Human Services, *Water Fluoridation: Information for health professionals*, 2004). Evidence has shown that six year old children living in fluoridated areas of Victoria have up to 45% less caries experience than those in non-fluoridated areas.

The Central Highlands Primary Care Partnership Community Health Plan identifies nutrition and oral health as one of it's 3 health promotion priority areas. As a result of this Central Highlands PCP has contracted 3 of it's member agencies to deliver Smiles 4 Miles across all 4 of our local government areas (City of Ballarat, Golden Plains, Hepburn Shire and Moorabool Shire) in a unique multiple site delivery system. This has involved Hepburn Health Services Dental

Therapist, Ballarat Community Health Centre utilising 2 Health Promotion staff and the dietician, which deliver across City of Ballarat and Golden Plains Shire's and Djerriwarrh Health Services which utilise their dietician to deliver the program.

## PART ONE: FOUNDATION PROGRAM Central Highlands PCP

Note: **Part one** is primarily founded on the established provision of core *S4M* principles, with the objective of maintaining a consistent health promotion strategy to prevent/reduce the risk of oral disease. Therefore, the included key result areas and key deliverables are a minimum requirement. The key performance indicators are to be tailored for implementation within your specific site.

Please consult with your DHSV representative if the needs of your site make it necessary to alter any of these. **Additions** are encouraged.

## Part One: Foundation Program

Key Result Areas	Key Deliverables	Key Performance Indicators	Timeline	Outcome
Central Highlands Primary Care Partnership				
Consultation and stakeholder engagement	<ul style="list-style-type: none"> <li>Establish or link with relevant existing working groups /stakeholders</li> </ul>			
Program Implementation in Settings	<ul style="list-style-type: none"> <li>Kinders &amp; other settings</li> <li>Where &amp; Whom?</li> </ul>			
Resources	<ul style="list-style-type: none"> <li>Feedback on development of resources.</li> <li>Distribution of resources to imp sites.</li> <li>Branding on promotional material.</li> </ul>			
Training & Support	<ul style="list-style-type: none"> <li>Kinders..... who &amp; when</li> <li>Other sectors – presentations, training.</li> <li>Project worker meeting attendance.</li> <li>Other activities.</li> </ul>			
Recognition	<ul style="list-style-type: none"> <li>Awards certs – who &amp; when</li> </ul>			
Reporting	<ul style="list-style-type: none"> <li>When and by whom</li> <li>Progress / Lunch Box Surveys</li> </ul>			
Ballarat Community Health Centre Incorporating:				

City of Ballarat and Golden Plains Shire				
<b>Consultation and stakeholder engagement</b>	<ul style="list-style-type: none"> <li>Establish or link with relevant existing working groups /stakeholders</li> </ul>			
<b>Program Implementation in Settings</b>	<ul style="list-style-type: none"> <li>Kinders &amp; other settings</li> <li>Where &amp; Whom?</li> </ul>			
<b>Resources</b>	<ul style="list-style-type: none"> <li>Feedback on development of resources.</li> <li>Distribution of resources to imp sites.</li> <li>Branding on promotional material.</li> </ul>			
<b>Training &amp; Support</b>	<ul style="list-style-type: none"> <li>Kinders..... who &amp; when</li> <li>Other sectors – presentations, training.</li> <li>Project worker meeting attendance.</li> <li>Other activities.</li> </ul>			
<b>Recognition</b>	<ul style="list-style-type: none"> <li>Awards certs – who &amp; when</li> </ul>			
<b>Reporting</b>	<ul style="list-style-type: none"> <li>When and by whom</li> </ul>			

	<ul style="list-style-type: none"> <li>• Progress / Lunch Box Surveys</li> </ul>			
<b>Hepburn Health Service Incorporating: Hepburn Shire Council area</b>				
<b>Consultation and stakeholder engagement</b>	<ul style="list-style-type: none"> <li>• Establish or link with relevant existing working groups /stakeholders</li> </ul>			
<b>Program Implementation in Settings</b>	<ul style="list-style-type: none"> <li>• Kinders &amp; other settings</li> <li>• Where &amp; Whom?</li> </ul>			
<b>Resources</b>	<ul style="list-style-type: none"> <li>• Feedback on development of resources.</li> <li>• Distribution of resources to imp sites.</li> <li>• Branding on promotional material.</li> </ul>			
<b>Training &amp; Support</b>	<ul style="list-style-type: none"> <li>• Kinders..... who &amp; when</li> <li>• Other sectors – presentations, training.</li> <li>• Project worker meeting attendance.</li> <li>• Other activities.</li> </ul>			
<b>Recognition</b>	<ul style="list-style-type: none"> <li>• Awards certs – who &amp; when</li> </ul>			
<b>Reporting</b>	<ul style="list-style-type: none"> <li>• When and by whom</li> <li>• Progress / Lunch Box Surveys</li> </ul>			
<b>Djerriwarrh Health Service Incorporating:</b>				

Moorabool Shire Council area				
<b>Consultation and stakeholder engagement</b>	<ul style="list-style-type: none"> <li>• Establish or link with relevant existing working groups /stakeholders</li> </ul>			
<b>Program Implementation in Settings</b>	<ul style="list-style-type: none"> <li>• Kinders &amp; other settings</li> <li>• Where &amp; Whom?</li> </ul>			
<b>Resources</b>	<ul style="list-style-type: none"> <li>• Feedback on development of resources.</li> <li>• Distribution of resources to imp sites.</li> <li>• Branding on promotional material.</li> </ul>			
<b>Training &amp; Support</b>	<ul style="list-style-type: none"> <li>• Kinders..... who &amp; when</li> <li>• Other sectors – presentations, training.</li> <li>• Project worker meeting attendance.</li> <li>• Other activities.</li> </ul>			
<b>Recognition</b>	<ul style="list-style-type: none"> <li>• Awards certs – who &amp; when</li> </ul>			
<b>Reporting</b>	<ul style="list-style-type: none"> <li>• When and by whom</li> <li>• Progress / Lunch Box Surveys</li> </ul>			

**PART TWO:  
EXTENSION PROGRAM  
Central Highlands PCP**

Note: Part two should only be completed once in-principle agreement has been reached with DHSV that funding will be available for the element to be adopted by your site. Please consult with your DHSV representative during development of part two.

## **Part Two: Extension Program**

To assist us with understanding the specific needs of your community and the strategies to be implemented please complete the following:

- 1) Identify the key focus that the additional component will address.
  - a) Access ID and Referral
  - b) Capacity Building
  - c) Peer Education
  - d) Research and Innovation
- 2) Provide a vision statement, which clearly outlines what Oral Health Promotion outcomes you will accomplish in 2008/2009 through the extension program component of S4M.
- 3) Provide details of how DHSV can best support you in this work

Based on your local knowledge and expertise please complete the following template, describing the strategic approach to be adopted by your site in 2008/2009, in regard to the core focus you have identified. You will need to identify the key projects/deliverables that will be accomplished within each key result area, and define how and when these outcomes can be measured. Please use the information you have provided in questions 1-3 to formulate your key result areas. You will need to be very specific about what you plan to do, and how it will be measured.

\* Consultative progress appraisal, based on the information you provide in this document, will take place as follows:

- Verbal two-way consultation with DHSV Area staff in December (and on a minimum of monthly basis through out the year)
- Written report based on completed outcomes in June.

Key Result Ares	Key Deliverables	Key Performance Indicators	Timeline	Outcome
<b>Central Highland Primary Care Partnership</b>				
Consultation & Stakeholder Engagement	• Who & When			
Active Relationships				
Program Implementation & Settings	• Who & When			
Resources & Information	• DHSV resources for training			
Training & Support	• DHSV? • Who needs to be trained & when			
Reporting	• When & by whom			
<b>Ballarat Community Health Centre Incorporating: City of Ballarat area</b>				
Consultation & Stakeholder Engagement	• Who & When			

<b>Active Relationships</b>				
<b>Program Implementation &amp; Settings</b>	<ul style="list-style-type: none"> <li>• Who &amp; When</li> </ul>			
<b>Resources &amp; Information</b>	<ul style="list-style-type: none"> <li>• DHSV resources for training</li> </ul>			
<b>Training &amp; Support</b>	<ul style="list-style-type: none"> <li>• DHSV?</li> <li>• Who needs to be trained &amp; when</li> </ul>			
<b>Reporting</b>	<ul style="list-style-type: none"> <li>• When &amp; by whom</li> </ul>			