

# INNER NORTH WEST PRIMARY CARE PARTNERSHIP STRATEGIC DIRECTIONS 2017-2021



## WHO WE ARE AND WHAT WE DO

The Inner North West Primary Care Partnership (INW PCP) brings together over forty health and human services operating in the Inner North West region of metropolitan Melbourne. We aim to improve community health and wellbeing by building a stronger, more integrated service system through a collective impact approach supported by four pillars for action: leadership, partnership, system strengthening, and advocacy and influence.

Our vision is founded on a social model of health. We seek to strengthen relationships with primary care, acute and community sectors; where our primary prevention and access and equity focus intersects with their delivery of early intervention and other services to our shared communities.

Our work supports alignment with key policy directions of the Department of Health and Human Services including its Strategic Plan 2016-17, the Victorian Public Health and Wellbeing Plan 2015-19 and outcomes framework, and Health 2040; with Statewide PCP directions and local government municipal public health and wellbeing planning, and other policy and planning directions such as those emerging from the Royal Commission into Family Violence.

## OUR CATCHMENT

The Inner North West PCP catchment comprises of the local government areas of Melbourne, Moreland, Moonee Valley and Yarra and has a population of 504, 467 (2015).

The Inner North West is a vibrant and diverse community and has varying levels of prosperity. Some areas of the Inner North West have high levels of income and employment, and others have complex challenges that impact people's opportunity and choice.

The Inner North West catchment is characterised by:

- Diversity, including diversity of population, culture, educational and ethnic backgrounds. 27.5% of population were born in a non-English speaking country.
- A knowledge-based infrastructure including world class universities and hospitals.
- A rapidly growing population and increased high/medium density development with significant growth in the population forecast over the coming years.
- A strong history of partnering and collaboration to foster positive health outcomes.

To see a snapshot of the population health data for the inner north west catchment – [Click here](#).

For more information about who we are and what we do visit the [INW PCP website](#).

## MEMBER AGENCIES

Access Health & Community  
Anglicare Victoria  
Australian Catholic University - Institute of Child Protection Studies  
Australian College of Optometry  
Australian Red Cross  
Australian Vietnamese Women's Association  
Bolton Clarke  
Campbell Page  
Care Connect Limited  
City of Melbourne  
City of Yarra

cohealth  
Diabetes Victoria Australia  
Inner West Area Mental Health Service, RMH  
JobCo. Employment Services Inc.  
Launch Housing  
Melbourne Counselling Service (Salvation Army)  
Melbourne Health  
Merri Health  
Migrant Resource Centre North West Inc  
MIND Australia  
Moonee Valley City Council  
Moreland City Council

Musculoskeletal Australia  
Neami National  
North Richmond Community Health Centre  
North Western Melbourne PHN  
North & West Metropolitan Region Palliative Care Consortium  
Odyssey House Victoria  
PRONIA  
Reclink Australia  
St Mary's House of Welcome  
St Vincent's Hospital  
The Long Walk

The Royal Victorian Eye and Ear Hospital  
The Royal Women's Hospital  
Travellers Aid Australia  
UnitingCare ReGen  
Victorian Transcultural Mental Health  
VincentCare Victoria  
Western Bulldogs Community Foundation  
Women's Health in the North  
Women's Health West  
Youth Projects Inc



INW PCP acknowledges the support of the Victorian Government



INW PCP acknowledges the traditional custodians of the land on which we work and pay our respects to Elders past, present and emerging. We acknowledge the sorrow of the Stolen Generations and the impacts of colonisation on Aboriginal and Torres Strait Islander people. We also recognise the resilience, strength and pride of the Aboriginal and Torres Strait Islander communities.

## VISION

Healthy and equitable communities

## PURPOSE

Strong partnerships supporting prevention, access and equity through collective action

## PRINCIPLES

### COLLABORATION

We foster inclusive and transparent relationships through a collective impact approach that aligns purpose and direction

### EQUITY

We support equitable health access and outcomes by empowering communities and supporting consumer voice, in order to promote respect and justice for all

### EVIDENCE-BASED

We demonstrate accountability and responsiveness through evidence-based and outcomes-focused practice and evaluation of our impact

### PREVENTION FOCUS

We support primary prevention efforts and their interface with other parts of the planning and service system with a strategic focus on the social determinants of health

### INNOVATION

We are creative and inquiring and have a shared commitment to learning, quality, and building our shared capabilities

### COURAGE

We demonstrate bold and resourceful leadership that is built on trust and is adaptive and agile in a changing environment

## PILLARS FOR ACTION



### LEADERSHIP

#### 1.1 Cross-sector planning

We will lead collective action on agreed priorities that aligns partner resources, supports sustainability, is responsive to emerging issues over time, and reduces duplication

#### 1.2 Shared outcomes

We will maximise partner alignment with local, regional and state outcome indicators and reporting and ensure decisions are supported by accessible and reliable data

#### 1.3 Primary prevention

We will link and support existing primary prevention activity or facilitate new activity as needed to improve population health outcomes



### PARTNERSHIP

#### 2.1 Member engagement

We will develop and purposefully engage our membership, harness and build its expertise, and clearly articulate partnership roles, responsibilities and accountabilities

#### 2.2 System collaboration

We will harness opportunities to strengthen and formalise our collaboration and interface with local, regional and statewide partnerships, academic, and private sector entities

#### 2.3 Community participation

We will improve our responsiveness to the community we serve by promoting their voices in the planning, co-design and evaluation of our work



### SYSTEM STRENGTHENING

#### 3.1 Communications

We will support system strengthening through information sharing, knowledge transfer and demonstrating the impact of our work

#### 3.2 Workforce capability

We will enhance our impact by building workforce capacity and system capabilities with a focus on developing and sharing good practice aligned within our shared priorities

#### 3.3 Research and evaluation

We will partner to identify trends, share research and evaluation findings, and use evidence to inform best practice



### ADVOCACY & INFLUENCE

#### 4.1 Reform environment

We will facilitate ongoing and timely response to the impacts of key sector reforms on members and the communities we serve

#### 4.2 Access and equity

We will influence the social determinants of health by developing shared priorities, objectives and strategies that engage members in support of collective action

#### 4.3 Collective action

We will monitor and report on the impact and influence of our collective action by developing agreed catchment indicators and activity reporting