Primary Care Partnerships (PCPs) are a Victorian Government funded initiative bringing together the health, social, not for profit and local government sectors, who in partnership utilise a place based approach to identify local service, and health and wellbeing issues, and together develop solutions (VicPCP 2017).

**OUR VISION**

'Together We Do Better'

**OUR MISSION**

Build strong relationships, foster healthy communities, and support equitable outcomes.

**OUR PRINCIPLES**

- **Collaboration**
- **Alignment to Government Policy**
- **Preventative Health**
- **Client & Community Empowerment**
- **Workforce capability**
- **Social Determinants of Health**
- **Communications and Technology**

**STRATEGIC PILLARS AND KEY FOCUS AREAS**

<table>
<thead>
<tr>
<th>1. GUIDE SHARED STRATEGY AND MEASUREMENT</th>
<th>2. LEAD AND COORDINATE</th>
<th>3. ADVOCATE AND INFLUENCE</th>
<th>4. SUPPORT PARTNER AND COMMUNITY CAPACITY BUILDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strategic directions and priorities: We will support partners to develop strategic directions, shared priorities and support the development of strong authorising environments.</td>
<td>• Planning, integration and coordination: We will facilitate partnership effectiveness by leading integrated planning and coordination in response to identified needs and gaps.</td>
<td>• Access and equity: We will provide leadership together with our partners to respond to access and equity gaps for vulnerable groups.</td>
<td>• Community leadership and engagement: We will support partners in the development of community leadership, and build workforce capacity in co-design.</td>
</tr>
<tr>
<td>• Collective impact and shared outcomes: We will support partners to align and evaluate their work and report on shared priorities, goals, objectives, impact and outcome measures.</td>
<td>• Cross-sectoral collaboration: We will provide back bone support to build sustainable and enduring partnerships that draw on individual and collective strengths and minimise duplication.</td>
<td>• Primary prevention: We will clearly articulate and use our role as primary prevention experts to improve systems and health environments, and address the structural and social determinants of health.</td>
<td>• Workforce capability: We will enhance workforce capability by providing expertise and training that supports best practice.</td>
</tr>
<tr>
<td>• Research and evidence: We will support partners to undertake evidence based action through promoting research and academic partnerships.</td>
<td>• Strategic stakeholder engagement: We will strategically engage with decision makers in order to understand, interpret and act upon policy and funding directions and translate this into the local context for our partners.</td>
<td>• Supporting sector reforms: We will work with local, regional and state-wide partners to respond to the impacts of sector reforms.</td>
<td>• Communications and technology: We will provide value to partners through linking to and sharing information, resources, expertise and technology.</td>
</tr>
</tbody>
</table>

**STRATEGIC PLAN 2017—2021**

The Inner East Primary Care Partnership (IEPCP) is one of 28 PCPs across Victoria funded by the Department of Health and Human Services. The Inner East catchment in the Eastern Metropolitan Region of Melbourne, comprises the local government areas of Boroondara, Manningham, Monash, and Whitehorse, and has a combined population of 655,279. (DELWP 2017). Community assets include Monash, Deakin, and Swinburne Universities, seven public hospitals and fifteen private hospitals, three Community Health Services and a Women’s Health Service spread over various locations.

Within our catchment, the projected population increase (to the year 2024) is expected to be lower than the Victorian average, although the makeup is changing with higher than average new settler arrivals. The Inner East is culturally diverse with over 35% of people who speak a language other than English at home (including Mandarin, Cantonese, Greek, Italian, and Sinhalaese), compared to 24% across Victoria and 13.8% in the Outer East. In all four of our local government areas, people from China are currently the largest migration group.

The Inner East has the lowest rates of crime in Victoria, and higher rates of social engagement, with over 21% of the population engaged in volunteer activity. In addition, we have the highest rate of young people completing Year 12. The largest population age group is 20–29 years in Boroondara and Whitehorse, 35–49 years (parents/homebuilders) in Manningham, and the Monash median age is 37 years. However the population is also ageing overall, with significant increases expected in older adults 60+.

There is low comparative socio-economic disadvantage in the Inner East, although pockets of disadvantage occur in public housing areas in each municipality. Although there is high home ownership, the Inner East has the lowest availability of affordable rental housing at only 1.8%, compared to 19.1% for Victoria.

In relation to health and wellbeing, the Inner East population tends to rank better than or similar to the Victorian average on most indicators. For example, there is higher life expectancy, fewer avoidable deaths, fewer reports of psychological distress, lower obesity, and lower smoking rates. However, some areas include significantly higher consumption levels of alcohol leading to long term harm amongst adults; a greater number of people with dementia; and injuries due to falls. Children’s participation in physical activity is slightly less than the Victorian average, and consumption of recommended amounts of fruit and vegetables amongst adults is lower in parts of the catchment.

**MESSAGE FROM THE INNER EAST PCP CHAIR: KEVIN FEENEY**

‘The Inner East Primary Care Partnership (IEPCP), working with our broad and diverse member organisations, seeks to improve the lives of our community through collective impact. It is only through our joint efforts can we hope to make a real and enduring difference in people's lives.

This strategic plan is important in not only setting out our common challenges but how we, at IEPCP, can help members work in common. In developing this Plan we have listened to your advice and sought your guidance making this a truly collective effort, one that we trust will provide greater certainty and direction at a time when this is needed more than ever. Our hope is that you, our members and community, will make this a living document with real impact’.

**INNER EAST METROPOLITAN CATCHMENT:**

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Sources: DHHS East Division Population Health and Planning, Health Profile 2017; EMPHN Health Services 2017; Eastern Metropolitan Partnership and South East Metropolitan Partnership (DELWP) 2017
The Inner East PCP Strategic Plan 2017 – 2021 is the outcome of a comprehensive review to determine our future direction, and how to best position ourselves in a time of significant change.

A wide consultation of partners and deep review during 2016 considered the impact of the IEPCP partnership, our strengths, the challenges, and opportunities for the future. The IEPCP Executive Committee explored our value proposition to partners, and commissioned an extensive environmental scan of the planning and policy context to capture the reforms and priorities of government. Simultaneously, the statewide PCP platform (VicPCP) reviewed the landscape, strategic directions and core functions of PCPs, and developed a framework to which the IEPCP has aligned. The IEPCP tested our strategic framework, proposed future directions, and health & wellbeing priorities for action with partners, and received overwhelming support and commitment.

We are confident this Strategic Plan lays the necessary foundations to achieve our Vision, Mission, and core purpose of making a positive difference to health and wellbeing within the Inner East catchment through collaborative effort.

Tracey Blythe Acting Executive Officer

**FOUNDATIONS FOR THE PLAN**

The IEPCP partnership currently comprises 38 signatory organisations and 49 associate partners from across the four local governments of Boroondara, Manningham, Monash and Whitehorse and a wide range of health and community services in Melbourne’s Inner East.

**MEMBER AGENCIES**

**INNER EAST PCP WELCOMES NEW PARTNERS**

**INNER EAST HEALTH AND WELLBEING PRIORITIES**

**CAPACITY BUILDING & WORKFORCE DEVELOPMENT**

- Preventing violence Against Women/ Gender Equity
- Codesign / Community Engagement
- The Well
- Social Inclusion/ Mental Health
- Health Literacy

**ACCESS & EQUITY**

- Healthy Ageing

**PREVENTION**

- Healthy Eating
- Alcohol Harm Minimisation

**MEASURING OUR SUCCESS:**

The Evaluation Strategy to measure the effectiveness of the IEPCP as an organisation, and partnership, draws on three Outcomes Frameworks:

- The Victorian Public Health and Wellbeing Plan Outcomes Framework (DHHS 2016)
- The Collective Impact Framework and Backbone Effectiveness: 27 Indicators (FGS.Org 2012); and
- The I2L2 Framework (Impact + Influence + Leverage + Learning) (ORS Impact 2015)

**INNER EAST PCP WELCOMES NEW PARTNERS**

The Inner East PCP welcomes new partners to join the wider partnership of organisations collaborating to make a difference in health and wellbeing across the Inner East catchment. An application form for membership can be located on the website: www.iepcp.org.au

**Terms of Reference and Partner Application Form**

We respectfully acknowledge we work on Aboriginal land and pay our respects to community members and elders, past and present.

*Staff of the Inner East PCP*