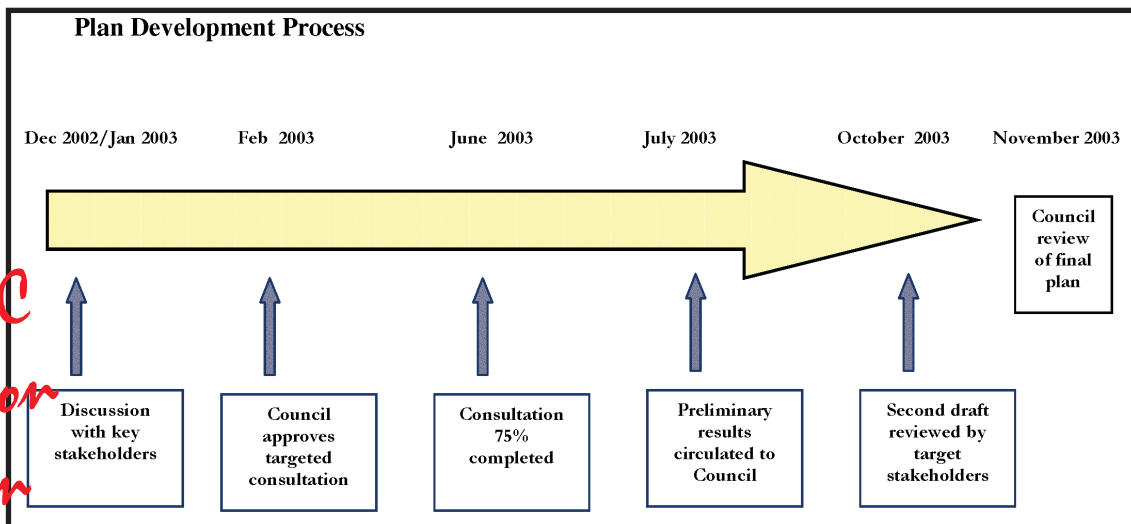


Grand River DHC Health Promotion Strategic Plan



Overview

The purpose of the project was to establish a consistent longer term approach to community-based health promotion for the Grand River District Health Council (GRDHC).

The underlying concept of health promotion is that health promotion includes population health approaches and encompasses the determinants of health. It is assumed that health promotion programs and services contribute significantly to a stronger and more accessible health system and contribute to long-term health outcomes.

The plan focuses on how the GRDHC can best support the efforts of Grand River health promotion stakeholders.

The common goals are to:

- integrate health promotion into GRDHC internal structures and planning activities;
- improve community capacity to address health needs through health promotion;
- optimize health promotion opportunities to address community needs; and,
- support the Grand River health promotion community in sustaining outcomes in health promotion.

The goals and objectives will be achieved by the selection of activities identified in the plan, in conjunction with other health promotion stakeholders, for inclusion in the GRDHC annual operating plan over the next four years.

The plan will promote further attention to outcomes. Long-term outcomes from the activities in the health promotion plan are difficult to measure. These outcomes will not be realized during the actual duration of the planned activities, therefore, attention will focus on process and intermediate outcomes. Process (are we on the right track) and intermediate (shorter-term more easily assessed) outcomes, if favorable, are promising signs that the plan is contributing to the achievement of difficult to measure and longer term goals. Evaluation will be integral to all selected activities.

The report will be distributed to a wide range of health promotion stakeholders, community groups, MPPs, media, and other District Health Councils of Ontario.

The Grand River Health Promotion Community Fostering Positive Relationships

Organization	Unique Role (s) in Health Promotion
Brant County Health Unit	• Key providers within Brant County. • Leaders in population health in Brant.
Haldimand-Norfolk Health Unit	• Key providers within Haldimand & Norfolk Counties. • Leaders in population health in Haldimand & Norfolk.
Six Nations Health Services	• Programming to Six Nations of the Grand River residents.
Norfolk General Hospital	• Participates in the Hospital Health Promotion Network.
Brant Community Healthcare System (BCHS)	• Maintains a unique Community Services Division.
Haldimand War Memorial Hospital	• Offers a variety of programming in Dunnville.
Brant Community Social Planning Council	• Complement efforts in health promotion and the determinants of health (applied community research).
Many other organizations, groups, and individuals in the Grand River area	• Includes professional, community, and volunteer based groups with many different perspectives, skills, and resources many of whom collaborate closely.
Ministry of Health and Long-Term Care (MOHLTC)	• Inclusion of health promotion components in select provincial and regional planning initiatives.

Snapshot of GRDHC Relationship Issues (please see plan for the complete environmental scan)

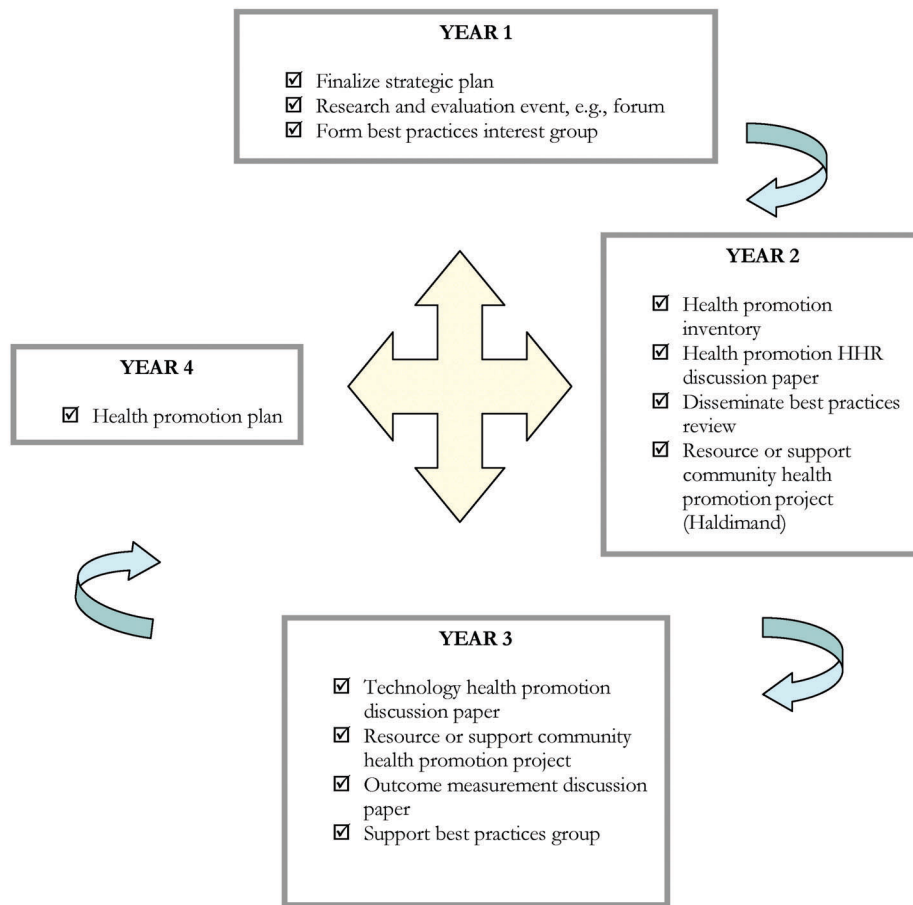
	Strengths	Weaknesses
INTERNAL TO THE GRDHC	• Recognition of the GRDHC as a strategic partner. • Recognition by providers of the GRDHC as a resource for health promotion. • Viewed as a planning resource by providers. • Mandate as a systems level planning body.	• Lack of academic partnerships in health promotion. • Early stage of development of Grand River identity.
	Opportunities	Threats
EXTERNAL TO THE GRDHC	• Increased government and public attention to public health, maintaining health, and wellness. • Health Canada's current health promotion and population health initiatives. • Increased interest in inter-sectoral work.	• Diversity of views and opinions about health promotion and the broader determinants of health. • Competition between key stakeholders. • Collaboration models can take longer to see outcomes.

Summary of Goals and Objectives (please see plan for complete details)

1. Integrate health promotion into the GRDHC	2. Improve community capacity in health promotion.
• Establish a common frame of reference for basic concepts. • Create and maintain a health-enhancing organizational image. • Create collaborative health promotion research network. (academic and applied research). • Enhance MOHLTC health promotion components.	• Facilitate district wide networking. • More evidence-based resources. • Support aboriginal health promotion providers. • Appropriate resources are secured for each initiative.
3. Optimize health promotion opportunities.	4. Support outcomes in health promotion.
• Identify priority projects from the plan each year of next 3 years. • More effectively support key local projects. • Maintain and enhance health human resource capacity. • Capitalize on information technology (IT) opportunities.	• Formal evaluation methods are consistently applied. • High quality data for groups with unique needs is available. • Increase resources for long term monitoring of health outcomes.

GRDHC Relationships in Implementation
Lead - initiate the activity and resource internally.
Partner - jointly initiate and resource the activity.
Internal - work resourced and completed in-house.

Overview of External Activities and Timelines (by Fiscal Year)



Key Terms

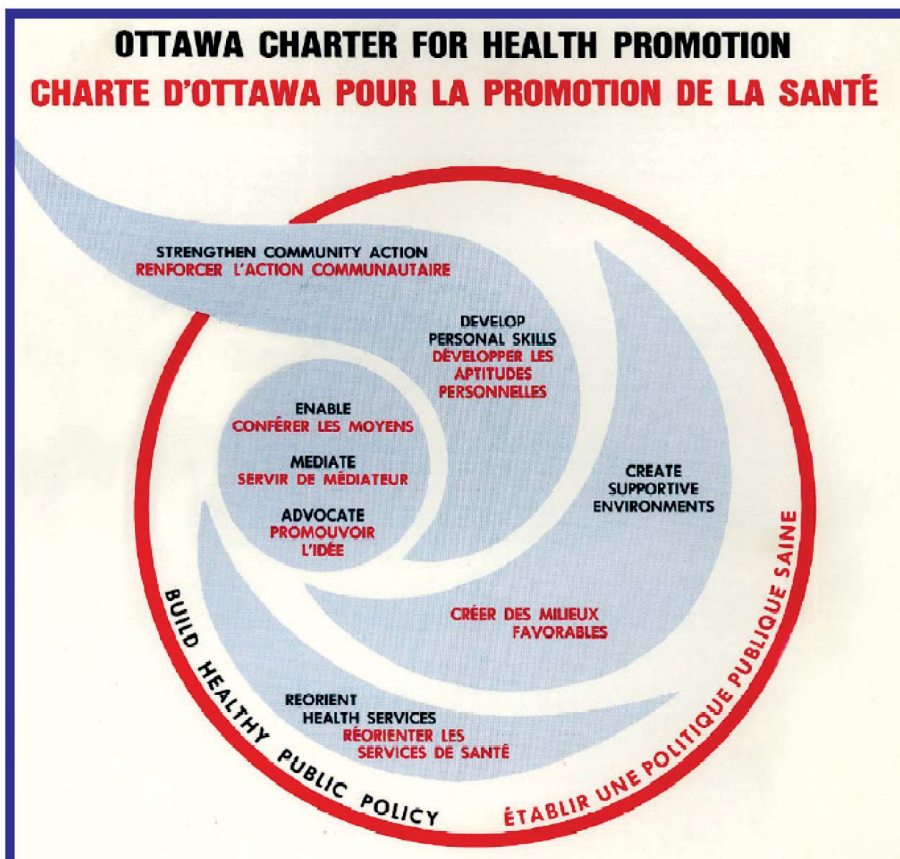
Health Promotion - Health promotion is the process of enabling people to increase control over, and to improve, their health. The five cornerstones for action in are: build healthy public policy; create supportive environments; strengthen community actions; develop personal skills; and, re-orient health services (The Ottawa Charter, 1986).

Population Health - Attention to the underlying factors affecting the health status of the entire population is called population health. Population health can also address the health and well being of particular population groups (Health Policy Research, Vol. 1, Issue #3, HealthCanada).

Determinants of Health - Throughout life health is determined by complex interactions between social and economic factors, the physical environment and individual behavior to determine health status. These factors are referred to as "determinants of health" (What determines health, Health Canada web site, 2003)

Acknowledgements

Linda Vancso, Director, Education Services,
Norfolk General Hospital
Tamara Stefantis, Director, Community Health Services,
Brant Community Healthcare System
Karen Kuzmich, Coordinator, Community Health Services,
Brant Community Healthcare System
Debbie Kew, Director of Volunteer Services,
Brant Community Healthcare System
Karen Boughner, Manager-Public Health,
Haldimand-Norfolk Health Unit
Jill Steen, Program Coordinator, Population Health,
Haldimand-Norfolk Health Unit
Shelley Rollo, Manager, Haldimand
Health and Wellness Programs,
Haldimand War Memorial Hospital
Ruby Jacobs, Director of Health Services,
Six Nations Health Services
Jo Anne Tober, Director, Public Health Programs
and Services, Brant County Health Unit
Marion McGeein, Manager, Population Health,
Brant County Health Unit
Carolyn Ball, Executive Director,
Brant Community Social Planning Council



Source: Ottawa Charter for Health Promotion - available at http://www.who.int/hpr/NPH/doc/ottawa_hp_logo.pdf

For further information please see the complete plan on the GRDHC website at www.grdhc.on.ca under reports