



# Strategic Plan 2015-18







## Foreword from the CEO and Chair

Inner South Community Health (ISCH) is proud to present its Strategic Plan 2015–18.

This plan has been developed in collaboration with communities, clients, staff, the leadership team, stakeholders, partners and the Board. It reflects the organisation's commitment to its values, long standing mission and a bold vision for the future.

Our vision, *health and wellbeing for all*, encompasses our ongoing commitment to primary health care and the Ottawa Charter of the World Health Organisation, which recognises that the health of individuals and communities is the product of a wide range of environmental, social, cultural and economic factors. ISCH is guided by its commitment to universal access to primary health care as a fundamental human right and to addressing the structural causes of health inequity across our community.

We believe that our strong commitment to our vision, mission and values will allow ISCH to rise to the challenges we are likely to face in the coming years. Demographic and health changes, such as: an ageing population; rising chronic and complex health conditions; changing consumer expectations; and a highly uncertain policy environment, will all impact on how ISCH goes about achieving its mission.

What is certain is that ISCH will remain committed to local communities. In the coming years, ISCH will move towards a social enterprise model to bolster our ability to respond to growing community needs. We will focus on expanding our services to meet unmet community needs and continually improve the quality and effectiveness of our services.

This Strategic Plan is the product of six months of extensive consultation, critical analysis and synthesis. We thank ISCH staff, clients, carers, members, volunteers, partners and stakeholders for their valuable contribution to the planning process.

As we look to the future, we are excited to share this Plan. We are confident that it provides us with a blueprint for delivering on our mission and working towards our aspiration of *health and wellbeing for all*.



**Judith Klepner**  
Board Chair



**Damian Ferrie**  
Chief Executive Officer

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## VISION

# Health and wellbeing for all

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### MISSION

ISCH works in partnership with people and communities to promote and improve equity, health and wellbeing, by:

- Delivering innovative, client-directed services that take into account the context of the individual and the community; and
- Championing prevention and change to address the structural reasons for health inequity.

### OUR SERVICE PRINCIPLES

What sets ISCH apart is our distinct approach and service delivery principles. At ISCH, clients can expect the following:

#### *Joined up*

ISCH puts clients at the centre of our services and seamlessly links people into a wide range of health and wellbeing services provided by ISCH and others.

#### *No wrong door*

Anyone seeking a service will be assisted at ISCH. If we can't deliver a service response, we will assist people to navigate the system.

#### *Doing with, rather than doing for*

We work with people and communities to achieve their goals.

#### *Taking account of context*

ISCH takes into account the whole person and their social, cultural, environmental and economic context.

#### *Friendly*

ISCH is a welcoming organisation, where people feel comfortable and supported.

#### *Affordable*

ISCH ensures that everyone has access to our services regardless of their ability to pay.



## VALUES

In all aspects of our work, ISCH upholds the following values:

### *Inclusiveness*

Valuing everyone, embracing diversity and encouraging participation.

### *Empowerment*

Working with people to build their attributes, capabilities and capacity to manage their lives.

### *Equity*

Ensuring all achieve equitable health and wellbeing outcomes, regardless of life circumstances and economic status.

### *Social Justice and Human Rights*

Respecting and promoting the dignity of all individuals and advocating to ensure equality of opportunity to a just and fair life.

### *Accountability*

Making our ways of working open, honest and transparent, and taking responsibility for our actions.

### *Learning and Innovating*

Consciously learning and innovating to improve our work and achieve our vision.

## Who we are and what we do

In 1993, three community health services (Pahran, Southport and St Kilda) came together with a shared commitment to 'the concepts and ideals of community, equity and quality'. Twenty years on, ISCH has grown into the well-regarded, innovative organisation it is today.

Building on its rich tradition of engaging highly marginalised people and groups around Melbourne's Inner South, ISCH has dramatically expanded its services over time to meet ever-changing community needs. Today, ISCH is regarded as one of Victoria's pre-eminent community health services, with specialist expertise in engaging high-risk and hard-to-reach groups. Its assertive outreach models and other service innovations are regarded as best practice, and in 2010 it won the Premier's Award for Health Service of the Year.

While ISCH has traditionally provided services to the local government areas of Port Phillip and Stonnington, services have expanded in recent years. ISCH delivers some regional and state-wide programs, such as the Mobile Health Outreach Service and the Resourcing Health and Education (RhED) Program for the sex industry. Recently, the recommissioning of community mental health and alcohol and other drug services has resulted in ISCH services expanding to Kingston, Bayside and Glen Eira.

In 2013–14, ISCH had a budget in excess of \$22 million, employed over 270 staff and provided services from 10 sites across the Inner South (including four dedicated ISCH centres). ISCH saw 13,209 clients and delivered 121,029 episodes of care.

## ISCH SERVICES

- Case Management Services
- Community Health Nursing and Midwifery
- Family, Children and Young People Services
- Counselling
- Family Violence Services
- Dental/Oral Health
- Doctors
- Drug and Alcohol Services
- Employment Services
- Family Violence Services
- Health Promotion and Disease Prevention
- Indigenous Access Services
- Mental Health
- Allied Health Services
- Sex Worker Education and Support Services
- Needle Syringe Program
- Homelessness and Housing Support Services
- Post-Acute Care
- Older Persons High Rise Program

# 2013-14

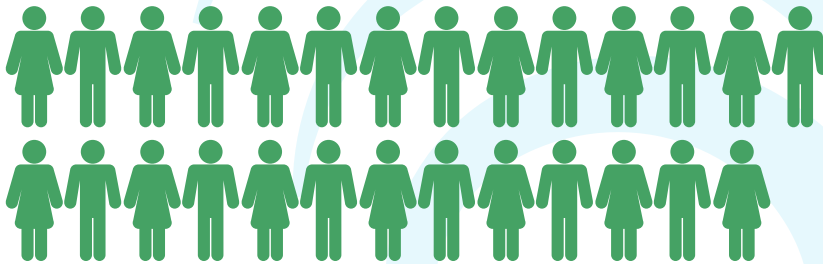
## BUDGET

\$22 million+



## EMPLOYEES

270 staff



## SERVICES across the Inner South

4 primary sites

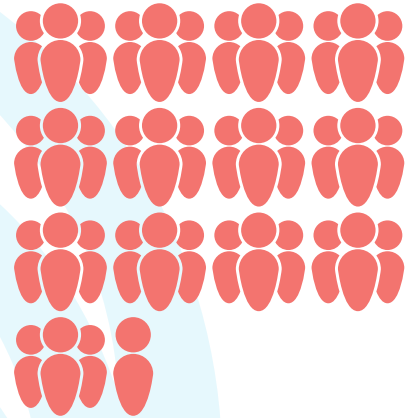


7 satellite sites



## CLIENTS

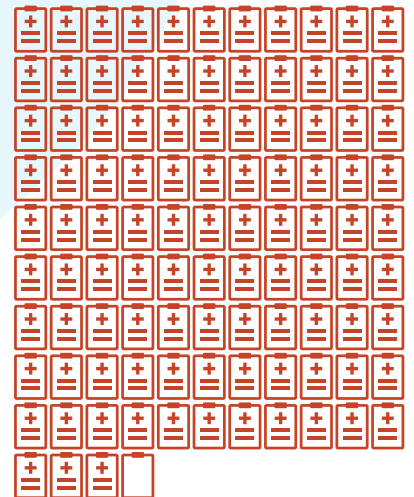
13,209



## DELIVERED

121,029

episodes of care



# Achievements of the 2011–16 Strategic Plan

ISCH's last Strategic Plan was highly ambitious and led the organisation to where it is today – a truly comprehensive primary health care organisation, with a heightened focus on prevention and early intervention, and a strong advocacy voice. Some of our key achievements under each strategic direction include:

## DEVELOPING A MORE COMPREHENSIVE PRIMARY HEALTH CARE SERVICE, AND MAKING OUR SERVICES MORE ACCESSIBLE AND RESPONSIVE

Over the period, ISCH successfully added a range of new services to its portfolio to develop a more comprehensive primary health care service. ISCH also saw its services grow and adapt to local population need, developed its innovative Model of Comprehensive Primary Health Care and increased its focus on consumer and community engagement.



### Bulk-billing GP Clinic at Prahran

After opening in 2012, the GP clinic now employs four GPs and is fully integrated with ISCH's other services (including allied health, mental health, alcohol and other drugs and family services), creating a one-stop-shop for comprehensive primary health care.



### Mental Health and Alcohol and Other Drugs Services

ISCH has successfully grown its mental health and alcohol and other drug services, including the AOD Bayside Central Intake Service, across the five local government areas of Port Phillip, Stonnington, Kingston, Bayside and Glen Eira.



### Diabetes Education and Smoking Cessation

Responding to local community needs, particularly the rise in chronic health conditions, ISCH created new diabetes education and smoking cessation roles to tackle the rising burden of chronic disease in our region.



### Consumer and Community Engagement

ISCH has worked hard to embed community and consumer participation in all areas of our work to ensure services are accessible and responsive to community needs. Initiatives have included involving consumers in program planning and interview panels.



## REDUCING THE HEALTH EQUITY GAP

Between 2010 and 2015, ISCH undertook several important initiatives aimed at building the capacity of individuals and communities to improve their wellbeing, and advocated for programs that improve the health of particularly marginalised groups.



### Social Health and Inclusion Port (SHIP) Project

The SHIP Project is a five year initiative that brings together local residents and community organisations to improve the health and wellbeing of the Port Melbourne community. The SHIP Project is now completing its four year Community Plan.



### Biennial Sex Worker Symposia

This initiative brings together experts and stakeholders across the sector to tackle health and wellbeing issues affecting sex workers. The 2011 symposium focused on research and the 2013 event focused on the issues facing multicultural sex workers.



### Indigenous Access

ISCH successfully advocated for increased resources for the Indigenous Access program. State Government *Koolin Balit* funding was secured for new youth and women's and families roles.

## SUPPORTING AND RESOURCING OUR PEOPLE TO DELIVER OUR VISION

ISCH's point of difference is its people. ISCH staff are well regarded across the sector and are known for going above and beyond. Over the period, ISCH invested highly in its people and infrastructure to deliver its mission and goals.



### Cultural Survey and Action Plan

In 2011, ISCH undertook an organisation-wide cultural survey to gauge staff attitudes and engagement. A Cultural Action Plan was developed with key initiatives including adaptive leadership training and improved change management processes.



### Leadership Development

The Leadership Empowerment in Action Program was implemented to develop, support and nurture ISCH's future leaders and the Adaptive Leadership Program was developed to build capacity for leaders to operate better in environments of uncertainty.



### Quality Accreditation

In 2014, ISCH successfully underwent its three-yearly accreditation. ISCH successfully met the requirements (and exceeded 12 standards) for a range of state and national standards, including the National Safety and Quality in Healthcare Standards.

# The next three years: Challenges and Opportunities

**Over the coming three years, ISCH's operating environment will undergo significant changes due a range of demographic, community and policy influences.**

## ***Ageing population***

The ageing population will lead to an increase in demand for health and wellbeing services. In our region, the percentage of older people living alone is relatively high, resulting in the need for greater social supports to maintain independent living.

## ***Increased burden of chronic disease and disability***

Chronic diseases are set to account for 80 per cent of Australia's overall disease burden by 2020. Already almost all of ISCH's clients have at least one chronic disease, and many have several, especially among older clients.

## ***Socio-demographic changes***

A number of social and economic trends will have a significant impact on the character of our

communities in the coming years, including: high population growth; ongoing barriers facing people from culturally and linguistically diverse backgrounds; lack of access to affordable housing; and financial insecurity due to rising economic inequality.

## ***Community expectations***

Communities and consumers are demanding greater participation in choosing and managing their health care. Consumers are also increasingly expecting seamless integration of health and wellbeing services, and increased accessibility through e-health technologies.

## ***Client-directed care policy***

Reforms to the aged care system and the roll out of the NDIS represent a dramatic shift from traditional block funding to funding sitting with the client. This will require most service providers to make significant changes to their business models to put clients at the centre.

## ***Primary health care policy***

There remains significant uncertainty around State and Commonwealth responsibility for primary health care policy and funding. The impact of the replacement of Medicare Locals with larger Primary Health Networks is also unclear, but the networks are likely to be significant regional commissioners of primary health care services and fulfil some coordination role.

## ***Funding environment***

In the context of an ageing population, both the State and Commonwealth health budgets will continue to be constrained into the future. With growing community demand and scarcer government funding, service providers will have to consider alternative revenue streams and continually innovate to deliver cost-effective care.





## ► GOAL 1

ISCH understands and delivers the best possible health and wellbeing outcomes for our clients and communities by providing services that are client-directed, outcomes-focused and cost-effective



ISCH endorses the Ottawa Charter of the World Health Organisation which states that in addition to the basic requirements for physical health, such as access to medical care and lifestyle factors, the fundamental preconditions and resources for health and wellbeing, at individual and community levels are a range of social, economic, cultural and environmental factors.

Underpinned by this understanding of the determinants of health, ISCH will enrich and build on its existing service models and develop new, innovative models that are client-directed, outcomes-focused and cost-effective to deliver the best possible outcomes for clients and communities. We will achieve this goal by increasing our focus on understanding and measuring the impact of our work; understanding and listening to what clients and communities want, and tailoring our services to local needs.

## OBJECTIVES:

- **1.1. Client-directed and innovative:**
  - Service models are client-directed, adaptive and responsive, and continuously evaluated. ISCH puts clients at the centre of the organisation and engages with clients effectively through better communication.
- **1.2. Outcomes-focused:**
  - Services are measured and monitored in terms of client outcomes, and an outcomes-focus is embedded into our service models.
- **1.3. Comprehensive and integrated:**
  - ISCH provides a comprehensive set of primary health and wellbeing services, and continually improves client access pathways and seamless integration.
- **1.4. Cost-effective:**
  - Service models are fully costed to ensure that they are cost-effective and efficient.



## ► GOAL 2

ISCH works with clients and communities to influence policy makers and address the structural reasons for health inequity

Underpinned by a commitment to primary health care and addressing the structural reasons for health inequity, ISCH is committed to working with clients, communities and partners to achieve better population health outcomes and equity.

Over the coming years, ISCH will continue to work with our clients and local communities to better understand community needs and build capacity.

ISCH will work with partners to advocate for policies that reduce health inequity and will engage in targeted advocacy to promote the role of primary and community health in Victoria's health architecture. ISCH will also partner with like-minded organisations to bolster its influence.

## OBJECTIVES:

### • 2.1 Connection to local communities:

- ISCH is connected to the communities we serve. We understand, engage and involve clients and communities in all areas of our organisation.
- ISCH has a strong presence in, and communicates effectively with, local communities.

### • 2.2 Influence policy makers:

- ISCH engages in targeted and informed advocacy to address the structural barriers to health equity where there is a clear link to our vision and mission.

### • 2.3 Partnerships that strengthen communities and bolster influence:

- ISCH partners with like-minded organisations and communities to build their capacity and improve community-level health outcomes.
- ISCH works collaboratively with partners and in alliances to advocate for the needs of communities.

### • 2.4 Health promotion and prevention

- ISCH invests in targeted health promotion and prevention initiatives based on identified community need.



### ► GOAL 3

ISCH is well-resourced and has the capacity to be adaptive, responsive and sustainable into the future, in order to meet changing community and client needs and expectations



In the coming years, ISCH will move towards a social enterprise model to ensure that it can continue to deliver services needed by the community that may not otherwise be publicly funded. This means that ISCH will be looking to generate more revenue from non-traditional sources (for example, expanding hours of operation and providing fee-for-service practices where appropriate) to cross-subsidise services core to its mission.

A social enterprise approach will involve increasing our focus on competitiveness and visibility in the community through marketing and communications. It also involves investing in our people, infrastructure and business systems so they are adaptive and responsive.

ISCH will remain committed to its local communities and to providing universal access to services regardless of a person's ability to pay. Any new models will be designed so that they also positively impact on access for our traditional client group.

## OBJECTIVES:

### • 3.1 Our people:

- ISCH's people and leadership team have the skills and resources required to adapt to the changing needs of our clients and communities.

### • 3.2 Improve business systems:

- ISCH business systems are systematically analysed and key operational capacity issues addressed to facilitate service growth, including IT interface, client management and business processes.

### • 3.3 Infrastructure capacity:

- ISCH infrastructure (including capital and facilities) meets our current and predicted future needs and improves the efficiency of our organisation.

### • 3.4 Position for a competitive market environment:

- ISCH is well positioned to take advantage of opportunities arising from contestable market environments, including a focus on financial and operational viability and marketing and communications.

## ► GOAL 4

ISCH is a universal service accessible to all and open to growth, but maintains a focus on reaching out to those most in need

ISCH will continue to target its services towards those that face significant barriers to mainstream services. However, we also understand that to overcome health inequalities, actions must be universal, but with a scale and intensity that is proportionate to the level of disadvantage. Therefore, ISCH is committed to expanding its services to 'all', but will continue to prioritise the most vulnerable members of our community.

In order to meet growing community needs, ISCH will grow its services, both demographically and geographically. However, ISCH's commitment to local communities will not change. It will only expand into communities where there is mutual benefit to be derived from the expertise and resources that ISCH can offer, and it will continue to work in partnership with communities.

ISCH will also position for growth through partnerships, mergers and alliances. In considering growth, ISCH's priority will remain the needs of the communities we serve. We will only enter into arrangements where there is strong values alignment and where such arrangements will benefit the clients and communities we serve without compromising on our values.

## OBJECTIVES:

- **4.1 Expanded services to allow universal access:**
  - ISCH has new service models that facilitate universal access, where these models complement our traditional platform and client base.
- **4.2 Expand our range of services:**
  - ISCH has identified, analysed and capitalised on opportunities to expand into new service areas where there is emerging community need.
- **4.3 Remain open to new mergers/alliances/joint ventures:**
  - ISCH will join with like-minded organisations to improve service provision, resourcing and/or advocacy positions where there is benefit to ISCH and the communities we serve.

## How we will know we have succeeded

ISCH will hold itself accountable to achieving the goals of this Plan. To do this, the organisation will monitor its progress on the following indicators:

### *Client Health Outcomes*

- % of clients reporting improved health
- % of clients with care plans, with outcomes measures and reviewed
- # of clients cross referred for other necessary services

### *Social Impact*

- # of policy submissions
- Periodic reviews and evaluations of population/ community health and health promotion initiatives

### *Efficiency and cost-effectiveness*

- Average cost of outputs (e.g. visits, episodes of care)

### *Reach*

- # of visits, episodes of care
- # of clients



## Contact information

### ***Southport centre***

341 Coventry Street, South Melbourne 3205

Phone (03) 9525 1300

Opening hours: 9am – 5pm, Monday – Friday

### ***Prahran centre***

240 Malvern Rd, Prahran 3181

Phone (03) 9525 1300

Opening hours: 8.15am – 5pm, Monday – Friday

### ***St Kilda centres***

18 Mitford street, St Kilda 3182

Phone (03) 9525 1300

Opening hours: 9am – 5pm, Monday – Friday

10 Inkerman Street, St Kilda 3182

Telephone (03) 9525 1300

Opening hours: 9am – 5pm, Monday – Friday

**[www.ischs.org.au](http://www.ischs.org.au)**