

Libraries for Health and Wellbeing

A partnerships toolkit



STATE LIBRARY
VICTORIA



Public Libraries
Victoria

Executive summary

Achieving better health and wellbeing outcomes for our communities.

In 2022, State Library Victoria (SLV) and Public Libraries Victoria (PLV) launched the world's first ever *Libraries for Health and Wellbeing strategic framework*.

Following recommendations made in this strategic framework, SLV and PLV have identified partnerships between libraries and health and wellbeing organisations as the best way to achieve better health and wellbeing outcomes for communities. Equally, partnerships address public library priorities in relation to resourcing, effectiveness and recognition as a way to make an active contribution to community health and wellbeing.

After an initial exploration of partnership opportunities, SLV and PLV identified 3 specific priorities for action:

- Increase understanding among library leaders of the Victorian health and wellbeing landscape (for example, organisations, funding structures and policies).
- Identify opportunities and approaches for partnerships between libraries and health and wellbeing organisations.
- Define a clear set of next steps for libraries to take to begin the process of building effective partnerships with health and wellbeing organisations.



This toolkit was developed through consultation with library leaders and health and wellbeing organisations, in addition to desk research.

The toolkit provides an overview of key health and wellbeing trends and their implications on future challenges which can be best addressed through library–health partnerships. It provides a rationale for how library–health partnerships can achieve strategic outcomes against key frameworks. Providing different models of library–health partnerships, the toolkit identifies key stakeholders and messages as well as investigating the values libraries and health and wellbeing organisations can exchange for mutual benefit.

The toolkit concludes with a summary of actions that library leaders can make to develop impact-focused relationships and build meaningful partnerships with health and wellbeing organisations. Four appendices containing supplementary information for the toolkit are included at the end of the document.



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Health and wellbeing landscape

A summary of the Victorian health and wellbeing landscape, trends and implications.

Key trends

Workforce challenges

There are workforce shortages in health and wellbeing, especially in rural, regional and remote areas.

Across the board, staff fatigue is a significant challenge due to long hours or unusual hours or both. This has been exacerbated by compliance requirements and increased demand brought on by the COVID-19 pandemic in combination with other developments and changes in systems and technology.

As well as primary, community, acute and specialised health and wellbeing services, these challenges are relevant to other complementary areas such as early childcare and education, aged care and disability services.

Sector and structural reform

Many sector and structural reforms have taken place in recent years. At the departmental level, the Victorian Department of Health and Human Services became the Department of Health and the Department of Families, Fairness and Housing.

Introduced around 7 years ago, federally funded Primary Health Networks play an integrating and coordinating role alongside the Victorian Public Health Units (PHUs) that were set up as part of the COVID-19 response and will have an ongoing prevention, health promotion and public health focus. Victorian Primary Care Partnerships, which have been around for over 20 years, are currently being rolled into the PHUs.

In a similar timeframe and driven by the COVID-19 pandemic, the state government has established Mental Health Boards as well as formalising Health Service Partnerships. These restructures align with the Victorian Government's push for greater collaboration and partnerships across public hospitals and health services, including encouraging mergers and acquisitions (M&As). While there have been more frequent M&As in the health and wellbeing space over this period, there are still around 80 public health services across the state.

A range of Royal Commissions have taken place over this period and a number are ongoing, including family violence (Victoria), aged care (federal), mental health (Victoria) and bushfires/national natural disaster arrangements (federal). These are driving major policy, legislative and funding changes.



A focus on response over prevention

The health sector is structured and resourced around response. This means less money (approximately 2–5% of total government health spend) is being spent on preventative approaches that could reduce hospitalisations and help keep people healthy and well.

Concurrently, overall demand for health and wellbeing services is growing, due to population growth, an ageing population and increases in chronic disease and mental health challenges/illness. In addition, many health services were disrupted during the COVID-19 pandemic, with resources re-prioritised and forced temporary closures enacted. This meant many prevention, health promotion and early intervention activities, such as cancer screening, were delayed.

Despite this increased demand and response preference, the COVID-19 pandemic has resulted in billions of funding and investment into prevention, health promotion and early intervention measures such as health information and education. Response to the pandemic necessitated the development of safe, effective vaccines at record speed.

Health inequity persists

Health inequity is an ongoing issue which has been exacerbated by the COVID-19 pandemic. As a result, certain population groups (for example, First Nations people and people with disability) experience worse health and wellbeing outcomes.

To understand the underpinnings of this inequity is to acknowledge barriers to accessing services and information, discrimination when receiving services and the significant impacts on the determinants of health. We see the way that this disproportionately impacts those who live in rural and remote areas, who are culturally and linguistically diverse, or who experience discrimination due to their gender, sexual orientation, socio economic status and other factors.

There is ongoing debate as to the remit and responsibility of health organisations to address these issues.

Responsibility still rests with the individual

Increasingly individuals are being asked to manage their own health and wellbeing outcomes. Low levels of digital capability and health literacy, increasing quantities of false and misleading information, cultural stigma and low awareness all demonstrate the fallibility of this approach.

Implications for libraries

The following implications were identified in relation to these trends with a focus on how these might create opportunities for the development of library–health partnerships.



Supporting prevention and ‘smarter’ services

There will be a role for libraries and other health and wellbeing players in supporting preventative health initiatives. This includes enabling more person-centred approaches to wraparound services delivery that aligns with individual and community needs.



Creating ongoing partnerships, referrals and collaborations

Working together at varying levels of investment and engagement will become even more critical in ensuring the myriad health and wellbeing services are coordinated in ways that increase access and improve outcomes.



Determining the role of health services in supporting individuals

There are opportunities for libraries and other organisations to help shape broader roles within the health and wellbeing ecosystem. Collaboratively and flexibly responding to developments in this area through innovative partnerships that leverage spaces, collections, digital capabilities and other assets will help support individuals.



Using community organisations to engage with hard-to-reach populations

Libraries are at the hearts of their communities and play a unique role in engaging with and supporting community members from many different walks of life, including hard-to-reach or hardly reached populations. This positions libraries to effectively assist health and wellbeing organisations to contact, engage with, listen to and support priority population groups.

Developing successful partnerships

A summary of key insights and learning from consultation and research that library leaders can use to successfully develop library–health partnerships.

Partnerships approach

How can libraries develop successful partnerships?

Consultations throughout this project revealed what makes a partnership successful, along with common pitfalls to avoid based on the experiences of the respondents. The summary below outlines these insights and the corresponding content that has been developed through further consultation and desk research to support successful development of library–health partnerships.

How can libraries act on this learning?

- Ensure library leaders and staff understand partnerships as a concept from the outset.
- Define how a potential partnership aligns with and supports achievement of overarching strategic outcomes.
- Identify partnership opportunities with clearly defined value that support an ongoing, long-term cycle of impact. This incorporates a continuous loop of planning, evaluation and improvement.
- Identify key stakeholders and communicate the opportunities and benefits to each to support buy-in and ownership.
- Identify the unique value each partner can contribute in relation to their respective strengths, assets and skills.

Key learning and insights

- Partnerships are often poorly understood as a concept.
- Many partnerships fail or are not as effective as they could be due to lack of:
 - long-term planning, evaluation and improvement
 - alignment with strategic goals and clearly defined partnership roles
 - buy-in to the partnership and strong ownership among key stakeholders.



What is a partnership?

Defining partnerships as a concept

Partnerships are a mechanism for exchanging value between organisations. They can offer different levels of investment and return. This depends on the desired outcomes and value being sought. The below table explains these levels of investment. For the purposes of this toolkit, the below spectrum and definitions of partnerships investment will be used.



1

Leverage/Exchange

One partner contributes to the work of another, or partners exchange resources, to allow one or both partners to deliver more.

Often transactional, one-way transfer or reciprocal exchange of skills, knowledge, funding etc.

Involves negotiation to maximise the gains on both sides.



2

Combine/Integrate

Two or more partners combine their resources to deliver together more than each could deliver alone.

Characterised by cogeneration, mutual accountability and innovative approaches.

Involves brainstorming and creative dialogue to together develop new approaches that create value.



3

Transform

Multiple actors work together through collective action to tackle complex challenges usually through system transformation.

Involves multiple actors bringing together unique and complementary resources, all essential pieces of a jigsaw puzzle.

Requires multi-stakeholder dialogue to understand the system and engage the players required to make interventions.

How can partnerships support strategic outcomes?

Delivering against the Libraries for Health and Wellbeing strategic framework

Libraries are seeking ways to increase their community impact through collaboration that achieves community health and wellbeing outcomes while enhancing libraries' reach, relevance and sustainability.

For libraries, there are opportunities to:

- increase their reach to attract more people to libraries as an essential service
- increase access to key health and wellbeing services and supports, particularly for hard-to-reach and underserved community cohorts
- develop more formalised collaboration mechanisms and partnerships for long-term impact and sustainability
- build the capacity of libraries to respond to future strategic challenges and opportunities in a flexible, responsive manner.

To achieve the following outcomes:



Delivering against the *Health 2040 framework*

On the other side of the shared value equation, health and wellbeing organisations are seeking ways to enhance overall health and wellbeing outcomes for their end users. Simultaneously these organisations are developing longer-term approaches and models of care that support future impact and sustainability, including increased efficiency and financial stability.

For health and wellbeing organisations, there are opportunities to:

- enhance person-centred approaches to health and wellbeing
- increase the coordination of health and wellbeing services and supports
- incorporate the social determinants of health into health and wellbeing approaches
- increase access to health and wellbeing supports and services for priority population groups.

To achieve the following outcomes:



See page 30 for full details of this framework.
Source: *Health 2040: Advancing health, access and care* (content.health.vic.gov.au/sites/default/files/migrated/files/collections/policies-and-guidelines/h/health_2040_advancinghealthaccess_and_care_web.pdf)



What approaches can libraries take to developing partnerships?

Identifying and exchanging mutual value

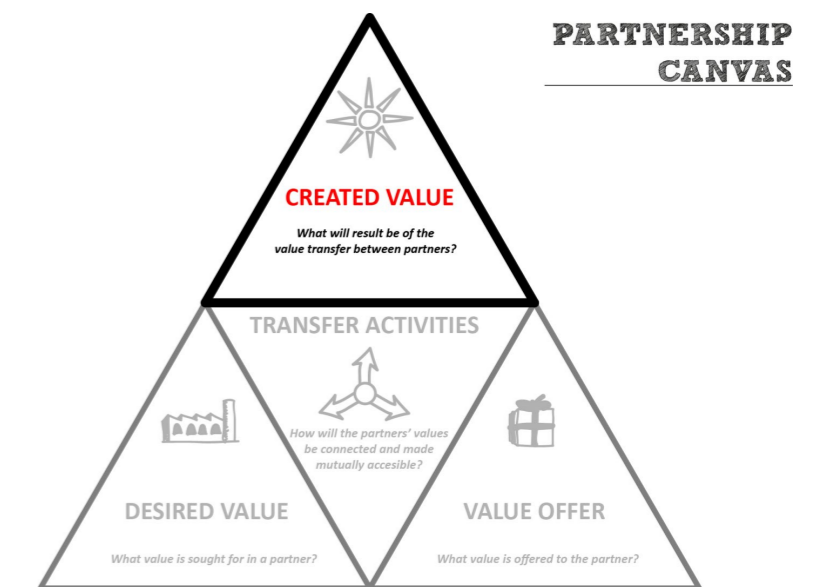


Image credit: [valuechaingeneration.com](https://valuechaingeneration.com/2014/10/17/the-partnership-canvas/) (valuechaingeneration.com/2014/10/17/the-partnership-canvas/)

Partnerships are an essential approach to achieving shared impact with a focus on incorporating the Sustainable Development Goals (SDGs).¹ Libraries can start the partnerships process by defining value sought through partnership in relation to overarching strategic outcomes (page 13) as well as outcomes linked with the SDGs.

The Partnerships Canvas is a tool which individual libraries can use to map the value each partner is seeking and explore proposed partnerships models (outlined in the next section of this report) as ways to transfer this value.

Key terms

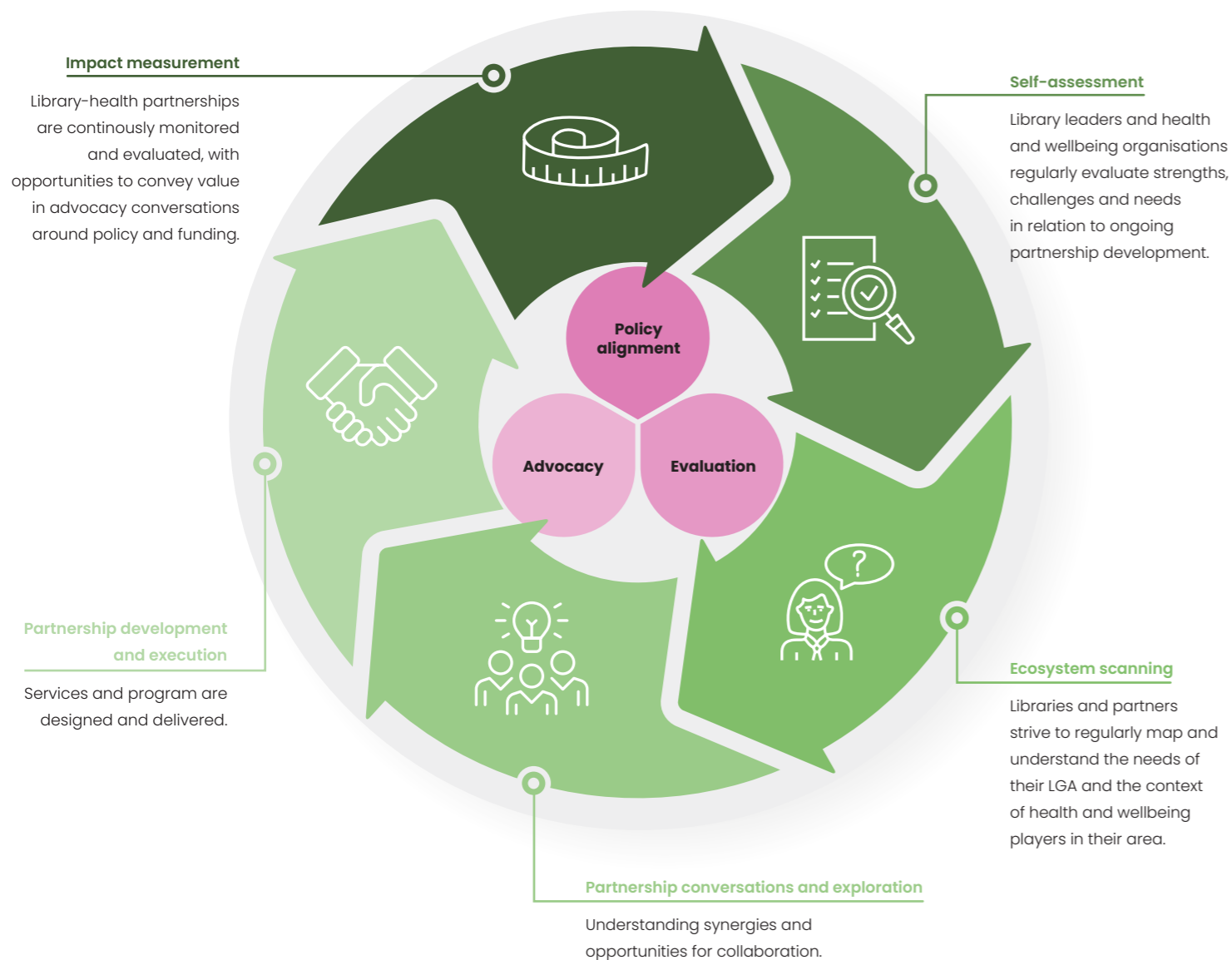
- Created value** shared outcomes that both partners value, realised through transfer of strengths between partners.
- Net value** outcomes achieved through partnership that benefit each partner respectively.

¹ Darian Stibbe, Stuart Reid and Julia Gilbert (The Partnering Initiative), 2019, *Maximising the impact of partnerships for the SDGs: A practical guide to partnership value creation*, p.6.

What is the lifecycle of a partnership?

Creating ongoing cycles of impact

To be successful, library–health partnerships need to be developed as part of a continuous learning, development and impact loop. This involves a cycle of continuous discovery about each other’s strengths and opportunities to develop the partnership, while demonstrating the benefits and impact to external policy and funding bodies. Through continuous discovery, innovation and evaluation, libraries and health and wellbeing organisations can develop partnerships that move beyond ‘leverage/exchange’ and towards the ‘transform’ end of the partnerships spectrum detailed on page 13.



Who needs to be involved in partnerships conversations?

Stakeholders and key messages to support buy-in

Key stakeholders

In the context of library–health partnerships, key stakeholders for library leaders to engage with are:

- library staff teams
- health and wellbeing leaders across a range of sectors within the ecosystem, including community health, disability, mental health and others
- state and local government stakeholders.

Through consultation, the following key messages were developed to support outreach to stakeholders for buy-in to develop partnerships:

Library staff

Library–health partnerships present opportunities to improve:

- resources by allowing greater access to complementary resources
- skills by enhancing learning and development of staff
- reach by increasing engagement with new library users
- relevance by retaining library users through strengthening the support, programs and activities offered through partnerships.

Health and wellbeing leaders

Libraries can offer complementary strengths, assets and skills to enhance the work of health and wellbeing organisations without duplicating it. This includes:

- providing unique reach to diverse community members through library channels
- engaging harder to reach groups through the flexibility and safety of their spaces and programs
- sharing data and insights to support the development of health and wellbeing programs.

State and local government stakeholders

Linking the work of state and local government with the Libraries for Health and Wellbeing Framework can support delivery against Health 2040 and municipal health and wellbeing plans, while enhancing their impact in partnership with libraries.

Libraries have the spaces, channels and relationships to link different community groups together. They are under-utilised as partners in community engagement.

How can libraries add value for health and wellbeing organisations?

Strengths, assets and skills valued in libraries

An environment which is non-judgemental, free and accessible	<ul style="list-style-type: none"> • Ability to tap into new cohorts that health and wellbeing providers otherwise wouldn't be able to access. • Staff and spaces which foster emotional and physical safety where individuals might otherwise feel apprehensive in health and wellbeing settings.
Information expertise	<ul style="list-style-type: none"> • Ability to navigate, interpret and disseminate true and factual health and wellbeing information to combat fake or misleading information. • Ability to guide people to health and wellbeing information that they need. • Capacity to build health literacy skills as well as literacy skills.
A place-based model, with over 2 million members and 30 million annual visits	<ul style="list-style-type: none"> • Ability to partner with statewide or place-based health and wellbeing organisations and opportunities. • Ability to share and convey pertinent public health and wellbeing information with a large audience.
Library spaces	<ul style="list-style-type: none"> • Venues to deliver health and wellbeing services. • An access point to health and wellbeing services.
Digital capabilities	<ul style="list-style-type: none"> • Access to health and wellbeing services for those without access to the latest technology. • Ability to make services, information and resources accessible, especially in remote and rural areas. • Capacity to build digital literacy.
Programs and engagement activities	<ul style="list-style-type: none"> • Staff who are highly skilled in program and service delivery to support with co-design and delivery.
Stability	<ul style="list-style-type: none"> • Long-term stability to facilitate the planning required to boost the prevention arm of health and wellbeing which is currently underfunded and resourced.

How can health and wellbeing organisations add value for libraries?

Strengths, assets and skills valued in health and wellbeing organisations

Through consultation with libraries and health and wellbeing organisations, the following strengths, assets and skills were identified as being of value to libraries as part of a partnerships strategy. This table can be used to progress conversations about mutual value-add between libraries and health and wellbeing organisations using the Partnerships Canvas tool on page 15.

STRENGTH	POTENTIAL VALUE TO LIBRARIES
Technical expertise	<ul style="list-style-type: none"> • Access to knowledge, skills and technical expertise that could be amplified through enhanced information sharing and community engagement opportunities.
Targeted information and resource	<ul style="list-style-type: none"> • Ability to produce health and wellbeing information and resources that are evidence-based and targeted to specific cohorts.
Health and wellbeing spaces	<ul style="list-style-type: none"> • Dedicated spaces to deliver health and wellbeing services. • Alternative access points to library resources and information.
Digital capabilities	<ul style="list-style-type: none"> • Digital capabilities to support access to personal health records and portals, which can be better utilised through increased reach to regional and rural populations, and through enhanced digital literacy.
Programs and engagement activities	<ul style="list-style-type: none"> • Highly skilled staff that are experts in program and service delivery can support with co-design and delivery.
Funding and advocacy relationships	<ul style="list-style-type: none"> • Access for health and wellbeing organisations to more diverse funding across government, corporate and philanthropic sources. • Access for health and wellbeing organisations to government advocacy channels at state and federal levels, particularly in the mental health, disability, aged care and primary health network spaces.

Partnerships models

Examples of possible partnerships approaches with case studies to achieve shared goals in specific focus areas.

Partnership focus:

Health and wellbeing information



Need addressed	<ul style="list-style-type: none"> The provision of true and factual health and wellbeing information.
Example partnerships	<ul style="list-style-type: none"> Library curation to address specific health and wellbeing topics.
Health 2040 pillar	<ul style="list-style-type: none"> Better health.
Value for libraries	<ul style="list-style-type: none"> Increased utilisation of library collections on health and wellbeing topics. Ability to scale collections on specific topics across the entire state.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Ability to refer people to a single destination where they can access the resources and information they need. Certification of information quality.
Library assets and functions leveraged	<ul style="list-style-type: none"> Collections: curating specific collections. Digital: digitising collections to enhance access. People: providing library staff that are friendly, approachable and information experts.
Investment	<ul style="list-style-type: none"> Low.

CASE STUDY:

Reading Well (curated health and wellbeing collections)

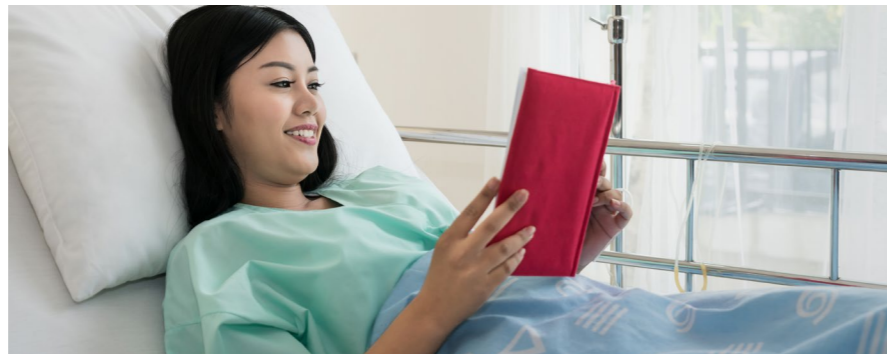
Reading Well was an initiative launched in the United Kingdom. The initiative built on partnerships between local health and social care providers and libraries.

The initiative leveraged a referral model as well as a self-referral model. As it was a pilot, the key topics for which curated collections were developed included resources for: adult mental health, dementia, young people's mental health and wellbeing, as well as resources for those suffering chronic illness and carers.

Reading Well books have been borrowed 2.6 million times from libraries with 91% of people surveyed finding their book helpful!¹

¹ Reading Well website, (reading-well.org.uk) 2022.

Partnership focus: Improved wellbeing during care



Need addressed	<ul style="list-style-type: none"> Patients and their families have their wellbeing enhanced while they receive care in health and wellbeing settings.
Example partnerships	<ul style="list-style-type: none"> Individualised care packages for patients receiving care. Collections located in health and wellbeing setting.
Health 2040 pillar	<ul style="list-style-type: none"> Better care.
Value for libraries	<ul style="list-style-type: none"> Patients and their families have their wellbeing enhanced while they receive care in health and wellbeing settings.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Ability to refer people to a single destination where they can access the resources and information they need. Certification of information quality.
Library assets and functions leveraged	<ul style="list-style-type: none"> Collections: curating specific collections. Digital: digitising collections to enhance access. People: providing library staff that are friendly, approachable and information experts.
Investment	<ul style="list-style-type: none"> Low.

EXAMPLE:

Care packages in health and wellbeing settings

Lisa was admitted to hospital with a scheduled recovery time of 6 weeks. While recovering, Lisa found herself getting bored of watching the TV. Recognising this, Lisa's nurse asked if there was anything else they could do to support her during her stay.

Lisa's nurse contacted their local library with whom they have a partnership to provide patients with care packages consisting of books they are interested in and access to their digital library of resources and videos. The library also runs a letter writing program, where patients can write letters with members of the program.

Partnership focus: Health literacy



Need addressed	<ul style="list-style-type: none"> Improved capability of individuals to understand, manage and maintain good health and wellbeing.
Example partnerships	<ul style="list-style-type: none"> Skill building programs, such as cooking classes. Literacy building programs, such as talks by health and wellbeing professionals. Access to health and wellbeing tools and services.
Health 2040 pillar	<ul style="list-style-type: none"> Better health.
Value for libraries	<ul style="list-style-type: none"> Increased utilisation of library collections on health and wellbeing topics.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Increased uptake in health promotion-services.
Library assets and functions leveraged	<ul style="list-style-type: none"> Engagement: linking with key professionals. Collections: curating specific collections.
Investment	<ul style="list-style-type: none"> Medium to high.

CASE STUDY:

Building digital health literacy

Libraries and other community organisations across Australia participated in a digital health literacy program funded and delivered through the Australian Digital Health Agency and Good Things Foundation.¹

Launched in 2020, the program involved training staff from 71 community organisations to teach digital literacy skills to community members including seniors, culturally and linguistically diverse people and people with disability.

Selected from these key community organisations, 232 people were trained as Digital Health Mentors. Of the participants, 80% reported increased confidence and digital health literacy skills.

¹ Australian Digital Health Agency, *Good things happening to support digital health literacy*, Australian Digital Health Agency website (www.digitalhealth.gov.au/newsroom/media-releases/recent-media-releases/good-things-happening-to-support-digital-health-literacy), 2021.

Partnership focus: Health promotion



Need addressed	<ul style="list-style-type: none"> Dissemination of key public health and wellbeing messaging through library channels.
Example partnerships	<ul style="list-style-type: none"> Social media channels for public health information sharing. Health and wellbeing talks from experts.
Health 2040 pillar	<ul style="list-style-type: none"> Better health.
Value for libraries	<ul style="list-style-type: none"> Increased recognition and relevance as an institution that exists to support health and wellbeing, by breaking stereotypes of the library's purpose and role. Increased awareness of libraries among health and wellbeing organisations within this role.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Access to a new channel to communicate with over 2 million library members with increased reach into the community.
Library assets and functions leveraged	<ul style="list-style-type: none"> Engagement: communication with key stakeholders.
Investment	<ul style="list-style-type: none"> Low to medium.

EXAMPLE:

LGBTIQ+ history month

A statewide initiative that ties in with global celebrations, LGBTIQ+ month is about raising awareness of the experiences, challenges and needs of LGBTIQ+ people.

Month-long festivities involve a multi-pronged approach to engaging community including:

- guest speakers addressing relevant issues which are recorded and available to view live
- collections with a focus on LGBTIQ+ issues and authors
- social media posts connecting people with resources, support services and other information.

Libraries could explore ways to offer new channels for health and wellbeing organisations to increase their reach and engagement.

Partnership focus: Referral pathways



Need addressed	<ul style="list-style-type: none"> Ability to connect people to health and wellbeing services as well as to libraries.
Example partnerships	<ul style="list-style-type: none"> Surveys for self-assessment and provision of basic service information. Cross subsidisation of memberships. Social workers in libraries. Social prescribing.
Health 2040 pillar	<ul style="list-style-type: none"> Better access.
Value for libraries	<ul style="list-style-type: none"> Increased number of users seeking and accessing services. Referrals to library services for social connection-focused services. Strengthened relationships with the health and wellbeing sector.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Increased number of users seeking and accessing services. Increased utilisation of necessary health and wellbeing services.
Library assets and functions leveraged	<ul style="list-style-type: none"> Engagement: development of referral pathways.
Investment	<ul style="list-style-type: none"> Medium to high.

CASE STUDY:

San Francisco Public Library social worker initiative

San Francisco has a homeless population of over 7,000 people. Every day hundreds take refuge at the San Francisco Public Library. Of those taking refuge, 67% reported a chronic health condition.¹

In 2009, San Francisco Public Library employed a social worker to assist at-risk individuals taking refuge to access services. This includes housing assistance, legal services, employment assistance and mental health services.

With an aim of removing some of the barriers and challenges that they face the program has helped connect close to 1,000 at-risk individuals to services. Since 2009, approximately 36 additional public libraries across the US have adopted the initiative. It was adopted by Melbourne City Library in 2019.²

¹ Juli Fraga, *Humanizing Homelessness at the San Francisco Public Library*, Bloomberg website, 2016.

² City of Melbourne, *Libraries start new chapter to support vulnerable*, City of Melbourne website, 2019.

EXAMPLE:**Chair yoga in libraries**

The Oak Park Public Library in Illinois delivers virtual chair yoga classes as part of its health and wellness programming.¹

The program page on their website also contains links to other relevant and related health and wellbeing resources, such as books and videos as well as digital resources including online yoga magazines and links to other virtual courses.

Delivering virtual and digital resources and classes for older members of the community could be an innovative way to increase reach. This could prompt partnerships with aged care centres and community health organisations.

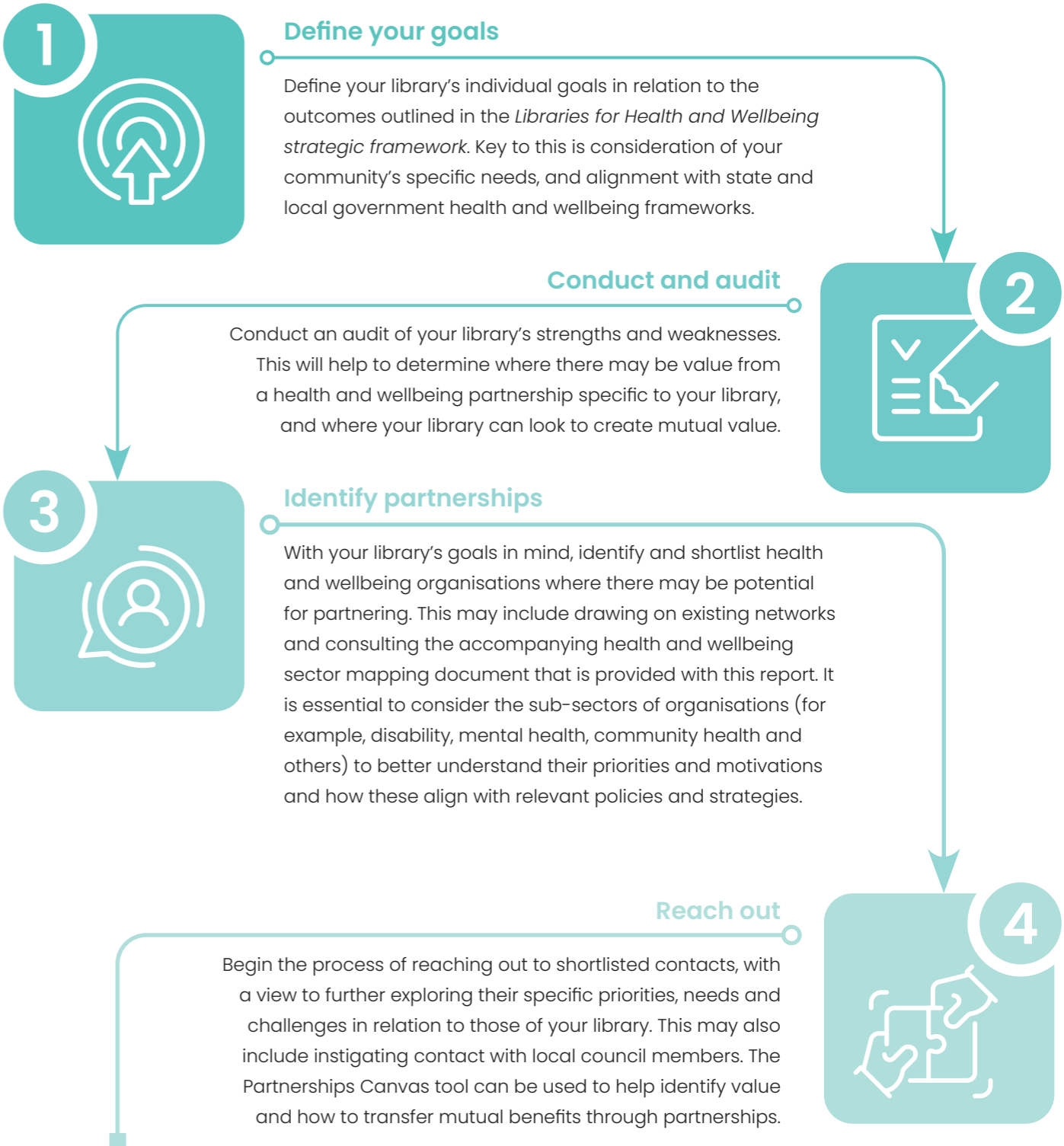
¹ Rose Barnes, *Take care of your body at any age: Chair yoga sessions, books, videos and more*, Oak Park Public Library website (www.oppl.org/news-events/health-wellness/take-care-of-your-body-at-any-age-chair-yoga-sessions-books-videos-more), 2022.

Partnership focus:**Increased access to health and wellbeing**

Need addressed	<ul style="list-style-type: none"> Equitable access to health and wellbeing services irrespective of location, income, race, gender or any other factors that create barriers to service.
Example partnerships	<ul style="list-style-type: none"> Health and wellbeing-focused programming, such as Libraries After Dark, Yoga in Libraries, cooking classes. Telehealth services. Co-location.
Health 2040 pillar	<ul style="list-style-type: none"> Better access.
Value for libraries	<ul style="list-style-type: none"> Increased engagement and utilisation of spaces and digital. Broadening relevance to disengaged cohorts.
Value for health and wellbeing providers	<ul style="list-style-type: none"> Spaces where people feel safe accessing services. Ability to tap into cohorts and markets in new locations. Removal of the digital exclusion barrier that prevents many from accessing telehealth services. Cost-effective mechanism to deliver health promotion activities which are severely underfunded.
Library assets and functions leveraged	<ul style="list-style-type: none"> Spaces: to deliver programming and services. Digital: for telehealth and virtual or hybrid delivery of services. Engagement: to promote and co-design programming.
Investment	<ul style="list-style-type: none"> Medium to high.



For library leaders planning to develop partnerships strategies that benefit individual libraries and their communities, the following steps should be considered:



Next steps

A summary of next steps libraries can take to begin their partnerships journey.

Appendix A: The Victorian health and wellbeing landscape

A.1 Overview

Victoria's health and wellbeing sector is an incredible resource; multi-faceted, complicated and complex. Many people and organisations across the state promote good health and wellbeing, and support people living with acute or chronic illness and injury. The Victorian sector is also part of the broader Australian health and wellbeing sector. A visual summary of the Australian health landscape can be found below and an explanation of federal versus state and territory responsibilities can be found in this appendix.

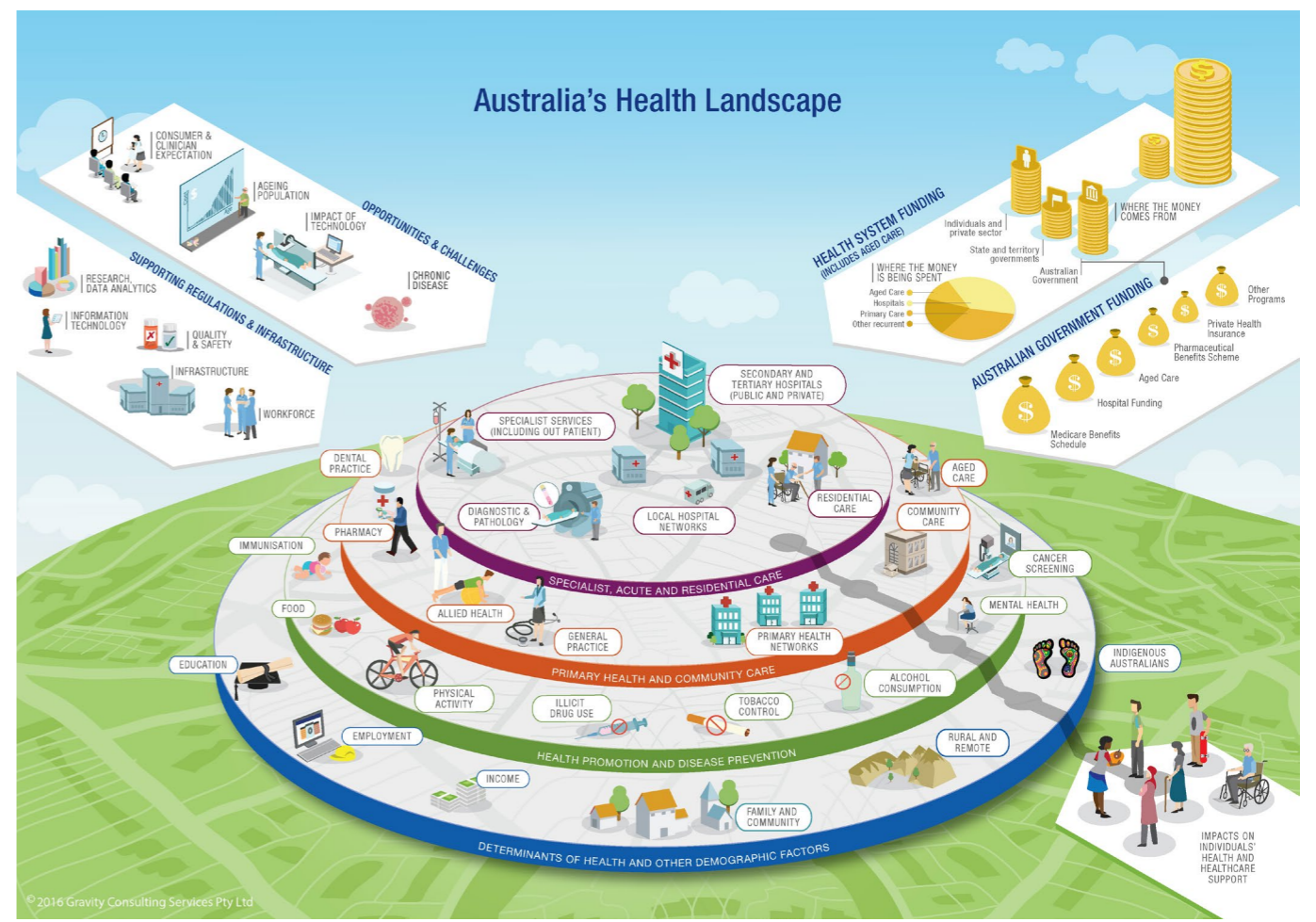


Image credit: Gravity iLabs (gravityilabs.com)

A.2 Categorisation

Given the complexity of the Victorian health and wellbeing landscape, it will be helpful for public libraries to understand the different ways it can be categorised. The following is a high-level summary of categories, which are then explored in more detail in the subsequent pages.



Spectrum of care

This refers to when a health and wellbeing intervention takes place. For example, services focus on preventing illness and injury, while others are about responding when a health or wellbeing challenge takes place.



Geography

Health and wellbeing organisations operate with many different geographic remits. Some are local operations with a place-based focus on a community, ranging all the way to national and multinational organisations.



Sectors

As is the case across the for-purpose space, different sectors have a role to play in health and wellbeing. This includes the public (as a funder and service provider), private, not-for-profit, philanthropic and social enterprise sectors.

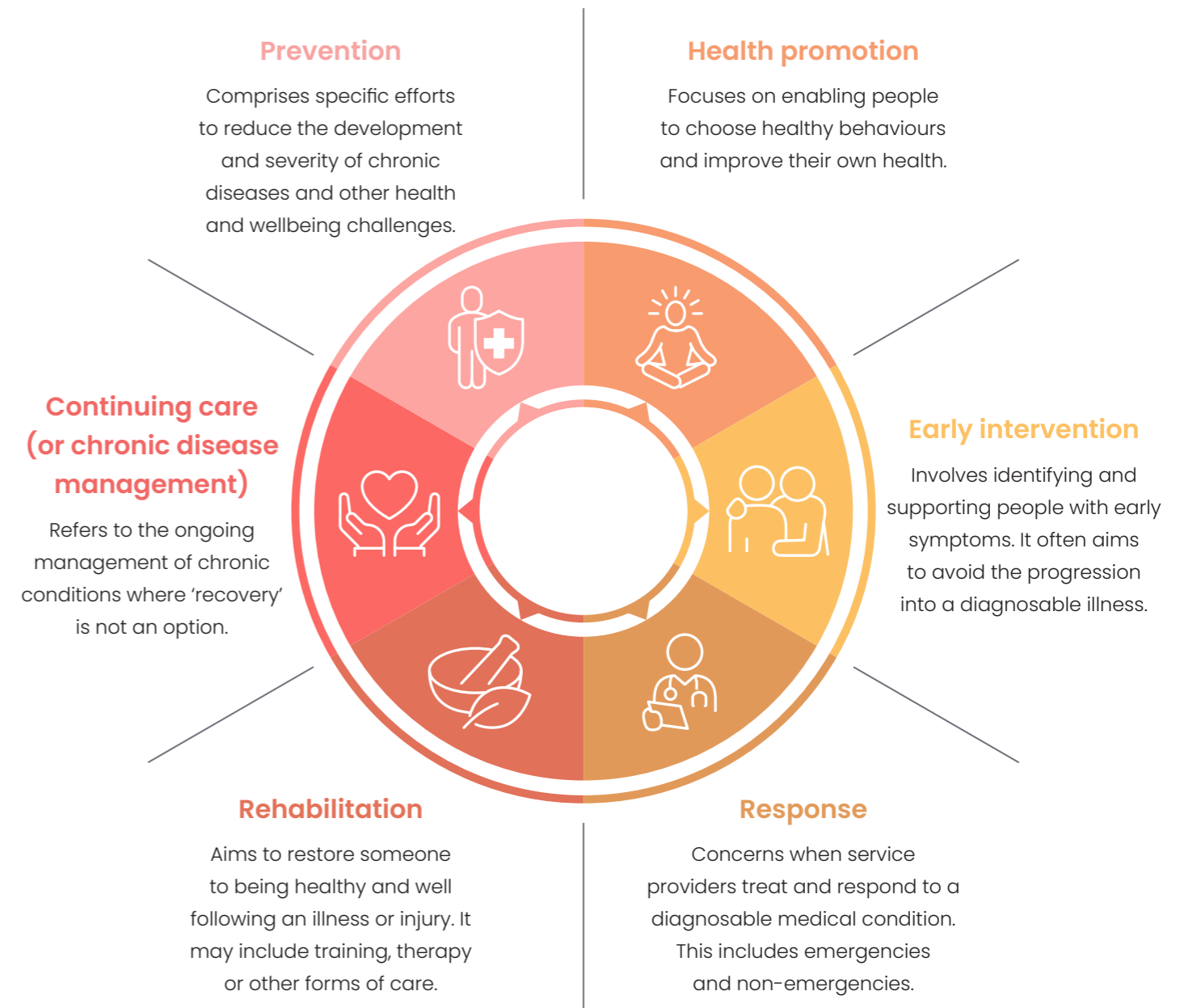


Health topics

Health and wellbeing includes many areas such as mental health, chronic disease, women's health, men's health, children's health and many more. Health and wellbeing outcomes are also influenced by the social determinants of health.

A.3 Spectrum of care

As noted on the previous page, the spectrum of care refers to when a health and wellbeing intervention takes place. For example, some care and services focus on preventing illness and injury, while others are about responding when a health or wellbeing challenge takes place. In some cases, a health matter may be tracked mostly chronologically: from prevention through to rehabilitation. However, things are often not linear and may proceed in a circular motion or 'yo-yo' back-and-forth between (some of) the different elements of the spectrum of care.



A.4 Geography (organisations)

Health and wellbeing organisations operate with many different geographic remits. Some are local operations with a place-based focus on a community, ranging all the way to national and multinational organisations. There are also health and wellbeing organisations with a regional or statewide remit.

National Level

- Australian Department of Health (which covers Medicare, the Pharmaceutical Benefits Scheme, aged care and others)
- Australian Department of Social Services (which includes families and children, housing, disability and others)
- Australian Institute of Health and Welfare (AIHW)
- National not-for-profit and private sector organisations.

State Level

- Victorian Department of Health including Safer Care Victoria (SCV) and the Victorian Agency for Health Information (VAHI)
- Victorian Department of Families, Fairness and Housing (DFFH)
- Better Health Channel
- Victorian Health Promotion Foundation (VicHealth)
- Victorian Healthcare Association (VHA)
- Statewide not-for-profit and private sector organisations

Regional and Local Levels

- Primary Health Networks (PHNs) (federal initiative)
- PHUs (state initiative)
- Public and private hospitals
- GPs
- Aboriginal Community Controlled Health Organisations (ACCHOs)
- Maternal and child health
- Allied health
- Community health
- Disability providers
- Alcohol and other drugs services
- Mental health services



A.5 Geography (policies and strategies)

The organisations listed on the previous page have their own policies and strategies, which also have different geographic remits. Examples of some health and wellbeing policy and strategy documents are included below. Further detail on key policies can be found in Appendix B.

National Level

- Corporate Plan 2021–22, authored by the Australian Department of Health
- Medicare Benefits Schedule
- Pharmaceutical Benefits Scheme
- Strategic Directions 2017–2021, authored by AIHW
- Strategic plans of not-for-profit and private sector organisations

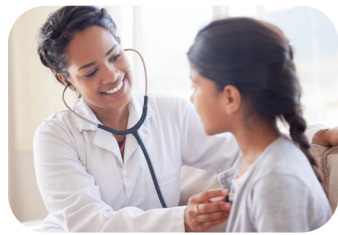
State Level

- Health 2040: Advancing health, access and care, authored by the Victorian Department of Health and Human Services (which has since been split into the Victorian Department of Health and DFFH)
- Victorian Health and Wellbeing Plan 2019–2023, authored by the Victorian Department of Health and Human Services
- Strategic plan 2019–2022, authored by the Victorian Agency for Health Information (VAHI)
- Strategic plan 2020–23, authored by SCV
- Organisational strategic plans, authored by VicHealth, VHA and statewide not-for-profits and private sector organisations

Regional and Local Levels

- Municipal health and wellbeing strategies, authored by councils
- Organisational strategic plans, authored by individual PHNs, public hospitals, private hospitals, community health organisations and others

A.6 Sectors



Public sector

Established and central within health and wellbeing. Acts as a funder, insurer (in the case of Medicare) and service provider.



Philanthropic trusts and foundations

Important contributor in some areas of health and wellbeing such as funding medical research (for example, the COVID-19 vaccine development) and supporting not-for-profit service delivery.



Private sector

Established and important within health and wellbeing. Acts as an investor, service provider (such as private hospitals) and insurer (such as Medibank).



Social enterprises

Emerging component of health and wellbeing. New organisations are being established to address challenges such as workforce pressure and inequity in service provision.



Not-for-profits

Established and important within health and wellbeing. Provides services, often with a focus on equity and access.

A.7 Health topics

The final category listed on page 32 is related to health topics. Health and wellbeing includes many areas such as chronic disease, women's health, men's health, children's health and many more. These areas are not always consistently named or categorised and are not mutually exclusive; many people experience co-morbidities across them. Some of these topic areas are named below as examples.

Health and wellbeing topics:

- Aboriginal and Torres Strait Islander health
- Aged care (or healthy ageing)
- Alcohol and drugs
- Allied health
- Child health
- Cancer
- Chronic conditions
- COVID-19
- Dental health (or oral health)
- Determinants of health
- Eye health
- Family and domestic violence
- Healthy eating
- Mental health
- Palliative care
- Physical exercise and activity
- Sexual and reproductive health
- Social and cultural connection
- Travel health
- Young people's health

The *Libraries for Health and Wellbeing strategic framework* defined 3 key categories of health and wellbeing (see below).

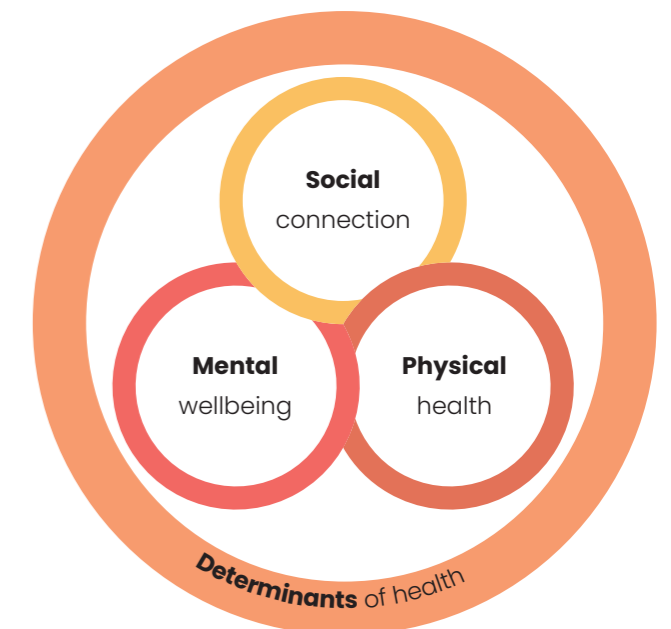





Image credit: *Libraries for Health and Wellbeing strategic framework*

Appendix B Key policy documents

B.1 Health 2040: Advancing health, access and care

This appendix contains an overview of key health and wellbeing policies and strategies. It is not exhaustive, instead it aims to highlight strategic themes from multiple key health and wellbeing documents.

Health 2040: Advancing health, access and care is the Victorian Government’s long-term strategy for Victoria’s health system. The table below outlines the goals and priorities within this document.

GOAL	KEY PRIORITIES	SO WHAT?
<p>Better health</p> 	<ul style="list-style-type: none"> • A system which is geared to prevention as much as treatment. • Everyone is encouraged to understand their own health and risks. • Illness is detected and managed early. • Healthy neighbourhoods and communities encourage healthy lifestyles. 	<ul style="list-style-type: none"> • Initial consultation findings indicate strong alignment of libraries with all elements of this goal area. • In particular, the positive impacts of increasing health literacy will enable people to understand their own health and risks as well as manage their health.
<p>Better access</p> 	<ul style="list-style-type: none"> • Care always being there when people need it. • More access to care in the home and community. • People being connected to the full range of care and support they need. • Fair access to care. 	<ul style="list-style-type: none"> • Strong alignment with the third and fourth priorities. • If libraries are to partner with healthcare providers, they can ensure broader and fairer access to healthcare services.
<p>Better care</p> 	<ul style="list-style-type: none"> • Targeting zero avoidable harm in our health system. • Healthcare focused on outcomes. • People being active partners in care. • Care fitting together around people’s needs. 	<ul style="list-style-type: none"> • While the alignment to the priorities here is weaker, through better health literacy and access to health services, libraries can enable people to be active partners in their own care.

Key population groups that this policy targets includes First Nations, LGBTIQ+, refugee and asylum seekers, migrants and regional and rural Victorians.



B.2 Victorian health and wellbeing plan 2019–23

The Victorian Health and Wellbeing Plan 2019–2023 was developed by the Victorian Department of Health and Human Services, before it was restructured to become the Department of Health and the DFFH. The plan details 10 priority areas, of which four are focus areas. These priority areas represent factors that contribute most strongly to the burden of disease and health inequalities. The four focus areas are in bold:

- **Tackling climate change and its impacts on health**
- Reducing injury
- Preventing all forms of violence
- **Increasing healthy eating**
- Decreasing the risk of drug resistant infections in the community
- **Increasing active living**
- Improving mental wellbeing
- Improving sexual and reproductive health
- **Reducing tobacco-related harm**
- Reducing harmful alcohol and drug use.

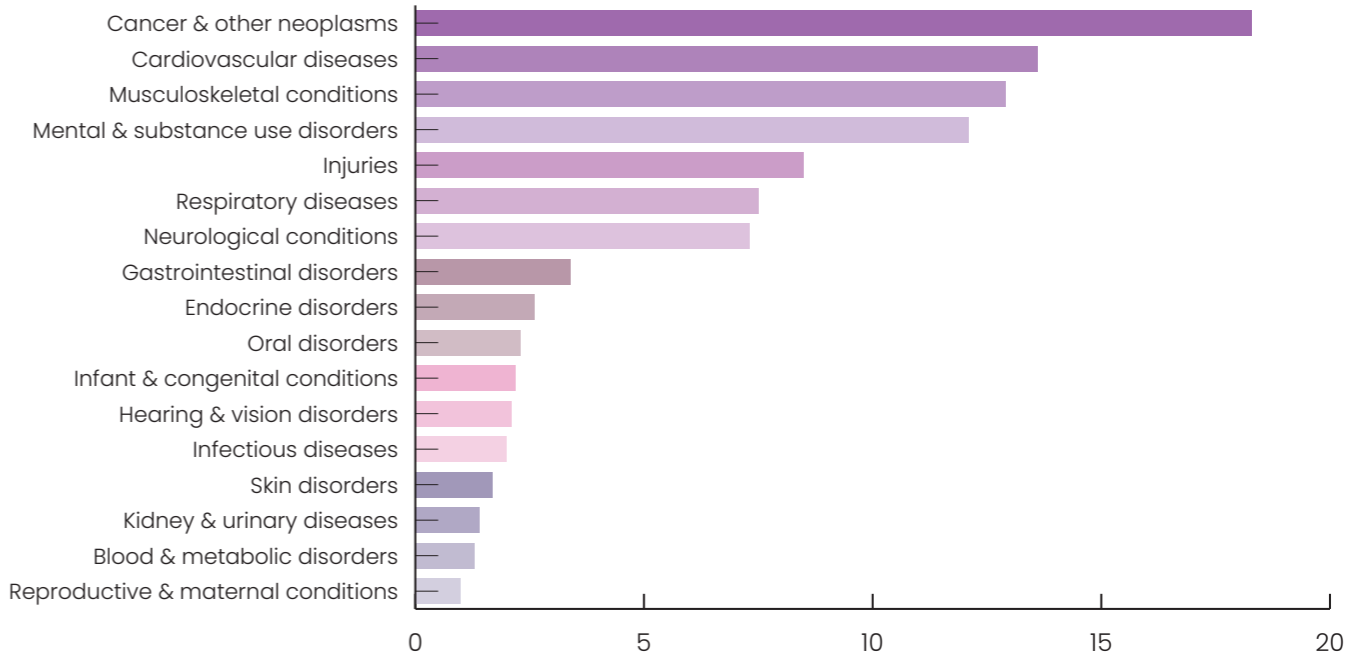
Priority population groups for the plan include First Nations, LGBTIQ+, refugee and asylum seekers, migrants and regional and rural Victorians as well as women and people living with a disability.

Spotlight

The plan increasingly recognises the social determinants of health as key mechanisms through which to impart better health and wellbeing outcomes in society.

In order to align with this plan, public libraries may consider how they can collaborate with partners to engage with and support the priority population groups highlighted here.

Proportion percentage of total burden by disease group in Australia, 2015



Appendix C

Engagement findings

A summary of key themes that emerged through consultation with libraries and health and wellbeing leaders.

C.1 Health and wellbeing sector challenges

Roundtable sessions and interviews were held with health and wellbeing leaders to understand the key needs, challenges and gaps within the health and wellbeing sector in relation to achieving desired outcomes for communities.

The focus was on identifying those issues which could best be addressed with the skills, capabilities and assets of libraries. This information will help guide libraries as they seek to add value to health and wellbeing organisations.

Question:

What are the problems (that is, challenges, gaps and needs) facing health and wellbeing organisations that are creating a need for cross-sector partnerships?

Dissemination of pertinent health and wellbeing information

- Fast, accurate and easy-to-understand information is critical to helping communities understand and manage their health. Lack of effective coordination between providers makes it harder to reach people (including more vulnerable or at-risk community groups) at the right times to help them prevent health and wellbeing issues.
- Examples of this include in practice include:
 - myth-busting by providing clear, accurate and timely information into community
 - enhancing the accessibility of information, especially for communities and people with language and communication barriers.
- Providing additional and accessible channels to deliver information into communities.

Delivering joy, fun and care to people with a chronic disease or disability

- Especially for people with a disability, there is a need to supplement more formal care with opportunities to experience connection, normalcy and community connection; this can often be hard for health and wellbeing providers to provide in isolation, despite its positive wellbeing impact. Libraries can enable this in partnership with organisations such as disability providers.

Creative mechanisms of engaging and delivering health and wellbeing services

- This is about blending the elements of library services which are 'fun / inspiring / joy-creating' with the expertise of health and wellbeing organisations to deliver services through more creative mechanisms.
- Navigating the health and wellbeing system
- This is about supporting community members to understand and seek the right support.
- Examples of this challenge include:
 - understanding and accessing digital health channels and information
 - building awareness of the local services and supports available in their community.

Spaces, access and reach

- A key theme that was repeated through consultation was the need for spaces to deliver services, access to hard-to-reach population groups and reach into community. Each of these are strengths of libraries which can be leveraged to create greater impact.

Supporting literacy (and the wider social determinants of health)

- Especially in collaboration with community health, maternal and child and health promotion focused organisations there exists an opportunity to work together to build literacy skills. This includes digital literacy, physical literacy, health literacy and healthy habits. This will focus on the young, elderly and those who face barriers, disadvantage or marginalisation.

Shifting funding landscape

- As block funding decreases, cross-sector partnerships present opportunities to access additional and new sources of funding for both health and wellbeing providers and services, as well as libraries.

Having understood that (1) there are challenges facing health and wellbeing organisations that create a need for cross-sector partnerships and (2) the challenges themselves, this question focused on understanding the key outcomes being sought.

Question:

What outcomes are health and wellbeing organisations seeking to achieve through cross-sector partnerships?

- Coordination of networks (referrals) for timely access to information and services.
- Trusted spaces as part of a place-based approach to community health.
- Capacity to scale up services and information delivery through integration and resource sharing.
- Mechanisms for social prescribing to achieve improved social connection and resilience.
- Ongoing 'discovery' for both community members and health and wellbeing providers around health and wellbeing needs and solutions.
- Improved health literacy among communities that enables them to understand and manage their health effectively.

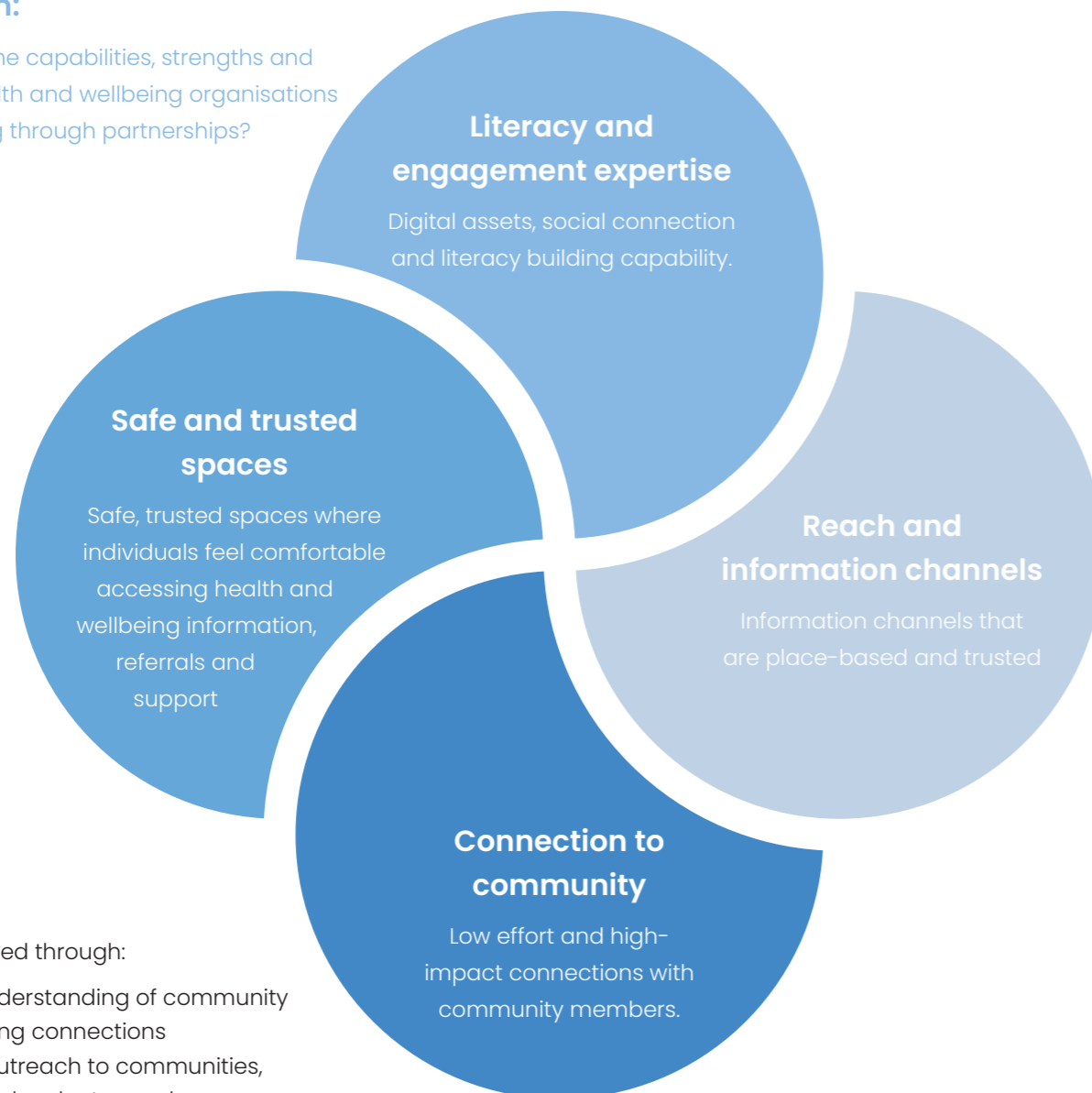


C.2 What libraries can offer through partnership

This question focused on understanding the key capabilities, strengths and assets that libraries bring to health-library partnerships.

Question:

What are the capabilities, strengths and assets health and wellbeing organisations are seeking through partnerships?



This is achieved through:

- deep understanding of community and strong connections
- strong outreach to communities, including harder to reach groups
- strong digital capabilities and digital literacy capacity-building
- breadth of service across Victoria
- safe, accessible, stigma-free and trusted spaces.

C.3 What works well and what to avoid

Library leaders already possess experience of past and current partnerships approaches. This learning can be used to help shape future partnerships approaches and avoid common pitfalls.

Question:

In your experience, what has worked well/ not worked so well when health and wellbeing organisations have engaged with cross-sector partners?



What worked well

- Clear roles and understanding of capabilities
- Leveraging individual knowledge, skills and expertise
- Transparent and timely communication of issues
- Alignment of respective strategic goals
- Formal documentation for larger projects

What didn't work so well

- Loss of individual relationships (turnover)
- Lack of long-term sustainability plan for the partnership
- Lack of natural alignment with mutual goals
- Keeping updated with partners' capabilities for more collaboration and layers of value
- Knowledge gaps
- Weak ownership of the partnership/project



Appendix D

Ecosystem map

Notes on the ecosystem map provided with this report to help get the most from it.

There are many components of the health and wellbeing ecosystem – from acute healthcare delivered in hospital settings, to health and wellbeing promotion delivered by local councils and community groups. Libraries are uniquely positioned as intermediary conduits that connect the community to health and wellbeing services and information. Understanding the health and wellbeing ecosystem will help libraries develop partnerships and play impactful roles within this space.

The Victorian health system is divided into two main forms of health care:

Hospitals and health services

- Victorian hospital services are provided by both public and private hospitals. Hospital care is characterised by acute health services where the aim is to cure, alleviate or mitigate a severe medical condition or provide urgent health emergency care either medically or surgically.
- Victorian public hospitals also provided sub-acute and non-acute healthcare treatments and run outpatient specialist care.
- Victoria has over 300 hospitals and health services, including large public and private hospitals, rural and regional health services, specialist mother and child hospitals and small specialist rehabilitation and psychiatric hospitals.

Every public hospital in Australia is part of the Local Hospital Network (LHN). LHN is an organisation which provides public hospital services through one or more hospitals, some also manage community health services.



Primary health care

- A person's first contact with the health system is usually primary health. This broadly includes health promotion, prevention, early intervention, treatment of acute conditions and management of chronic conditions; in other words, treatment unrelated to hospitals.
- This care is delivered by **general practitioners, nurses, dentists, pharmacists, allied health and mental health providers**, and **Aboriginal and Torres Strait Islander health practitioners**.
- Primary health is also delivered through Victoria's **community health services**, in place-based primary health and human service centres. They provide drug and alcohol, disability, dental, post-acute care, home and community care, mental health services and community rehabilitation.

Primary care providers offer referral pathways to other primary service providers, hospitals, specialist healthcare services and others.



Organisations

Government organisations	<ul style="list-style-type: none"> • Key government entities related to health and wellbeing. At the state level governance, policy and information services are provided by government entities. • The best point of reference for place-based health and wellbeing services by geography will be the local government councils as they deliver health and wellbeing services or fund initiatives or both. • The <i>Public Health and Wellbeing Act 2008</i> requires councils to prepare a municipal public health and wellbeing plan. Council health and wellbeing plans developed in 2021 will dictate actions until 2025.
Mental health organisations	<ul style="list-style-type: none"> • Organisations that either advocate, deliver services or undertake research for mental health outcomes.
Disability services	<ul style="list-style-type: none"> • Organisations that either advocate, deliver services or undertake research for people with disabilities and their families.
Major charities	<ul style="list-style-type: none"> • NFP social or community service organisations focused on health and wellbeing as it intersects with social issues such as domestic and family violence, homelessness, gender equality, sustainability and climate change, poverty and discrimination. • Charities have established referral pathways into the health system. • Charities can be philanthropic partners and advocate for health and wellbeing as an agenda for improvement.
Women's health and gender equity	<ul style="list-style-type: none"> • Organisations that either advocate for, deliver services or undertake research specialised in gender equity and women's health.
Young people, children and families	<ul style="list-style-type: none"> • Organisations that either advocate, deliver services or undertake research for young people, children and their families.
Peak bodies	<ul style="list-style-type: none"> • Organisations that represent the collective interests and positions of a set social cause or group of people. • Peak bodies often set guidelines for their membership to operate within. • They can be a good conduit resource to reach many organisations that fall under one social cause or service area.
Alcohol and other drugs	<ul style="list-style-type: none"> • Organisations that either advocate, deliver services or undertake research for alcohol and drug issues and management.

Aboriginal and Torres Strait Islander peoples	<ul style="list-style-type: none"> • Organisations that either advocate for, deliver services or undertake research focused on First Nations Australians. • Specialised primary health care delivered for and mostly by indigenous Australians are called ACCHOs. • Victorian ACCHO (VACCHO) is the peak body for ACCHOs in Victoria and are great resource to connect to specialised First Nations primary health care providers in the state.
Community health	<ul style="list-style-type: none"> • Community health organisations deliver primary care and are place-based services. • The map segments the service providers by metropolitan and regional areas. • Numbers of community health care providers are more significant in regional areas.
Allied health	<ul style="list-style-type: none"> • Allied health professionals are often accessed through referral by the hospital system or the primary care system. A directory of Australian allied health professionals is highlighted.
Hospitals	<ul style="list-style-type: none"> • Public hospitals in Victoria are listed by metropolitan and regional geography. Hospitals offer acute and sub-acute treatment for patients. In most cases they also offer specialised outpatient clinic services. • The <i>About Victoria's mental health services</i> website [www.health.vic.gov.au/mental-health/about-victorias-mental-health-services] contains information on specialised mental health services and centres in hospitals.
Primary health care providers	<ul style="list-style-type: none"> • In this map we refer to primary health care providers as general practices delivered by general practitioner physicians. We have included a web directory of primary health providers on the map.
Health promotion	<ul style="list-style-type: none"> • Public health promotion and prevention organisations that work to enhance public health outcomes of the population at the early intervention stage. • Many of the organisations listed are involved in advocacy, information and research and capacity-building.



Target demographic

The cohorts the organisation supports:

- Universal (applicable to all people)
- Women
- First Nations people
- Culturally and linguistically diverse people (CALD)
- Young people (between the ages of 0–25)
- Low income (individuals or groups)
- Senior citizens
- People with a disability

Type

The type of activity the organisation undertakes:

- Peak body
- Directory of services
- Network
- Social services / community services
- Not-for-profit
- Service provider
- Government
- Information (a resource for information)
- Environment (focused on environmental protection)
- Housing
- Training and recreation / sport and recreation

Further learning resources

- The *About Victoria's mental health services* website [www.health.vic.gov.au/mental-health/about-victorias-mental-health-services] provides links to mental health and wellbeing services in Victoria.
- The *Victorian Agency for Health Information* website [vahi.vic.gov.au/mental-health-services] provides a directory to find mental health services in Victoria.
- The *Department of Health - Patient Care* website [www.health.vic.gov.au/hospitals-and-health-services/patient-care] provides information about patient-centred care in the Victorian health system.



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