

Report of Operations

Victorian Health Promotion Foundation
2016–17

Declaration by Chair of the Responsible Body

In accordance with the *Financial Management Act 1994*, I am pleased to present the Victorian Health Promotion Foundation's Annual Report for the year ending 30 June 2017.

A handwritten signature in black ink that reads "Nicole Livingstone". The signature is written in a cursive, flowing style.

Ms Nicole Livingstone OAM
Deputy Chair of the Board

15 August 2017

Section 1: Year in review

Our origin

VicHealth (the Victorian Health Promotion Foundation) is the world's first health promotion foundation, created in 1987 with a mandate to promote good health. We were established with all-Party support by the State Parliament of Victoria with the statutory objectives mandated by the Tobacco Act 1987 (Vic) (the Act). The responsible minister is the Minister for Health, The Hon. Jill Hennessy MP

The objects of VicHealth as set out in the Act are to:

- fund activity related to the promotion of good health, safety or the prevention and early detection of disease
- increase awareness of programs for promoting good health in the community through the sponsorship of sports, the arts and popular culture
- encourage healthy lifestyles in the community and support activities involving participation in healthy pursuits
- fund research and development activities in support of these objects.

Functions

The functions of VicHealth as set out in the Act are to:

- promote its objects
- make grants from the Health Promotion Fund for activities, facilities, projects or research programs in furtherance of the objects of VicHealth
- provide sponsorships for sporting or cultural activities
- keep statistics and other records relating to the achievement of the objects of VicHealth
- provide advice to the Minister on matters related to its objects referred by the Minister to VicHealth and generally in relation to the achievement of its objects
- make loans or otherwise provide financial accommodation for activities, facilities, projects or research programs in furtherance of the objects of VicHealth
- consult regularly with relevant Government Departments and agencies and to liaise with persons and organisations affected by the operation of this Act
- perform such other functions as are conferred on VicHealth by this or any other Act.

VicHealth performs and manages these functions by:

- developing a strategic plan, including concept, context and operations

- initiating, facilitating and organising the development of projects and programs to fulfil the strategic plan
- ensuring an excellent standard of project management for all project and program grants paid by VicHealth developing systems to evaluate the impacts and outcomes of grants
- ensuring that such knowledge is transferred to the wider community.

Our commitment

- Fairness – we promote fairness and opportunity for better health for all Victorians, by making health equity an aim of all our work.
- Evidence-based action – we create and use evidence to identify the issues that need action and to guide policy and practice by VicHealth and our partners.
- Working with community – we work with communities to set priorities, make decisions and create solutions.
- Partnerships across sectors – we collaborate with governments at all levels and form alliances with others in health, sports, research, education, the arts and community, as well as nurture strong relationships with health promotion practitioners and the media.

Our difference

VicHealth has played a unique role since its inception. We champion positive influences for health and seek to reduce negative influences. This means helping individuals and communities make better-informed decisions, and shaping environments that support healthier choices.

Our strategy incorporates a behavioural insights lens that considers the influences on people's behavior and choices. This complements existing approaches with new ways to realise the health for all Victorians. Our culture of innovation enables us to be a catalyst for, and early adopter of, new health promotion approaches.

We work in partnership with all sectors as a trusted, independent source of evidence-based practice and advice. We play a critical role in creating and strengthening this evidence base through our rigorous research and evaluation of our actions.

Chair's report

In 1987, the Victorian Parliament established VicHealth, the world's first health promotion foundation, as part of the Tobacco Act. Thirty years on, as we reflect on a host of achievements we acknowledge there is still much to do.

VicHealth's creation represented a significant policy change for the Victorian Government and this new entity had to be established quickly in a challenging landscape. The pragmatism and drive of the founders and first staff team set the tone for VicHealth as a dynamic and innovative organisation, and those values hold true today.

Persistent and emerging health issues continue to challenge us, while the rapid pace of global change we are seeing in technology, society and sustainability require corresponding shifts in our thinking. VicHealth has already shown the necessary adaptability, which is evidenced in our updated Action Agenda for Health Promotion (Action Agenda).

In July 2016, we released *Destination Wellbeing: VicHealth's updated Action Agenda*, setting out how we will achieve our goals. *Destination Wellbeing* builds on the inaugural Action Agenda, released in 2013, which for the first time set out a 10-year action plan for VicHealth that reflects the changing environment in which we operate.

With the completion of the fourth year of our Action Agenda – and the first year working towards its 2016–19 priorities – we can see the progress and are well-placed to respond to the challenges and opportunities we face.

VicHealth's ground-breaking contribution to global health promotion and the people of Melbourne over the last 30 years was recognised with the prestigious Melbourne Achiever Award. At the awards event in May, the Committee for Melbourne acknowledged VicHealth as a significant and sustained contributor to evidence-based health promotion that will leave a lasting legacy, a fitting tribute in our anniversary year. This is a fitting tribute to the efforts of past Boards and staff members of VicHealth over the past 30 years.

We have seen much change since our inception, as well as enduring health issues. Obesity is steadily increasing, particularly in disadvantaged groups. Smoking rates have halved and alcohol consumption is reducing overall, but smoking and risky drinking continue to cause significant harm, particularly among populations or groups experiencing disadvantage. Our lifestyles have become increasingly sedentary over the past 50 years. Fewer than one in three Australians get enough physical activity to benefit their health. Two in three Victorian adults, and one in four of our children, are overweight or obese. Violence continues to be the most significant contributing risk factor to Victorian women's health and lives before the age of 45.

Most people drink alcohol responsibly but almost 500,000 Victorians drink 11 or more drinks on a single occasion on a monthly basis. Overall, young people are drinking less and starting to drink later in life than previous generations, but some are still drinking large amounts and are unaware that binge drinking can cause permanent brain damage. While we are working to address the societal pressure to get drunk, we are hampered by alcohol being so cheap, readily available and widely promoted.

Successful public health strategies over several decades have seen smoking rates in Australia decline steadily, to be among the lowest in the world. But rates remain high in groups experiencing disadvantage. In Victoria, smoking leads to the loss of around 4000 lives every year, and costs the state over \$10 billion.

Almost half of all Victorians will experience a mental illness in their lifetime, with the first onset of symptoms most common in teenagers and young adults. One in eight young Victorians say they are intensely lonely. Global employment trends including moves towards automation and digitisation are changing the job market for young people and creating new challenges that will mean they need greater resilience and social connection.

We are pleased that the UN's Sustainable Development Goals for 2030 include a new gender equality goal that presents a much stronger view than the earlier, corresponding Millennium Development Goal. Rather than focusing on access to education, it takes a broader view. As well as focusing on reforms to ensure equal access to economic resources, the goal requires women to have full and effective participation in political, economic and public leadership. Underpinning this is the vital call for the elimination of all forms of violence against women.

I congratulate the Victorian Government on the release of its *Free from violence* strategy in response to the recommendations of the Royal Commission on Family Violence. The implementation of this strategy, including the establishment of the first family violence prevention agency, is set to have a huge impact over the coming years. The strategy builds on the evidence in *Change the story*, Australia's national prevention framework launched by ANROWS, Our Watch and VicHealth in 2015.

By ensuring that all our strategies and programs are backed by rigorous evidence, VicHealth continues to be a trusted friend to our many partners and the communities we serve. VicHealth has looked to collaborate with new and different partners, as well as developing our existing partnerships, to tackle our new challenges. These partnerships in sectors including health, arts, sports workplace education and digital, as well as across all levels of government, help us expand the reach of our work and to co-design innovative solutions that can be integrated across the community.

We continue our focus on Behavioural Insights through our Leading Thinker initiative as a means to drive change. We are heartened to see this approach featuring in the work of our partners and numerous government agencies. The creation of a behavioural insights unit within the Victorian Department of Premier and Cabinet and the inclusion of behavioural insights-related drivers in the Victorian Government's Gender Equality Strategy, *Safe and Strong*, are very positive developments.

On behalf of the VicHealth Board, I would like to thank the Victorian Minister for Health, The Hon. Jill Hennessy MP, for her support and leadership. I also thank the Minister for Mental Health, The Hon. Martin Foley MP, the Minister for Sport, The Hon. John Eren MP, the Minister for Women and Prevention of Family Violence, The Hon. Fiona Richardson MP, other Ministers and their Advisers, Members of the Victorian Parliament, and the government departments and agencies, who have supported VicHealth this year. Our work for the people of Victoria unites us and allows us to achieve much together.

I am very grateful to the members of the VicHealth Board and Committees, who have been trusted advisers and have made an invaluable contribution to our work during 2016–17. I thank Deputy Chair Nicole Livingstone OAM; Board members Susan Crow, Nick Green, Margaret Hamilton AO, Collen Hartland MLC, The Hon. Wendy Lovell MLC, Veronica Pardo, Sarah Ralph, Simon Ruth, Natalie Suleyman MP, Stephen Walter; and new Board members in 2016–17: Dr Sally Fawkes and Ben Hartung.

I would like to thank our past Chair, Emeritus Professor John Catford, for his immeasurable contribution during his two years as Chair and two years as Deputy Chair. John helped to shape VicHealth's priority directions in the Action Agenda. I also wish to acknowledge the valuable contribution of Sally Freeman, whose term as Chair of the Finance, Audit and Risk Committee ended in October.

As Chair of the Board, I am pleased that VicHealth continues to practice strong corporate governance with balanced budgets, contemporary policies, progressive planning and effective resource management. This is a tribute to our Board, Finance Audit and Risk Committee, staff and CEO. Jerril Rechter continues to be an inspiring and influential leader for VicHealth and has been a tremendous support to me in my first year as Chair. Thank you Jerril. I would also like to congratulate her on being named in *The Australian Financial Review & Westpac 100 Women of Influence 2016*.

Success in health promotion does not happen in isolation – it takes a coordinated approach from across the community. I am grateful to VicHealth's many and varied partners for your support and inspiration over the year. The commitment from our partners and the skills and experience of the VicHealth Board and staff will propel us towards our vision of: *One million more Victorians with better health and wellbeing by 2023*.

I have great pleasure in presenting this Annual Report on VicHealth's many achievements in 2016–17.



Fiona McCormack
Chair of the Board

Following the VicHealth Board approving this Annual Report on 15 August 2017, we were deeply saddened to subsequently learn of the passing of the Hon. Fiona Richardson MP – Minister for Women and Prevention of Family Violence. Fiona was a fearless advocate for women and children who had experienced the terrible toll of family violence, giving a voice to those who have too often been silenced. She also had the courage to share her own personal story, shining a light on the devastating impact of violence against women. We must all continue to build on Fiona's incredible legacy.

Chief Executive Officer's report

Year four of our 10-year Action Agenda for Health Promotion has brought a range of new opportunities to advance the VicHealth vision of: *One million more Victorians with better health and wellbeing by 2023*.

For 30 years, VicHealth has been a pioneer in health promotion with a unique role within Victoria to keep people healthy, happy and well – preventing chronic disease and keeping people out of the medical system. Our work provides individuals, groups and organisations with the latest evidence-based information and advice to make decisions which support the health of all Victorians. We understand how changes in the environment can promote health, and draw on practices that ensure we achieve the best outcomes for those who need it most. Our aim is that every Victorian, no matter their situation or resources, has the best chance for good health and wellbeing.

VicHealth is committed to five strategic imperatives that have the greatest potential to reduce disease burden and bring about the greatest measurable health gains. These are: promoting healthy eating, encouraging regular physical activity, preventing tobacco use, preventing harm from alcohol and improving mental wellbeing.

We continue to apply the VicHealth framework for health equity, Fair Foundations, to our work, recognising that good health is not distributed evenly in the community. People with low incomes, limited education or unskilled occupations, those from culturally diverse backgrounds, Aboriginal people, women, people with a disability and LGBTI communities often experience poorer health than the rest of the population. To reduce health inequities experienced by these groups, we work to address the underlying drivers of health and wellbeing and the social processes that distribute them unequally across society.

Innovation has always been part of our DNA. To us, innovation means discovering how to accelerate better health and wellbeing outcomes for Victorians. Pinpointing the strategies, approaches, insights and collaborations that can fast track our aim to create healthier lives. Innovation is embedded in our operating model, organisation structure, processes and reporting, funding criteria and systems. We value it as an essential business practice that keeps us delivering better outcomes.

Despite ongoing and emerging health challenges, positive new developments in VicHealth's operating environment will help us deliver better health and wellbeing impacts for Victorians.

This year, we were pleased to partner with the Department of Premier and Cabinet (DPC) Office for Prevention and Women's Equality to hold three 'Prevention is Possible' forums. The forums aimed to inform and build capacity for policy makers at all levels of government and the community to implement the Victorian Government's new strategy and help create a future free from family violence.

Over the last decade, VicHealth has used a public health approach to invest in the primary prevention of violence against women. We have worked with partners from a range of sectors to build policy, undertake research and implement programs that promote equal and respectful relationships between men and women. We are now working to ensure that our collective body of knowledge is used to inform the work of a growing number of organisations committed to preventing violence against women.

As the sector has grown and flourished, VicHealth has broadened its focus to consider the relationship between gender equality and health and wellbeing. VicHealth's Changing our Game program seeks to advance gender equality in sport for women and girls. Through the program, we continue to support the recommendations from the Victorian Government's Women in Sport and Active Recreation taskforce, and align with the Government's Gender Equality Strategy and women and girls in sport initiative.

Over the year, we worked with both new and longstanding partners to find innovative solutions to collectively tackle complex health and wellbeing challenges. VicHealth plays a critical role in bringing together diverse groups and organisations. This includes all levels of government, as well as groups and individuals working in health, sports, research, education, the arts, health promotion, the media and local communities.

We hosted the 16th Annual International Network of Health Promotion Foundations (INHPF) General Meeting, attended by health promotion leaders from across Asia Pacific to share expertise and the latest research developments. As part of our role as a WHO Collaborating Centre for Leadership in Health Promotion, we were proud to present VicHealth as a model of a successful health promotion foundation for other countries in the Western Pacific region to follow.

Together with the World Health Organization, the International Network of Health Promotion Foundations, CSIRO and the Melbourne School of Global and Population Health, we convened the Destination Wellbeing forum. The forum's objective was to refine global and local priorities and to prompt a new wave of health promotion research.

We were honoured to be invited to participate in the 9th Global Conference on Health Promotion in Shanghai. The Conference, which culminated in the Shanghai Declaration, focused on the Sustainable Development Goals and the key role health promotion can play in achieving them.

Similar themes emerged at the 15th World Congress on Public Health in Melbourne, where we were delighted to present a range of research findings, as well as taking part in celebrations for the 50th anniversary of the World Federation of Public Health Associations and hosting a Salt Reduction Breakfast Forum.

The Congress also gave us a great opportunity to celebrate VicHealth's 30th anniversary with a number of our key local and international stakeholders, including WHO Regional Director for the Western Pacific Dr Shin Young-soo.

We organised the first Kids Camp Out at Government House. Children from Sunshine North Primary School camped out in tents as part of a program to encourage them to lead active lives and have the confidence to try new experiences. The overnight camp was hosted by VicHealth's Patron-in-Chief the Hon. Linda Dessau AC and her husband, Mr Anthony Howard QC. The grade 5 and 6 children took part in activities with a focus on fitness, fun and healthy eating as we look to a future where all Victorians are more active and better equipped to make healthy food choices.

Our Leading Thinkers initiative continues to open up exciting new ways to address the entrenched beliefs and behaviours that shape our culture. Professor Iris Bohnet and Dr Jeni Klugman from the Harvard Kennedy School have taken up our second Leading Thinkers residency and will be working with us over the next three years. Building on the behavioural insights approach used by our inaugural Leading Thinker Dr David Halpern, who worked on obesity, Professor Bohnet and Dr Klugman will focus on gender equality. They are starting with two trials: the first, on gender bias in recruitment, has been incorporated into the Victorian Government's RecruitSmarter project. The second trial will use data analysis to look at women's profile in media, particularly in sport.

We continued to invest in women's sport and active recreation through the #ChangeOurGame campaign launched by Minister Hennessey, and Active Club Grants funding that prioritised clubs wanting to offer more opportunities for women and girls. We also partnered with the Melbourne Stars and Melbourne Renegades cricket teams for the second Women's Big Bash League, and with Carlton, Western Bulldogs and Melbourne football clubs for the inaugural AFL Women's season.

Funding to Cancer Council Victoria for the Quit Program continues to be our largest and longest-standing investment. Through this effective program and its impactful anti-smoking campaigns, we support delivery of a comprehensive and integrated approach to reducing harms from tobacco across Victoria.

We continued our work to address the health inequities experienced by the people living in the Latrobe Valley in our role delivering on the recommendations of the Hazelwood Mine Fire Inquiry Report. Through our involvement with the Latrobe Health Assembly, we are supporting community actions and working with service providers to tackle the social determinants of health in the area.

We launched our updated Action Agenda, which will give us greater confidence to tackle health challenges and to further build our distinctive capabilities as a leader in health promotion.

As we progress towards our goals, VicHealth will focus our efforts on three critical areas, where the underlying drivers of health often intersect: gender, youth and community.

Our actions include:

- Gender: Working with key partners in a range of settings, most notably sporting associations, to advance gender equality as a determinant of health and wellbeing
- Youth: Working with young people and partner organisations to build environments that support healthy young people across the State
- Community: Working with Victorian communities (defined by place or social identity), particularly those experiencing disadvantage and exclusion, to promote the drivers of good health and wellbeing.

Our updated Action Agenda has an even clearer direction for each of our five strategic imperatives:

- Promote healthy eating: In response to the community support for and suggestions of the Citizens' Jury on Obesity, we are advocating and supporting evidence-based action to improve the eating habits of all Victorians. We will give particular attention to highly processed foods and drinks that add significantly to the burden of chronic disease by seeking to reduce salt consumption, working with industry partners to reduce salt in processed food, and making water the drink of choice in Victoria.
- Encourage regular physical activity: We are helping even more Victorians make physical activity a routine part of everyday life, particularly women and girls. We will also continue to invest in one of the most effective strategies to increase physical activity across the whole population: making it easier and safer to walk for short trips and active recreation.
- Prevent tobacco use: We are continuing to support what we know works in reducing the rates of current smokers and preventing uptake: motivating and supporting smokers to quit. We will further advocate for policies and practices that help Victoria lead the fight against tobacco in Australia and internationally. We will try innovative approaches, in settings and with groups where smoking remains all too common.
- Prevent harm from alcohol: We are continuing to make the case for control measures on the price, availability and promotion of alcohol, based on evidence that this can reduce community harm. Building on our world-first alcohol culture change framework, we will work with partners to test new ways of changing behaviour in specific high-risk settings and groups.

- **Improve mental wellbeing:** We are implementing our Mental Wellbeing Strategy by forging new partnerships with sectors that can make a difference to the resilience and social connection of young Victorians, such as sports, arts, workplaces, education and government. We will work closely with young people themselves to build the evidence for what works, and we will work with partners to put the findings into practice. We will deliver innovative approaches in priority settings to increase gender equality and build on our work on preventing of violence against women.

Operational and budgetary performance

We achieved our statutory expenditure target of making payments of not less than 30 per cent to sporting bodies (34 per cent expended) and not less than 30 per cent for health promotion activities (35 per cent expended).

The VicHealth Board set target ranges on investments according to our five strategic imperatives. Our largest investments were made towards encouraging regular physical activity (achieved at 34 per cent), followed by investments towards preventing tobacco use (achieved at 14 per cent). In addition, 15 per cent was invested in research and evaluation.

VicHealth continued to provide funding through grants to organisations to deliver projects and initiatives aligned to the Action Agenda. Quit Victoria received the largest payment of \$4.7 million to continue the work towards getting more Victorians smoke-free through the Quit program. This was followed by our investments into state and regional sporting organisations through the State and Regional Sports Programs, respectively, with a total of \$3.65 million. The Active Club Grants program had the highest number of organisations receiving payments – 318 community sport and active recreation clubs received \$930,000 of funding to increase participation in sport.

Sixty-three per cent of our grant funding was allocated to whole-of-population approaches to health promotion. The balance was allocated to a number of other target populations: Indigenous, women, children, those in low socioeconomic status groups, youth and older people.

Community settings received 42 per cent of our investments. This was followed by grants that focused on sports (37 per cent), digital/online (11 per cent) and the education setting (5 per cent).

2016–17 was the fourth year of our Action Agenda. Throughout the year, we focused on achieving our organisational goals and applying our organisational model of Innovate-Inform-Integrate. We continued to strengthen our internal processes, particularly in planning and delivering our work through the VicHealth Project Management Framework, and evaluating it through the Action Agenda Scorecard (see page 18).

Highlights of the year

Promoting healthy eating: more people choosing water and healthy food options

Water initiative / H30 Challenge

VicHealth’s water initiative is an integrated program of work with the goal of more Victorians choosing water instead of drinks with added sugar. While 55% of Australians exceed sugar intake guidelines, reducing intake of sugar-sweetened beverages and increasing intake of water promotes a healthier diet, improves health, prevents tooth decay and saves money.

The H30 social marketing campaign encouraged Victorians to make a simple 30-day pledge to replace every sugary drink they would normally drink, with water. In 2017 we worked with 18 local councils to promote the challenge in their area and encourage residents to make the switch to water.

Partnership with Etihad stadium and sporting clubs

Free water refills are now available for footy fans and other visitors at Etihad Stadium, with VicHealth setting up 10 fountains around the ground. The project provides a free and healthy way for fans to rehydrate on game days. Nearly 4800 litres of water was dispensed through the water fountains in 2016. The project is a partnership between VicHealth, Etihad Stadium and Yarra Valley Water. In 2016, AFL clubs Western Bulldogs, Essendon, North Melbourne, Carlton and St Kilda joined us to support the initiative.

Evaluation of trials to reduce consumption sugar-sweetened beverages

VicHealth is calling on food retailers to reduce fatty, sugary and salty foods and beverages for sale and increase the amount of fresh, healthy and nutritious food available for consumers in a bid to tackle Australia’s obesity epidemic. A VicHealth-funded evaluation of three healthy choices trials undertaken in the key public settings of healthcare and sport and recreation facilities, revealed that reducing the availability of unhealthy food and drinks and increasing the availability of healthy items has a positive effect on people’s choices, with little to no effect on revenue.

Salt

A quarter of Victorians don’t know that too much salt in childhood can lead to a lifetime of health risks. Many parents also don’t realise that a lot of the salt we consume is hidden in processed foods like pizzas, breakfast cereals, bread, and packet soups and sauces. The Salt Reduction Partnership Group has continued its innovative approach in achieving commitment for action on salt reduction from governments, industry and the public.

As part of the partnership, VicHealth and the Heart Foundation (Victoria) led a salt awareness campaign based on the idea that you can't trust your tastebuds when it comes to knowing how much salt is in the food you buy.

Encouraging regular physical activity: more people physically active, playing sport and walking, with a focus on women and girls

Female participation in sport

Sport is sport, regardless of who's playing it. Sport should be inclusive, equal, respected and encouraged at all levels for a healthier lifestyle. By creating an even playing field for all sports persons whether female or male, we can contribute to a fairer community. VicHealth's #ChangeOurGame campaign has brought together top athletes, teams and partners to encourage Victorians to support gender equality in sport.

As part of our work to change attitudes in Victoria, we announced \$7 million of new funding over the next three years for our Advancing Gender Equality in Sport for Women and Girls program. The investment aims to create new opportunities for women's participation in sport, increase the profile of women's sport and improve attitudes towards gender equality in sport, and improve sport policy and practice to create welcoming and inclusive environments for women and girls.

Walk to School

Victorian primary students who took part in Walk to School this year have smashed previous records by walking 1.6 million kilometres – the equivalent to two return trips to the moon. A record 758 schools took part with a total of 144,928 students participating, a significant increase over 2015. Walk to School month encourages primary school children to walk, ride or scoot to or from school to kick-start healthy habits for life.

Innovation Challenge: Sport

We invited sporting and active recreation organisations to apply for a share of \$500,000 to test new ideas and get more people moving toward better health and wellbeing. We challenged them to lead sport in a new direction, creating fun and flexible sessions, finding more places to play and helping disadvantaged Victorians get active. We have given start-up funding to five organisations to make their ideas become a reality. The ideas being piloted include a flexible form of cricket played with teams of four, and a Tenpin bowling program that offers discounts to people who walk to the bowling alley.

Active Club Grants

VicHealth's grants program for community clubs has been supporting local sports and active recreation clubs in remote, rural, regional and metropolitan areas to get more Victorians living healthier and happier lives for nearly three decades. In 2016–17, the Active Club Grants provided funding to increase opportunities Victorians have to participate in community clubs, prioritising female participation and social and modified forms of sports. We awarded \$930,000 to 318 sports and recreation clubs across Victoria.

Active Arts and White Night

We have funded three new projects connecting councils and the community to build physical activity, resilience and social connection and cohesion through active arts programs. One of the councils will provide a range of activities for young Sudanese people, Indian women and people with a disability to build the capacity of participants to become community leaders.

For the fourth year in a row we supported White Night Melbourne, as well as participating in the first White Night Ballarat, giving Victorians a great chance to get moving and have fun through art. Our contribution at both events was Swing City, a 12-hour dance marathon featuring almost every form of social dance, set to big band music from the 30s, 40s and 50s.

Victoria Walks

Walking is one of the most accessible forms of physical activity and delivers significant physical and mental health benefits, including helping to prevent chronic disease and increasing workplace productivity. We have committed to continue our support of Victoria Walks, to encourage more Victorians to walk for recreation and transport. The funding will enable Victoria Walks to deliver innovative walking participation projects, support Walk to School and work collaboratively with all levels of government to increase walking in Victoria.

Pride Game

VicHealth took a stand against homophobia by supporting the inaugural AFL Pride Game between Sydney Swans and the St Kilda Football Club on 13 August 2016. The game is about celebrating diversity and creating a safer, more inclusive environment for all players and supporters. With research showing 87% of young gay Australians who play sport feel the need to hide their sexuality, and with the rate of attempted suicide within the LGBTI community 14 times higher than that for the heterosexual population, the need for initiatives like the Pride Game is clear.

Preventing tobacco use: more people smoke-free and quitting

Quit Victoria

Overall in 2015, 11.9% of Victorians were daily smokers. This represents a substantial decline over the past decade, from 17.3% of Victorians who were daily smokers in 2004–05. However, smoking remains all too common in some settings and groups.

Quit Victoria launched a new campaign in April targeted at young men, which urges smokers to ditch cigarettes now rather than put off quitting until they are older and starting to feel the damage to their health. The campaign came as Cancer Council Victoria released data showing that more men in Victoria were daily smokers (13.9%) than women (10.1%).

We congratulate Uruguay on a landmark legal win that means graphic warnings will now cover 80% of cigarette packets, and terms used on packets to falsely imply that some cigarettes are less harmful than others – such as ‘light’ or ‘mild’ – will no longer be allowed.

Preventing harm from alcohol: more people and environments that support effective reduction in harmful alcohol use

Alcohol Culture Change

Across two funding stages, VicHealth’s Alcohol Culture Change Grants Initiative for Local Councils provides a pool of \$1.3 million to local councils to change risky drinking cultures across a number of sub-populations including young people disengaged from education, trade workforces and middle-aged men. Eight local councils were given funding for stage one to scope and plan interventions. Of these, the four projects demonstrating the most potential have been offered further funding to deliver their ideas over the next two years. We look forward to seeing the impact these grants will have on the communities they target.

Research from La Trobe’s Centre for Alcohol Policy Research (CAPR) together with VicHealth, has looked at alcohol cultures in middle- and older-age groups, with a specific focus on drinking in licensed venues. The research showed this group is increasingly likely to drink at risky levels. A VicHealth funding round offered \$1.06 million to fund up to six projects delivering solutions to tackle risky drinking cultures in sports bars, the construction industry and regional and rural settings.

Water in licensed premises

Offering free water in licensed premises is recommended for alcohol harm reduction but individual venues can decide how it is supplied.

VicHealth trialled an intervention that included having an attractive water dispenser and promoting the availability of free water throughout a Melbourne bar. The research found that very few patrons drink water if it is not promoted in some way. The interventions increased water consumption, were well-received by bar staff and had no negative effect on bar sales.

Improving mental wellbeing: more opportunities to build community resilience and positive social connections, with a focus on young people and women

Preventing violence against women in Victoria

Attitudes towards gender equality are a key driver of violence against women. They are also at the heart of the solution. VicHealth’s world-first model for preventing violence against women, Generating Equality and Respect (GEAR), was recognised with the prestigious national Excellence in Evaluation Award, announced by the Australian Evaluation Society (AES). GEAR provides accessible tools and resources for local governments, workplaces and organisations to take violence against women to the next level.

Innovation Challenge: Arts

In 2015, VicHealth funded two new projects for two years to use technology to increase physical activity and social connection. Dance Break by No Lights, No Lycra is an app that gets people active wherever they are by overriding your phone with an energising dance track. Season 2 of The Cloud by Pop up Playground ran from January to March 2017. It was an immersive street game where players had to find passcodes in the real world to unlock documents and videos hidden online.

Creating healthy workplaces

A positive workplace can provide us with a positive sense of community and connection with others, as well as help to build self-esteem and reduce symptoms of anxiety and depression. VicHealth, SuperFriend and WorkSafe Victoria have been working in collaboration since May 2016 to help workplaces create positive and supportive cultures and environments that enable workers to be more engaged, positive and effective at work.

Bright Futures

Almost 75 per cent of mental illness commences before 25 years of age so it’s crucial we take a preventative focus and proactively work to build resilience and connectedness. VicHealth is providing more than \$400,000 in grants to support the resilience, social connection and mental wellbeing of Victorian youth. Twelve new projects connecting councils, community and young people have been funded through the Bright Futures for Young Victorians Challenge.

Knowledge and research

The VicHealth Innovation Research Grant calls for researchers to undertake a two-year innovative research project with the potential to generate large health gains. Five projects were funded in 2016 and each will receive \$200,000 over two years.

We also opened NHMRC Partnership Project Grant and ARC Linkage Project Grant rounds in 2016. Eleven applicants were successful in gaining support, in principle, from VicHealth. Each project will receive \$150,000 over three years from VicHealth, pending final funding decisions from NHMRC and ARC.

Healthy Living apps

For the second year in a row, VicHealth commissioned independent researchers at Deakin University to review over 300 health and wellbeing apps to see which ones are most likely to help Victorians achieve their health goals. The user-friendly guide rates apps that claim to promote healthy eating and physical activity, reduce harm from smoking and alcohol and smoking, and improve wellbeing. The page has been viewed tens of thousands of times since its launch in September 2015, with nearly 30,000 views in the past year alone.

Indicators

We asked almost 23,000 Victorians about their health as part of the VicHealth Indicators Survey – a Victorian community wellbeing survey that focuses on the social determinants of health. The survey is based on core questions related to individual and community health and wellbeing, critical to inform decisions about public health priorities.

The survey complements the Victorian Government's Population Health Survey and when combined these datasets give local government planners a comprehensive picture of health and wellbeing in Victoria. The initial findings were released in November 2016 and we have now started on the next step – drilling further down into the data to gain insights on specific sub-population groups.

Sustainable Development Partnership Grants

VicHealth's Sustainable Development Partnership Grants aim to foster collaboration between Victorian and international partners to explore how social and environmental issues such as climate change, ageing populations and the exponential growth of technology will affect our health over the next two decades. The funding, announced during the World Congress on Public Health, provides an opportunity to facilitate partnerships between leading global experts to tackle critical public health issues such as obesity, gender equality and mental wellbeing.

Health equity

Elevate is a three-year initiative that seeks to promote health equity by enabling innovative thinking and the design of new solutions at community, inter-organisation, or population levels. Elevate aims to transform the drivers of health inequity by working with communities.

As part of Elevate, the VicHealth Community Challenge: Latrobe Valley called on the community to share their ideas on how to generate more jobs in the region. 'Transitioning the Valley' was named the winner of the inaugural Challenge in August 2016, receiving a \$20,000 boost from VicHealth. With significant community support, this project is a jobs and collective impact initiative that blends hard and soft infrastructure and new energy technologies. Initiated by the community, it will work with government, business and educational facilities to provide a pathway to transition local workers to future industries.

VicHealth is also supporting the Latrobe Health Assembly's planning by mapping current and recent health improvement activity in the Latrobe Health Zone. This information will help identify potential projects that could be scaled up across Latrobe City, and identify gaps where projects aren't currently being delivered.

Healthy communities

The Community Activation Program was a VicHealth initiative that aimed to assist less-active people to become more active. We partnered with five Victorian councils to create and 'activate' under-used public spaces within local communities, increasing access to opportunities for physical activity and social connection. We evaluated the program and found positive shifts in activity levels for many participants.

VicHealth is continuing to fund two of the councils' activations for extended delivery. Golden Plains Shire Council created an adventure park from a carpark and grassed area to engage women and families, and Latrobe City Council transformed a plaza and road, using tables, seating, temporary landscaping and an area for physical activity to make a pedestrian-friendly space for the community to use.

Leading Thinker initiative

As part of our inaugural Leading Thinker residency we ran Victoria's first Citizen's Jury on Obesity, where 100 jurors spent six weeks deliberating on the question: how can we make it easier to eat better? In October, VicHealth and collaborator Mosaic Lab won the IAP2 Core Values Award for Health for the project. We were proud to win this award, which recognises outstanding projects and organisations that are on the forefront of public participation.

Dr Klugman, one of our new Leading Thinkers, visited VicHealth in May and presented at various events and forums. There was a lot of interest in the Leading Thinkers initiative and we look forward to sharing results and learnings with our partners as the trials into de-biasing recruitment and women's profile in media progress.

These highlights are but a small sample of the many initiatives and projects on which VicHealth has worked in 2016–17. We have collaborated with organisations across the State and the knowledge we have generated has been extended through our many partners and their networks.

I would like to thank each and every member of the VicHealth team for their ongoing enthusiasm and dedication to achieving our goals. Their willingness to adapt and approach problems in new ways allows us to tread an innovative path that accelerates health outcomes for Victorians.

Thank you, too, to all VicHealth's partners and supporters including our colleagues across the Victorian Government and the local government, community and corporate partners with whom we have worked to achieve our common goals.

Our Board has continued to provide me with expert leadership and support. I acknowledge and thank our past Chair, Emeritus Prof. John Catford, for his expertise and guidance during his last two years as Chair and two years as Deputy Chair. VicHealth warmly welcomed Fiona McCormack as the new VicHealth Chair in October 2016. We have already benefited from the direction and insight Fiona brings through her extensive expertise in health and illness prevention, and her many years leading community change.

I particularly wish to thank the Victorian Minister for Health, The Hon. Jill Hennessy MP, for her support and leadership. I also thank the Minister for Mental Health, The Hon. Martin Foley MP, the Minister for Sport, The Hon. John Eren MP, the Minister for Women and Prevention of Family Violence, The Hon. Fiona Richardson MP, and other Ministers and their Advisers for their guidance and support.

As we celebrate our 30th anniversary and reflect on all that VicHealth has achieved, I am excited about our future. VicHealth has already truly established itself as a health promotion foundation with an international reputation for innovative, evidence-based programs that positively impact the people of Victoria. And with the immense skills of the VicHealth team and our partners, we can go even further.



Jerril Rechter
Chief Executive Officer

VicHealth Action Agenda for Health Promotion 2013–2023

VicHealth Action Agenda Scorecard

We use our Action Agenda Scorecard as a system to track our progress towards achieving targets set in the VicHealth Action Agenda for Health Promotion, our 10-year vision for championing the health and wellbeing of all Victorians.

By 2023, one million more Victorians will experience better health and wellbeing.*

OUR 10-YEAR GOALS



OUR THREE-YEAR PRIORITIES



RESULTS: We track our progress through the VicHealth Action Agenda for Health Promotion Scorecard



Our focus

Aligned with the World Health Organization's Ottawa Charter for Health Promotion, VicHealth takes action at multiple levels:

- Building healthy public policy in all sectors and at all levels of government
- Creating supportive environments for health where people live, work and play
- Strengthening community action for social and environmental change
- Developing personal skills that support people to exercise greater control over their own health
- Reorienting services to promote better health

Our model

INNOVATE

discovering how to accelerate outcomes for health promotion

INFORM

giving individuals and organisations the best information for healthier decisions

INTEGRATE

helping Victoria lead health promotion policy and practice

Our actions

- Introducing cutting-edge interventions
- Empowering through digital technologies
- Undertaking pioneering research
- Leveraging cross-sectoral knowledge
- Utilising social marketing
- Fostering public debate
- Providing tools and resources
- Developing strategic partnerships
- Advancing best practice
- Supporting policy development
- Strategic investments and co-funding
- Building capacity in individuals, communities and organisations

Our difference

We are proud of what sets us apart:

- A track record of delivering innovation
- An independent, trusted and credible voice
- Investment in research to drive change
- Connecting with people where they live, learn, work and play
- Focused on the positive state of health

Our origin

VicHealth is the world's first health promotion foundation, established in 1987 with funding from government-collected tobacco taxes and mandated to promote good health in the state of Victoria. VicHealth's very inception was a pioneering act that set the stage for our unique contribution to better health.

Our healthscape

Social, economic, environmental, technological and demographic trends are driving an epidemic of non-communicable, chronic disease globally.

The Victorian Government is committed to addressing the social determinants of health and their unequal distribution across the population as evidenced by:

- The Victorian Public Health and Wellbeing Plan 2015–2019
- The Royal Commission into Family Violence
- The Hazelwood Mine Fire Inquiry – Health Improvement Report

VicHealth will prioritise action that advances women and explores new ways of working with communities to address disadvantage. Our status as a World Health Organization Collaborating Centre for Leadership in Health Promotion enables us to share Victoria's world-class health promotion nationally and internationally.

OUR COMMITMENTS: Fairness | Evidence-based action | Working with community | Partnerships across sectors

* A technical paper describes the calculations underpinning the 10-year goals and three-year priorities. As some individuals may achieve goals across more than one imperative, the total number in each 10-year target exceeds one million to account for this.

Operational and budgetary objectives and performance against objectives

Budgetary performance

Under section 33 of the *Tobacco Act 1987*, the budget of VicHealth must include provision for payments to sporting bodies (not less than 30 per cent) and to bodies for the purpose of health promotion (not less than 30 per cent). The VicHealth Board also set the following parameters on grant expenditure for the financial year. These targets are used to guide the level of investment in each strategic imperative and in research and evaluation.

Our performance against these targets is summarised in Table 1.

Table 1: Performance against statutory and Board policy expenditure targets⁽ⁱ⁾

Performance measures	2016–17 minimum or target	2016–17 budget	2016–17 actual	2016–17 amount (\$'000)
Statutory expenditure target⁽ⁱⁱ⁾				
Sporting bodies	30%	31%	34%	12,960
Health promotion	30%	35%	35%	13,354
Board policy expenditure target				
Promote healthy eating	5%	9%	8%	3,061
Encourage regular physical activity	21%	27%	34%	13,213
Prevent tobacco use	13%	14%	14%	5,238
Prevent harm from alcohol	5%	6%	5%	2,035
Improve mental wellbeing	8%	10%	11%	4,190
Research and evaluation ⁽ⁱⁱⁱ⁾	12%	15%	15%	5,843

Notes:

- (i) Percentage figures are calculated as expenditure as a proportion of our budgeted government appropriation for the financial reporting period. For the 2016–17 financial year our appropriation was \$37.4 million. Figures exclude payments sourced from special funds unless otherwise indicated.
- (ii) Spend against statutory expenditure targets is not exclusive of spend against Board policy targets. Expenditure coded against the statutory targets is also coded against the Board expenditure targets. Expenditure on 'health promotion' in this instance is defined as total grant payments less grant monies issued to sporting bodies.
- (iii) The research and evaluation figure may include expenditure allocated to other statutory and Board expenditure categories.

Our operating performance against budget is summarised in Table 2.

Table 2: Operational performance against budget

Funding source	2016–17 actual (\$'000)	2016–17 budget (\$'000)
Total funds		
Total revenue	38,773	38,553
Total expenses	38,352	38,724
Total operating surplus/(deficit)	421	(171)
Appropriation funds		
Revenue	38,542	38,475
Expenses	37,982	38,206
Operating surplus/(deficit) from appropriation	560	269
Special funding		
Revenue	231	78
Expenses	370	518
Operating surplus/(deficit) from special funding	(139)	(440)

VicHealth's operations can be viewed as having two distinct funding sources. VicHealth receives core funding via the Department of Health and Human Services (DHHS) to deliver its' objectives as outlined in the Tobacco Act 1987.

Additionally, VicHealth periodically receives special funding from various government agencies to deliver specific programs. Often this funding is received as a lump sum, with expenditure subsequently incurred over multiple years to deliver the programs. This has the potential to create either a large operating surplus or deficit in particular financial years, as the revenue is recorded in the year of receipt and expenses recorded when the expenditure is incurred, often in subsequent years. This is the key reason for the budgeted \$0.2 million operating deficit from special funding this year.

Overall, the operating surplus for the year was \$0.4 million, being \$0.6 million greater than the budget deficit of \$0.2 million.

Total revenue was \$0.2 million (1%) higher than budget due to the receipt of special funding (\$0.2 million) mainly for a number of special projects. The appropriation from government of \$38.3 million was consistent with the budget.

Total expenditure of \$38.4 million was \$0.4 million (1%) lower than the budget. Wage and on-costs of \$8.2 million were \$1.1 million lower than budget due to staff vacancies and certain positions placed on hold. This underspend was used to increase our level of investment of health promotion programs and campaigns to \$26.6 million. Details of these major investments are listed in Table 3.

Granting of funds

As part of its core business, VicHealth has continued to provide assistance to organisations to deliver program outputs against our strategic framework through the granting of funds for health promotion and prevention purposes. Grant expenditure include health promotion expenditure such as programs, funding rounds, research grants, campaigns and directly associated activities.

Significant grant expenditure is defined as:

- any grant funding round where payments to successful organisations total \$250,000 or more during the financial reporting period
- single projects where payments to the organisation total \$250,000 or more during the financial reporting period.

Details of significant grant funding rounds are provided in Table 3.

Table 3: Grants with payments totalling \$250,000 or more during the reporting period

Funding round	No. of organisations receiving payments	Payments (\$'000)
Active Club Grants	338	1,037,449
Alcohol Culture Change	17	1,346,253
Bright Futures Challenge	15	463,388
Change to Walking	1	250,000
Female Participation in Physical Activity	6	950,000
Gender Equality in Sport	21	1,901,927
Innovation Challenge: Physical Activity	24	870,500
Leading Thinkers	22	527,831
Local Government Active Arts Program	6	339,295
Physical Activity and Sport Evaluation	17	389,607
Quit Victoria	1	4,695,000
Regional Sport Program	9	1,500,000
Research Funding Rounds	6	1,108,000
Response to Royal Commission into Family Violence	38	311,857
Salt Reduction	3	1,001,612
State Sport Program	24	2,150,412
SunSmart	1	900,000
Vicsport Partnership	1	300,000
Victoria Walks	2	326,550
Walk to School	81	1,317,636
Water Initiative	51	869,753

Note:

- (i) Evaluation and support relates to four funding rounds: Female Participation in Physical Activity, Innovation Challenge: Physical Activity, Regional Sport Program and State Sport Program.

Details of significant project payments to individual organisations are provided in Table 4.

Table 4: Organisations receiving grant payments totalling \$250,000 or more during the reporting period

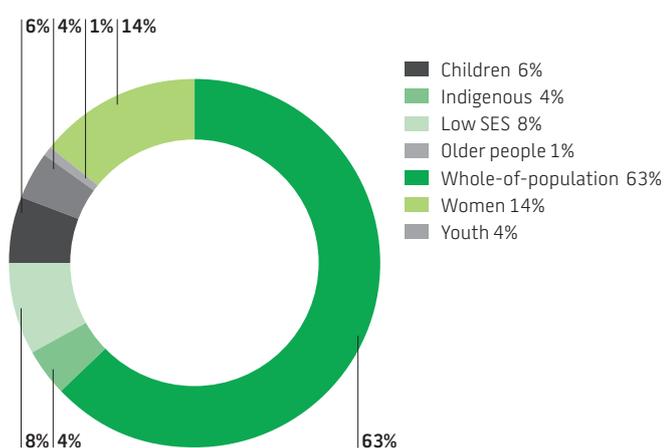
Organisation name	Project name(s)	Payments (\$'000)
Australian Football League Victoria	Increasing Female Participation in Sport Initiative: AFL Active; Physical Activity Innovation Challenge: AFL Victoria Female Indigenous Program, AFL Blind & Saints Play; State Sport Program; Gender Equality in Sport; AFL Etihad Stadium drinking water fountain activation; AFL PhD Scholarship	488
Cancer Council of Victoria	Legal Capacity Support; Obesity Prevention Policy Coalition; Sunsmart; Quit Victoria;	5,785
City of Melbourne	Fun Run; White Night Melbourne; Bright Futures Challenge: My Journey – Empowering young leaders; Alcohol Culture Change Initiative: What's your story? – Scoping project of social harm due to alcohol use and misuse in our late night environments	349
Deakin University	Creating healthy supermarket food environments; Retailer-led economic interventions; STICKE Healthy Eating; Supermarket intervention; Transform-Us! program in schools; Alcohol Culture Change in the University setting; Walk to School research and evaluation; Bright Futures Challenge evaluation; Healthy eating policies in public settings; Etihad Stadium water fountain activation and use evaluation; Healthy Living Apps; SDG Partnership Grant; VicHealth Indicators supplement report	757
GippSport	Regional Sport Program	300
Gymnastics Victoria Inc.	Female Participation in Sport Initiative: Move My Way; Physical Activity Innovation Challenge: TeamGym; State Sport Program; #waterisbetter: Water as the drink of choice; Facilitation for Inclusion Sport Network	252
Jeni Klugman	Leading Thinkers Residency	266
La Trobe University	Centre for Alcohol Policy Research: Alcohol cultures and policy expertise 2016; Alcohol cultures in middle and older age groups research; Alcohol Culture Change Initiative Evaluation; Sports programs evaluation; Changing Our Game: Advancing Gender Equality in Sport for Women and Girls evaluation preparation; Gender Equality in Sport evaluation; Pride Game Evaluation; Gender, Alcohol & Family Violence Symposium 2017; Evaluation of the VicHealth Innovation Challenge: Sport; VicHealth Water Initiative Grants evaluation; Active Club Grants evaluation; VicHealth Indicators supplement report; Capacity Building Program	950
National Heart Foundation of Australia (Vic)	Innovative approaches to salt reduction: food industry and consumer engagement; Salt Awareness Campaign	660
Netball Victoria	Female Participation initiative: Rock Up Netball; State Sport Program	335
Surfing Victoria	Indigenous Surfing Program Integration; Female SUP Program: Coasting – Stand Up Paddle Board for women	280
Tennis Australia	Female Participation in Sport Initiative: Get Into Cardio Tennis	250

The University of Melbourne	Active Club Grants; Response to Royal Commission into Family Violence: evidence review of gender equality and health in the Australian context; International Network of Health Promotion Foundations; Young Workers Gamification Project; VicHealth Indicators supplement reports and health planner digital engagement tool; Women and Social Connection Formative research; Evaluation of the Leading Thinkers Residency; Onemda VicHealth Koori Health Unit; The McCaughey Centre; Maintaining tobacco abstinence among people leaving smoke-free prisons in Victoria; Promoting participation in sport for migrant and refugee children and youth; Developing a LGBTI safe housing network	1,135
VicSport	VicSport partnership to build sector capacity within the Victorian sport and recreation sector; 2016 Victorian Sport Awards	306
Victoria Walks Inc.	VictoriaWalks; Behavioural insight trials	557

Target populations

Sixty-three per cent of our grant funding was targeted at whole-of-population approaches to health promotion. The remaining 37 per cent was targeted at one or more of our target populations, including women, children, Indigenous and low socioeconomic groups as summarised in Graph 1.

Graph 1: Allocation of grant expenditure across target population groups⁽ⁱ⁾



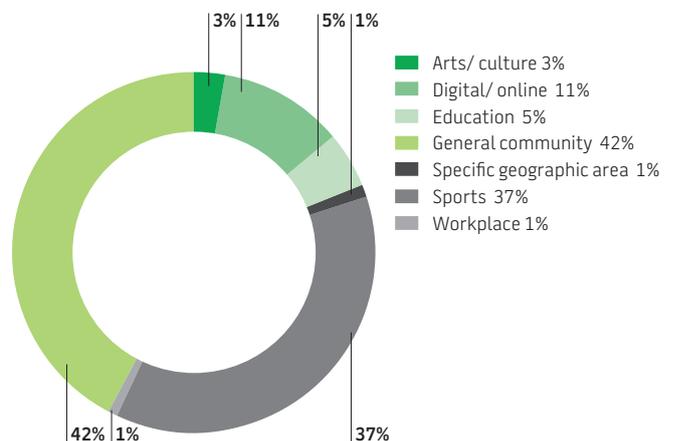
Note:

(i) Percentages are used to provide a relative indicator of investment across target populations. The percentages are a proportion of grant payments from appropriated revenue expended on each population group.

Settings

The proportion of grant funding allocated within each setting is provided in Graph 2. The largest setting is the community, closely followed by sports which reflects VicHealth's statutory obligation to provide grants to sporting bodies.

Graph 2: Allocation of grant expenditure across settings⁽ⁱⁱ⁾



Note:

(ii) Percentages are used to provide a relative indicator of investment across settings. The percentages are a proportion of grant payments from appropriated revenue expended within each setting.

Five-year financial summary

Table 5: Five-year financial summary

	2017 (\$'000)	2016 (\$'000)	2015 (\$'000)	2014 (\$'000)	2013 (\$'000)
Operating Statement					
Revenue from government	38,558	38,305	37,503	37,328	41,173
Other income	215	256	371	376	401
Total income	38,773	38,561	37,874	37,704	41,574
Grant and other expense transfers	27,535	26,451	29,915	28,055	30,500
Employee expenses and other costs	10,817	11,143	11,298	10,617	9,827
Total expenses	38,352	37,594	41,213	38,672	40,327
Net surplus/(deficit) for the period	421	967	(3,339)	(968)	1,247
Balance Sheet					
Total assets	5,987	5,494	5,825	9,415	10,488
Total liabilities	2,057	1,985	3,283	3,534	3,639
Total equity	3,930	3,509	2,542	5,881	6,849

Major changes affecting performance

Overall, VicHealth generated an operating surplus of \$0.4 million. The fact that special funding is usually received in one financial year, and then expended in subsequent financial years, tends to cause fluctuations in VicHealth's revenue, expenditure and operating results which has occurred in recent years as is illustrated in Table 5.

The 2016–17 operating result from special purpose funding has accounted for a \$0.1 million operating deficit, whereas an operating surplus of \$0.6 million from appropriation funds was generated.

Revenue of \$38.8 million was \$0.2 million higher than last year. VicHealth is appreciative of the continued financial support from the Victorian Government. The core funding received from the Department of Health and Human Services under the *Tobacco Act 1987* was \$38.3 million. The appropriation was higher than the previous year after an indexation increase of \$0.7 million, but revenue was partially offset by a decline in special funding by \$0.5 million to \$0.2 million.

Total expenditure for the year was \$38.4 million being \$0.8 million (2%) higher than last year, which is reflective of available funds due to the increase in the health promotion appropriation. Salaries and wages and other operating costs (\$10.8 million) decreased as a result of staff vacancies and continuing strategies to mitigate cost escalations. These savings were directed towards funding grants and direct implementation costs, which combined with an increase in funding available from the Government, resulted in our grant expenditure increasing by \$1.1 million to \$27.5 million.

Significant changes in financial position during the year

VicHealth's assets are valued at nearly \$6.0 million, comprising mostly bank balances (\$4.7 million) and receivables (\$0.8 million).

VicHealth maintains cash reserves at fiscally responsible levels, consistent with parameters stipulated in our cash reserves policy. Cash balances have increased by \$0.3 million, largely as a result of our overall operating surplus during the year.

Provision for employee benefits is VicHealth's largest liability at \$1.4 million, with grants payable and creditors amounting to \$0.7 million. Total liabilities of \$2.0 million and these categories of liabilities have remained consistent with last year.

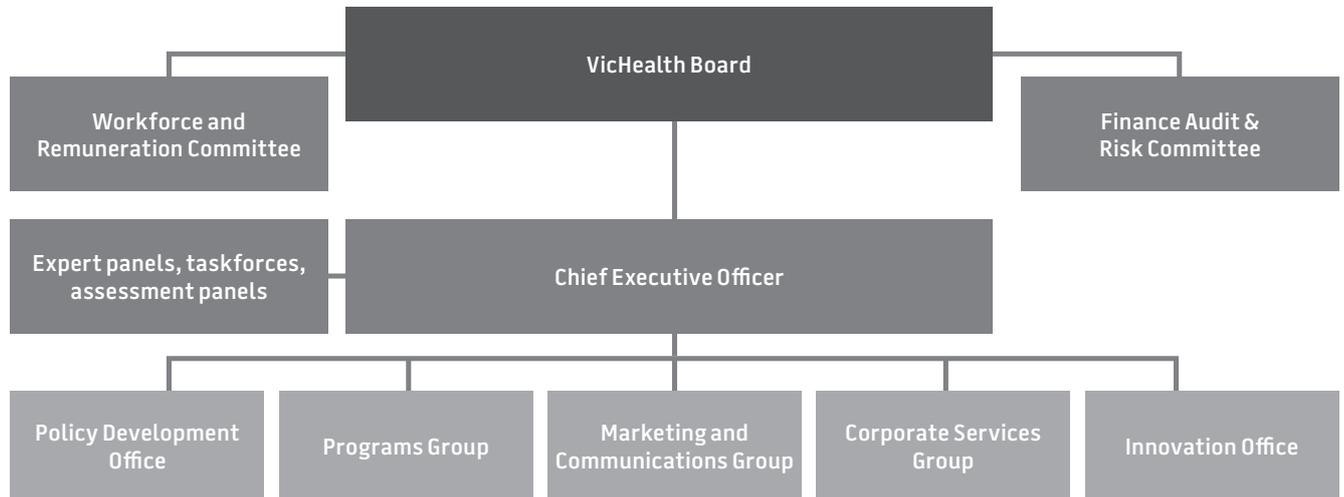
As at balance date, total equity increased to \$3.9 million as a result of the \$0.4 million operating surplus. Retained earnings of \$3.8 million are, in part, earmarked for allocation for a potential future upgrade of our IT applications in addition to maintaining reserves to fund employee provisions and other liabilities. The balance of retained earnings is monies quarantined to deliver special funded projects.

Subsequent events

There were no subsequent events occurring after balance date which may significantly affect VicHealth's operations in subsequent reporting periods.

Section 2: VicHealth organisation structure

VicHealth organisation structure



The key function of each of the groups/offices is outlined as follows:

Policy Development Office

Drive VicHealth’s strategic imperatives and model, and ensure the organisation’s policy, position statements and programs achieve world-class outcomes.

Programs Group

Design and execute program investment, grants, funding rounds, research and partnership activities to maximise outcomes from the Action Agenda for Health Promotion.

Marketing and Communications Group

Develop and deliver the organisational marketing and communications strategies, including branding, social marketing, campaigns, communications, publications and events to enhance VicHealth’s unique brand and reputation.

Corporate Services Group

Provide the finance, business planning, information technology and management, people and culture functions and manage the governance framework to support the work of VicHealth.

Innovation Office

Lead an organisation-wide innovation process for health promotion and internal business operations, and the VicHealth business model to inform, innovate and integrate.

Executive Management

The following people held executive management positions as at 30 June 2017:

Chief Executive Officer
Ms Jerril Rechter

Executive Lead, Policy Development Office (Acting)
Mr Greg Ford

Executive Manager, Marketing and Communications Group
Mr Stefan Grun

Executive Manager, Programs Group (Acting)
Ms Kellie Horton

Executive Manager, Corporate Services Group
Mr Dale Mitchell

Executive Lead, Innovation Office
Ms Nithya Solomon

Employee Committees

VicHealth has a number of cross-organisational employee committees or groups to assist management in operations:

- Diversity Committee
- Employee, Wellbeing and OHS Committee
- Enterprise Agreement Group
- Executive Team
- Incident Management Team
- Management Team.

In addition to these formal groups, there are a range of other cross-functional groups in operation.

VicHealth Board

The VicHealth Board members during the year were:

Ms Fiona McCormack – Member (1 July 2016 – 30 June 2017); Chair (1 October 2016 – 30 June 2017)

Fiona is the CEO of Domestic Violence Victoria, the peak body for family violence services for women and children in Victoria.

During a career spanning more than 20 years, Ms McCormack has worked at the forefront of community change in Victoria, with a focus on changing systems to improve outcomes for women and children at risk of family violence and highlighting the impact of gender on population health outcomes.

Ms McCormack has provided advice to governments through a number of high profile advisory committees at a state and national level.

Internationally recognised as an expert in her field, she has presented at many high profile forums, including the Victorian Royal Commission into Family Violence as well as a number of Senate Committees and United Nations forums.

With a background in social sciences, Ms McCormack also has extensive experience in community health – particularly working with culturally and linguistically diverse communities – as well as education, training and policy development.

Fiona took up the role of Chair of the VicHealth Board from Professor John Catford on 1 October 2016.

Emeritus Prof John Catford – Chair (1 July 2016 – 30 September 2016)

Professor Catford is Executive Director, Academic and Medical, at Epworth HealthCare. He was previously Deputy Vice-Chancellor, Vice-President and Dean (Faculty of Health, Medicine, Nursing and Behavioural Sciences) at Deakin University.

Having trained as a pediatrician and public health physician, he was Chief Health Officer and Executive Director of Public Health for the Victorian Government from 1998 to 2002. In 1994 to 1995, he worked for the World Health Organization as Health Policy and Public Health Adviser to health ministers in Central and Eastern Europe. Professor Catford is Chair of the Editorial Board of the journal Health Promotion International published by Oxford University Press, which he helped establish in 1986 and was Editor-in-Chief until 2013. He has published widely with more than 300 publications, and was co-author of the WHO's Ottawa Charter for Health Promotion in 1986, the Bangkok Charter for Health Promotion in a Globalized World in 2005, and the Nairobi Call to Action for Closing the Implementation Gap in Health Promotion in 2009.

Ms Nicole Livingstone OAM – Deputy Chair

Ms Livingstone is currently a host and swimming broadcaster on Network Ten Australia and ONE HD. She is a former elite athlete who has a strong background in sport, community, communications and media. She chaired the Ministerial Community Advisory Committee on Body Image.

She is Vice-President of the Victorian Olympic Council, a member of the Executive of the Australian Olympic Committee and a Director of Swimming Australia.

Ms Livingstone has previously worked with VicHealth and VicHealth's funded projects including Quit Victoria and Victoria Walks where she has demonstrated a good knowledge of health promotion.

Ms Susan Crow

Ms Crow is currently employed as the Head of Community, Melbourne City Football Club where she is responsible for the development and delivery of Melbourne City's Social Responsibility program.

She has 20 years' experience in sports administration roles, as the Chief Executive Officer of Netball Victoria and Softball Australia and the Executive Director, Women's Cricket Australia.

Dr Sally Fawkes (1 October 2016 – 30 June 2017)

Dr Sally Fawkes is a senior academic at La Trobe University where she coordinates health professional doctorates and post-graduate health promotion studies. She is an academic advisor to the Australian Futures Project hosted by La Trobe, a multi-sector, non-profit initiative striving to make 'long-termism' easier. She holds a Bachelor of Science, Master of Business Administration and a PhD in Health Policy. Dr Fawkes is a technical advisor for the World Health Organization and has been on the faculty of the WHO health leadership development program, ProLEAD since 2004.

She is serving a third term as an elected member of the Governance Board of the WHO-affiliated International Network of Health Promoting Hospitals and Health Services, and was instrumental in establishing the Victorian chapter, now a national network.

Dr Fawkes' research, teaching and professional work emphasises the application of foresight, systems thinking and health promotion in public sector governance, strategy and administration. Active fields of interest include leadership and foresight practice to improve health in Asia and the Pacific, health literacy and urban health in the context of the UN Sustainable Development Goals. She is a regular reviewer for national and international journals, and is editorial advisor to *Cities and Health*. Dr Fawkes has previously worked for the WHO Regional Office for Europe, Victorian Healthcare Association, and several universities and teaching hospitals. She has held Board appointments with Women's Health Victoria and community health services.

Mr Nick Green OAM

Mr Green is an experienced leader who has worked in senior roles across numerous areas including elite high performance sport, governance, finance and government relations. He is currently Chief Executive Officer of Cycling Australia, previously spending six years at the Victorian Major Events Company, including Group Manager of Acquisition and Development. He has been a member of the Commonwealth Games Australia Board of Management since 2016.

Mr Green has served as President of the Victorian Olympic Council (2005–2016), an Executive Board Member of the Australian Olympic Committee (2005–2017), and a Fellow and Director of Leadership Victoria (2014–2016).

Mr Green has attended eight Olympic Games and was the Chef de Mission for the 2012 Australian Olympic Team. He was awarded the Order of Australia Medal and inducted into the Sport Australia Hall of Fame in recognition of his sporting achievements, starting as a world rowing champion and subsequently as broadcaster and team manager.

Professor Margaret Hamilton AO

Professor Hamilton has over 45 years' experience in the public health field, specialising in alcohol and drugs including clinical work, education and research. She has a background in social work and public health and was the Founding Director of Turning Point Alcohol and Drug Centre in Victoria and Chair of the Multiple and Complex Needs Panel in Victoria.

She served as an Executive Member of the Australian National Council on Drugs and on the Prime Minister's Council on Homelessness. She is a member of Cancer Council Victoria and retired as President in 2015.

Professor Hamilton contributes to many other advisory groups in the areas of children in out-of-home care, youth drug problems, alcohol and drug policy and research. She was appointed to the Civil Society Task Force planning for the Special Session of the United Nations' General Assembly meeting on drugs in 2016, and its review in 2019.

Professor Hamilton holds an honorary position at the University of Melbourne and is retired but remains active.

Mr Ben Hartung (1 October 2016 – 30 June 2017)

Mr Hartung is currently the General Manager of Hockey Operations at Hockey Australia.

Mr Hartung has served on the Board of Vicsport since November 2012. He was the CEO of Hockey Victoria from 2008 to 2014, and prior to this was the Event Manager at the Australian Grand Prix Corporation. His more than 20 years' experience in sports administration and teaching also includes roles as a physical education and psychology teacher in secondary schools.

Thriving on continual education, Mr Hartung has completed a Bachelor of Arts, Graduate Diploma in Education, Graduate Diploma in Sports Science, Master of Sport Management and a Graduate Diploma in Sports Law. He is currently completing a Performance Leaders Program at the Australian Institute of Sport.

Hockey has been a life-long passion for Mr Hartung and he has been involved as a player and coach for over 35 years.

Mr Hartung is committed to creating healthy, safe, welcoming and inclusive sporting and recreational environments for all.

Ms Veronica Pardo

Ms Pardo is the Executive Director of Arts Access Victoria, the state's leading arts and disability organisation. In this role, she has led an ambitious agenda of social and artistic transformation for people with a disability and the communities in which they live. With a passion for social justice and equity, she has spearheaded campaigns relating to the inclusion of people with a disability in arts and culture, as audiences and cultural innovators.

Ms Pardo has a successful history of employment at senior levels in the not-for-profit sector, with a major focus on policy and advocacy. She has a long track record of leading research programs aimed at addressing barriers to participation. A linguist by training, she has specialised in Australian Sign Language (Auslan), where she holds two postgraduate qualifications.

Mr Simon Ruth

Mr Ruth is CEO of the Victorian AIDS Council. He has more than 20 years of experience in the fields of AIDS and HIV awareness, advocacy and treatment, alcohol, drug treatment and Indigenous services, youth work and community development.

Mr Stephen Walter

Mr Walter is a senior corporate affairs professional with over 35 years' experience in corporate communications, stakeholder relations, marketing and business development gained through the public and private sectors. He is currently principal and owner of Persuade Consulting. Previous to this, he was Chief of Staff and Head of Corporate Affairs at Australia Post where he was a member of the Executive Committee for a decade.

Mr Walter formerly held Board memberships at the Australian Association of National Advertisers and RMIT Alumni Association. His community contributions include pro-bono work for Cottage by the Sea, a charity supporting disadvantaged children, and advisory services to Opera Australia.

The Members of Parliament appointed to the Board are:**Ms Colleen Hartland, MLC**

Ms Hartland has been the Greens MP for the Western Suburbs of Melbourne and the Victorian Greens Spokesperson for Health since 2006.

Ms Hartland was raised in Morwell and has lived in Footscray for many years. She was a founding member of the Hazardous Materials Action Group (HAZMAG), campaigning for protection for residents from industrial hazards in the western suburbs, including the Coode Island explosion.

Amongst her varied job history, Ms Hartland worked at the Western Region Health Centre for five years, supporting older residents in the Williamstown high rise housing estate. She was a City of Maribyrnong Councillor between 2003 and 2005. She is passionate about addressing the social determinants of health.

The Hon. Wendy Lovell, MLC

Ms Lovell has represented the Northern Victoria Region as a Liberal Party member in the Victorian Legislative Council since 2002 and served as Minister for Housing and Minister for Children and Early Childhood Development from 2010 until 2014.

Through her role as a regional Member of Parliament and her former Ministerial responsibilities, Ms Lovell has developed a strong interest in maternal and child health and health outcomes in rural and regional communities.

Prior to entering Parliament, Ms Lovell enjoyed a career in small business as a newsagent and is well known for her commitment to community service and as a strong advocate for her region.

Ms Natalie Suleyman MP

Ms Suleyman is the State Member for St Albans. In April 2015, she was appointed a member of the Parliamentary Committee for Law Reform, Road and Community Safety and also as a Member of Parliament's House Committee. Natalie is Secretary of the Victorian Parliamentary Friendship Groups for Turkey, Lebanon and India.

Previously, Ms Suleyman served as a local councillor at the Brimbank City Council, including three terms as Mayor. She was awarded the Certificate of Outstanding Service – Mayor Emeritus by the MAV and received the Victorian Multicultural Award for Excellence – Local Government.

Ms Suleyman is pleased to be working with her community on the new \$200 million Joan Kirner Women's and Children's Hospital project in Sunshine, a significant redevelopment of health services in Melbourne's West.

Table 6: Board Attendance Register

Board	No. of meetings attended in 2016–17	Eligible meetings in 2016–17
Emeritus Prof John Catford, Chair (1 July 2016 – 30 September 2016)	2	2
Ms Susan Crow	6	6
Dr Sally Fawkes	2	4
Mr Nick Green OAM	5	6
Prof Margaret Hamilton AO	6	6
Ms Colleen Hartland MLC	5	6
Mr Ben Hartung	3	4
Ms Nicole Livingstone OAM, Deputy Chair	4	6
The Hon. Wendy Lovell MLC	4	6
Ms Fiona McCormack, Member (1 July 2016–30 June 2017); Chair (1 October 2016 – 30 June 2017)	5	6
Ms Veronica Pardo	5	6
Ms Sarah Ralph	0	1
Mr Simon Ruth	4	6
Ms Natalie Suleyman MP	2	6
Mr Stephen Walter	4	6

Finance, Audit and Risk Committee

The purpose of the committee is to assist the Board in fulfilling its governance duties by ensuring that effective financial management, auditing, risk management and reporting processes (both financial and non-financial) are in place to monitor compliance with all relevant laws and regulations and best practice.

During the reporting period, the Committee members were:

Independent Members	
Ms Sally Freeman	1 July – 30 October 2016 (Chair)
Mr Peter Moloney	1 November 2016 – 30 June 2017 (Chair) 1 July – 30 October 2016 (Member)
Ms Joanne Booth	1 December 2016 – 30 June 2017
Ms Kylie Maher	1 July 2016 – 5 April 2017
Mr Adam Todhunter	1 July 2016 – 30 June 2017
Board Members	
Mr Nick Green OAM	1 July 2016 – 30 June 2017
Ms Colleen Hartland MLC	16 November 2016 – 30 June 2017
Ms Sarah Ralph	1 July – 29 November 2016
Mr Simon Ruth	16 November 2016 – 30 June 2017

Table 7: Finance, Audit and Risk Committee attendance register

Finance, Audit and Risk Committee	No. of meetings attended in 2016–17	Eligible meetings in 2016–17
Ms Joanne Booth	2	2
Ms Sally Freeman	2	2
Mr Nick Green OAM	3	4
Ms Colleen Hartland MLC	2	2
Ms Kylie Maher	2	3
Mr Peter Moloney	4	4
Ms Sarah Ralph	0	1
Mr Simon Ruth	1	2
Mr Adam Todhunter	3	4

Workforce and Remuneration Committee

The purpose of the committee is to provide strategic advice on workforce strategy and planning, remuneration, human resources policies and alignment of VicHealth's policies with relevant industrial relations and employment legislation and Victorian government policies. Additionally the committee reviews the CEO's performance and remuneration.

During the reporting period, the following Board members were members of the committee:

Board Members	
Ms Nicole Livingstone OAM	1 July 2016 – 30 June 2017 (Chair)
Emeritus Prof John Catford	1 July – 30 September 2016
Ms Fiona McCormack	1 October 2016 – 30 June 2017
Ms Veronica Pardo	1 July 2016 – 30 June 2017
Mr Stephen Walter	1 July 2016 – 30 June 2017

Table 8: Workforce and Remuneration Committee attendance register

Workforce and Remuneration Committee	No. of meetings attended in 2016–17	Eligible meetings in 2016–17
Emeritus Prof John Catford	1	1
Ms Nicole Livingstone OAM	2	3
Ms Fiona McCormack	2	2
Ms Veronica Pardo	3	3
Mr Stephen Walter	3	3

Advisory Governance Framework

The VicHealth Advisory Governance Framework outlines VicHealth’s decision-making processes with regard to the provision of programs, research and grants. The principles provide VicHealth, stakeholders and the community with confidence that the processes are efficient, financially responsible and are meeting the objectives, policies and strategic plans of VicHealth.

The Advisory Governance Framework comprises three distinct groups, which make recommendations to the VicHealth CEO. These groups are established as required to examine specific health promotion and prevention issues. These are:

- Expert panels: to examine key strategic matters that affect the pillars of the Action Agenda for Health Promotion
- Taskforces: to investigate and provide operational and implementation advice on key strategic priorities and high-profile community health issues
- Assessment panels: to determine funding recommendations and/or review major funding/grant, and/or procurement proposals.

During 2016–17 the following groups were formed:

Expert panels
None
Taskforces
Alcohol
Leading Thinkers
Youth
Mental Wellbeing
Healthy Eating
Physical Activity
Salt Reduction Strategic Partnership
Assessment Panels
Bright Futures
Active Club grants
Water Grants Initiative
Innovation Challenge – Sport
Regional Sport Program – Reserve Funding
Changing our Game

In addition to these taskforces and panels, VicHealth consulted with a range of other health experts and stakeholders on specific health promotion and prevention topics and projects.

Patron-in-Chief

VicHealth is pleased and honoured to have as its Patron-in-Chief, The Honourable Linda Dessau AC, Governor of Victoria.

Section 3: Workforce data

Occupational Health and Safety (OHS) management

VicHealth's Occupational Health and Safety (OHS) policy demonstrates our commitment to the provision of a safe and healthy workplace.

VicHealth is committed to fostering and enshrining a culture within the organisation that values the importance of a healthy and safe work environment.

To further these aims, VicHealth has an established Employee Wellbeing and OH&S Committee. This comprises staff from across the organisation to act as an employee consultation group by undertaking the following tasks and functions:

- provide an avenue for employee consultation relating to wellbeing and OH&S
- promote employee wellbeing and OH&S
- deliver employee health and wellbeing activities/topics.

Our performance against key OHS indicators during the 2016–17 financial year is summarised in Table 9.

Table 9: Performance against OHS management measures

Measure	Indicator	2016–17	2015–16
Incidents	No. of incidents	0	1
	No. of hazards reported	2	0
Claims	No. of standard claims	0	0
	No. of lost time claims	0	0
	No. of claims exceeding 13 weeks	0	0
Claim costs	Average cost per standard claim ⁽ⁱ⁾	\$0	\$0

Note:

(i) Average cost per claim includes medical expenses only and does not include salary or wages.

Equity and diversity principles

Our equity and diversity policy demonstrates our commitment to creating and maintaining a positive working environment free of discrimination and harassment, which provides equal opportunities for all and values diversity.

In further support of this, VicHealth has established a Diversity Committee comprising employee representatives from all groups of the organisation.

As part of our diversity commitment, key activities commenced during the year include:

- development of a diversity action plan (in concert with the Disability Action Plan and Reconciliation Action Plan review)
- updating our Diversity and Inclusion Policy
- participation in the People Matter Survey (Diversity and Inclusion module)
- undertaking gender pay audit
- being a member of the Office of Prevention and Women's Equality's Gender Auditing Working Group.

VicHealth Disability Action Plan

VicHealth's Disability Action Plan (DAP) outlines a range of actions to be progressively implemented over a three year period. These actions include improving accessibility and removing barriers for people with disabilities so that they are treated equally. Initiatives include office modifications, website accessibility audit, improved employment policies and opportunities as well as staff awareness training.

VicHealth is pleased to report that it has implemented most of these initiatives. As VicHealth's DAP has nominally expired, work has commenced to renew our DAP for the next three years. It is anticipated that the updated DAP will be completed in late 2017.

VicHealth Reconciliation Action Plan

VicHealth has a strong history of working collaboratively with Aboriginal and Torres Strait Islander communities to meet locally identified needs in culturally appropriate ways. VicHealth's first Reconciliation Action Plan (RAP), released in 2013, is one of a number of mechanisms that VicHealth has implemented to ensure that we are supporting best practice in Aboriginal health promotion, both with our partner organisations and within our own organisation.

The RAP outlines practical actions VicHealth has undertaken to build a stronger relationship and enhance respect with Aboriginal and Torres Strait Islander peoples, including culture awareness sessions for employees, developing Indigenous language protocols and an Indigenous governance framework, and encouraging staff to participate in National Reconciliation and NAIDOC weeks. Similar to the DAP, the RAP has nominally expired, and work has commenced on updating our RAP for the next three years.

Public administration values and employment principles

VicHealth continues to implement the directions of the Commissioner for Public Employment with respect to upholding public sector conduct, managing and valuing diversity, managing underperformance, reviewing personal grievances and selecting on merit.

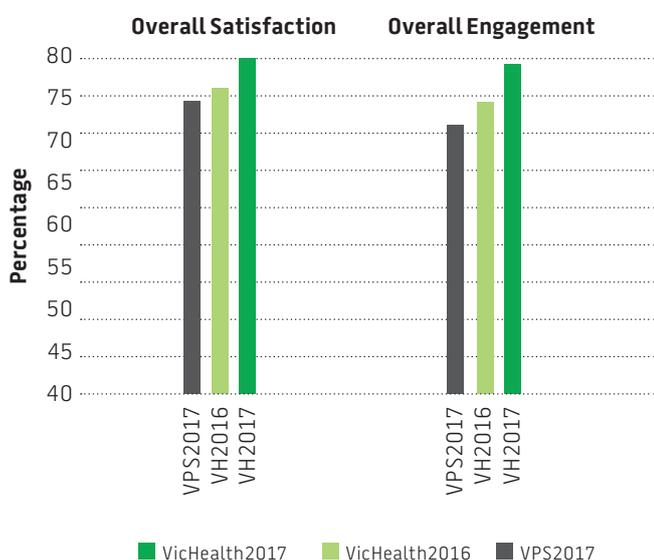
VicHealth regularly reviews its suite of detailed employment policies, including policies with respect to grievance resolution, recruitment, performance management, learning and development, managing conflicts of interest and gifts benefits and hospitality.

In support of the above, VicHealth developed a staff driven Employee Culture Charter. The Charter outlines four principles that set the cultural and professional standards to which we all commit and expect other employees to demonstrate. The four principles are Trust, Challenge, Accountability and Results. At the end of the year, a peer-based recognition is awarded to staff members who best demonstrate these principles.

VicHealth workplace

Annually, VicHealth staff participate in the Victorian Public Sector Commission's (VPSC) People Matter Survey. VicHealth is committed to being an employer of choice and the 2017 survey illustrates this commitment with the majority of results either exceeding or being consistent with the Victorian Public Sector average.

Graph 3: Results from the People Matter survey



VicHealth is committed to continuous improvement and will develop an action plan in consultation with employees to address areas where the survey results were lower than desired.

VicHealth, in consultation with employees, is reviewing and updating its Workplace Flexibility Policy and practices to ensure it aligns with the VPSC's *Mainstreaming Flexibility Across the VPS* and that our existing practices continue to model better practice.

VicHealth is proud of its commitment to offering employees workplace flexibility with a range of options available. This is illustrated with over one-third of employees working part-time, an increase of 20% over the past three years.

One of the challenges for all employers is mental wellbeing of its employees. VicHealth's Mental Health and Wellbeing Policy outlines a range of work practices and initiatives to promote mental wellbeing and provide support services to employees. During the year, VicHealth implemented the SuperFit Mates Program.

SuperFit Mates is a peer mentoring program that supports employees who may be experiencing mental health illness or issues. A SuperFit Mate is someone with whom employees can talk through issues (both personal and work-related issues) to assist them in moving through some difficult times to get to a better place.

This program complements a range of other practices that VicHealth has to encourage and support positive mental wellbeing.

In late 2016, VicHealth commenced negotiations with the union and employee representatives for a new Enterprise Agreement as the existing Agreement was due to nominally expire in May 2017. Negotiations are well progressed and VicHealth anticipates that in-principle agreement will be reached in early 2017-18.

Workforce data

Table 10: Workforce data

	June 2017						
	All employees		Ongoing			Fixed term & casual	
	Number (HC)	FTE	Full-time (HC)	Part-time (HC)	FTE	Full-time (HC)	FTE
Gender							
Male	19	18.7	16	1	16.8	2	1.9
Female	60	51.5	31	19	43.8	10	7.7
Age							
15-24	3	2.4	1	0	1	2	1.4
25-34	21	19.8	15	3	17	3	2.8
35-44	30	26.4	17	9	22.8	4	3.6
45-54	16	14.3	10	4	12.8	2	1.5
55-64	9	7.3	4	4	7	1	0.3
65+	0	0	0	0	0	0	0
VicHealth EA							
Grade A	4	3.2	1	2	2.6	1	0.6
Grade B	1	0.8	0	0	0	1	0.8
Grade C	16	15.2	10	3	12.4	3	2.8
Grade D	36	31.3	23	9	28.8	4	2.5
Grade E	17	14.7	8	6	11.8	3	2.9
Grade F	0	0	0	0	0	0	0
Total VicHealth EA (A-F Grade)	74	65.2	42	20	55.6	12	9.6
Senior employees							
Executives ⁽¹⁾	5	5	5	0	5	0	0
Total senior employees	5	5	5	0	5	0	0
Total other	0	0	0	0	0	0	0
Total employees	79	70.2	47	20	60.6	12	9.6

Table 10: Workforce data – continued

	June 2016						
	All employees		Ongoing			Fixed term & casual	
	Number (HC)	FTE	Full-time (HC)	Part-time (HC)	FTE	Full-time (HC)	FTE
Gender							
Male	20	19.4	17	2	18.4	1	1
Female	59	53.8	36	11	44.1	12	9.7
Age							
15-24	1	1	0	0	0	1	1
25-34	25	24.8	21	1	21.8	3	3
35-44	33	30.1	21	7	25.9	5	4.2
45-54	14	11.9	7	3	9.4	4	2.5
55-64	6	5.4	4	2	5.4	0	0
65+	0	0	0	0	0	0	0
VicHealth EA							
Grade A	4	3.6	2	1	2.8	1	0.8
Grade B	1	1	0	0	0	1	1
Grade C	15	14	10	4	13	1	1
Grade D	35	31.9	23	4	25.6	8	6.3
Grade E	18	16.7	12	4	15.1	2	1.6
Grade F	0	0	0	0	0	0	0
Total VicHealth EA (A–F Grade)	73	67.2	47	13	56.5	13	10.7
Senior employees							
Executives ⁽ⁱ⁾	6	6	6	0	6	0	0
Total senior employees	6	6	6	0	6	0	0
Total other	0	0	0	0	0	0	0
Total employees	79	73.2	53	13	62.5	13	10.7

Notes:

(i) Executives includes the Accountable Officer (CEO).

All workforce data figures reflect active employees in the last full pay period of June of each year.

'Ongoing employees' means people engaged in an open-ended contract of employment and executives engaged on a standard executive contract who were active in the last full pay period of June.

'FTE' means full-time staff equivalent.

'HC' means headcount.

The headcounts exclude those persons on leave without pay or absent on secondment, external contractors or consultants, temporary staff employed by employment agencies, and a small number of people who are not employees but appointees to a statutory office, as defined in the *Public Administration Act 2004* (e.g. persons appointed to a non-executive Board member role, to an office of Commissioner, or to a judicial office).

Executive Officer data

An executive officer is defined as a person employed as a public service body head or other executive under Part 3, Division 5 of the *Public Administration Act 2004*. All figures reflect employment levels at the last full pay period in June of the current and corresponding previous reporting year..

Table 11: Breakdown of Executive Officers

The following table outlines the number of executives (including the Accountable Officer) employed in the last pay period in June. The table does not include employees in acting executive arrangements.

	June 2017			June 2016		
	Male	Female	Vacancies	Male	Female	Vacancies
CEO	0	1	0	0	1	0
Executives Managers	2	0	1	2	1	0
Executive Leads	0	2	0	0	2	0
Total	2	3	1	2	4	0

Table 12: Reconciliation of executive numbers

		2016–17	2015–16
	Executives with remuneration over \$100,000	4	5
<i>Add</i>	Vacancies (Table 11)	1	0
	Executives employed with total remuneration below \$100,000	0	0
	Accountable Officer (CEO)	1	1
<i>Less</i>	Separations	1	0
Total executive numbers at 30 June (Financial Statements Note 15)		5	6

A summary of executive remuneration is contained in the Financial Statements (Notes 14 and 15).

Section 4: Other disclosures

Consultancies

Table 13: Details of consultancies over \$10,000 (excluding GST)

Consultant	Purpose of consultancy ⁽ⁱ⁾	Total approved project fee (\$'000)	2016–17 actual expenditure (\$'000)	Future expenditure (\$'000) ⁽ⁱⁱ⁾
Corvus Group	Human resource consulting services	26	26	0
Data#3 Limited	Systems consulting services	39	39	0
Davidson Consulting	Human resource consulting services	18	18	0
Deloitte Touche Tohmatsu	Business and human resource consulting services	31	31	0
Fenton Communications	Business consulting services	25	25	0
Glocal Health Consultants	Business consulting services	10	10	0
Jo Fisher Executive Pty Ltd	Recruitment services	21	21	0
Linus Consulting	Business consulting services	20	20	0
LR Associates	Business consulting services	142	142	0
Maddocks Lawyers	Legal services	64	64	0
Pitcher Partners	International audit services	85	85	0
Victorian Government Solicitors Office	Legal services	18	18	0

Consultants disclosed in this table exclude consultants engaged under a VicHealth grant or funding agreement.

Note:

- (i) Consultancy agreements cover the period 1 July 2016 to 30 June 2017.
- (ii) Unless otherwise indicated there is no ongoing contractual commitment to these consultants. These consultants may be engaged beyond June 2017 as required.

Details of consultancies under \$10,000

In 2016–17, there were 18 consultancies where the total fees payable to the consultants were less than \$10,000. The total expenditure incurred during the financial year in relation to these consultancies is \$67,000 (excl. GST).

Information, communication and technology (ICT) expenditure

Table 14: ICT expenditure during 2016–17 (excluding GST)

Business as Usual ICT expenditure Total (\$'000)	Non-Business as Usual ICT expenditure Total = A + B (\$'000)	Non-Business Operational expenditure A (\$'000)	Non-Business as Usual Capital expenditure B (\$'000)
1,109	463	463	0

Advertising expenditure

VicHealth delivered the following campaigns in the last financial year, for which the media expenditure was greater than \$100,000:

Table 15: Advertising expenditure during 2016–17 (excluding GST)

Name of campaign	Campaign summary	Start/end date	Advertising (media) (\$'000)	Creative and campaign development (\$'000)	Research and evaluation expenditure (\$'000)	Print and collateral expenditure (\$'000)	Other campaign expenditure (\$'000)
Change our Game	Print, online and social campaign to increase the profile of women's sport and improve attitudes towards gender equality in sport for women and girls.	Feb 2017 – June 2017	188	209	186	0	100

Compliance with the *Building Act 1993*

VicHealth does not own or control any government buildings and consequently is exempt from notifying its compliance with the building and maintenance provisions of the *Building Act 1993*.

Freedom of Information

The *Freedom of Information Act 1982* allows the public a right of access to documents held by VicHealth. Information is available under the *Freedom of Information Act 1982* by contacting the following person:

Chief Finance and Accounting Officer
Victorian Health Promotion Foundation
15–31 Pelham Street
Carlton VIC 3053
Phone: (03) 9667 1333
Fax: (03) 9667 1375

VicHealth did not receive any FOI applications for the 12 months ending 30 June 2017.

Compliance with the *Protected Disclosure Act 2012*

The *Protected Disclosure Act 2012* (replacing the repealed *Whistleblowers Protection Act 2001*) encourages and assists people in making disclosures of improper conduct by public officers and public bodies. The Act provides protection to people who make disclosures in accordance with the Act and establishes a system for the matters disclosed to be investigated and rectifying action to be taken.

VicHealth has structures in place to take all reasonable steps to protect people who make such disclosures from any detrimental action in reprisal for making the disclosure. It will also afford natural justice to the person who is the subject of the disclosure to the extent it is legally possible.

No disclosures were made within the financial reporting period.

Compliance with DataVic Access Policy

Consistent with the DataVic Access Policy issued by the Victorian Government, the information included in this Annual Report will be available at <http://www.data.vic.gov.au/au> in machine-readable format. VicHealth will progressively release other data in the future as it becomes available.

Victorian Industry Participation Policy

VicHealth abides by the requirements of the Victorian Industry Participation Policy (VIPP) within its procurement practices. VIPP requirements must be applied to tenders of \$3 million or more in metropolitan Victoria and \$1 million or more in rural Victoria.

During the financial reporting period, no tenders or contracts fell within the scope of application of the VIPP.

National Competition Policy

During this reporting period VicHealth did not undertake any activities required reporting against the National Competition Policy.

Office-based environmental impacts

Over the past three years, VicHealth has reduced its electricity consumption by 13% from 151,000 to 133,000 kilo watt hours. VicHealth continues to operate in an environmentally sustainable manner and has recently procured more energy efficient printers and equipment.

Additional information available on request

In compliance with the requirements of the Standing Directions of the Minister for Finance, additional information has been retained by VicHealth and is available to the relevant Ministers, Members of Parliament and the public on request (subject to the Freedom of Information requirements).

For further information please contact:

Chief Finance and Accounting Officer
Victorian Health Promotion Foundation
15–31 Pelham Street
Carlton VIC 3053
Phone: (03) 9667 1333
Fax: (03) 9667 1375

**Attestation of compliance with
Ministerial Standing Direction
3.7.1 – Risk Management Framework
and Processes**

I, Nicole Livingstone, certify that VicHealth has complied with Ministerial Direction 3.7.1 – Risk Management Framework and Processes. The VicHealth Finance, Audit and Risk Committee verifies compliance with this Direction.

A handwritten signature in black ink that reads "Nicole Livingstone". The signature is written in a cursive, flowing style.

Ms Nicole Livingstone OAM
Deputy Chair of the Board

15 August 2017