

Healthy living *Network*



Program Registration Guide

Part of the Quality Framework for the
Healthy Communities Initiative



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Introduction

The following guide aims to provide further information and guidance for completing the Program Registration. It steps through each of the Program Registration criteria and provides further explanation, comments and examples.

Further information on the Quality Framework and its other components can be found in the Healthy Communities Initiative (HCI) Quality Framework report.

Becoming registered

Program developers and service providers should use the Program Registration criteria to ensure their healthy lifestyle program is comprehensively described.

Those who want to have their program/s registered and listed on the Healthy Living Network must submit the following documents as an attachment:

- the self assessment form
- a detailed program outline
- resource material relevant to the program.

The Registration Body, QMS will then:

- formally assess applications using an expert reference group
- communicate with the applicant as required
- list the registered program on the Healthy Living Network (optional).

The applicant has the option to list their registered program on the Healthy Living Network (recommended). The applicant may not want the program listed and use the Program Registration process to assess the program against national criteria and to promote their program as meeting requirements of the HCI Quality Framework.

The Outlines of Registered Programs are only accessible to Healthy Living Network registered users and therefore only available in a controlled environment.

If the applicant delivers the program on the ground, each occurrence of the registered program can be listed on the Healthy Living Network by completing the simple online Activity listing form for each Activity. The Activity will then be searchable by public users for example by location, activity type and target group.

If program developers are involved in delivering the program (or other relevant services) and/or train and license others to deliver the program please refer to the Service Provider Registration process.

Program licensees will need to complete Licensee registration, which is a short questionnaire, and uploading of appropriate supporting evidence.

Further clarification can be obtained by contacting QMS.

Support

The Program Registration process has been designed to promote continuous quality improvement. Applicants who demonstrate that their program meets the Program Registration criteria will obtain registration. Applicants that do not meet the criteria will receive support from QMS to enable them to plan the necessary improvements to be eligible for registration.

QMS will:

- provide support to LGAs, service providers and program developers in understanding the intent, benefits, application and registration of programs and service providers using the Framework and resource documents
- determine approval or non approval of registration for programs and service providers
- register programs and service providers
- maintain up-to-date information and resources on the HCI Portal
- collate information on received applications and uptake of the Framework, trends, challenges, and responsiveness.

Additional support for this initiative will be achieved by the active engagement of LGAs, to:

- implement the Principles for LGAs as core business
- appoint HCI Coordinators to work with providers and program developers
- work with QMS and the Department.

Timeframe for renewal

The life of registration is two years.

In line with the continuous quality improvement approach, registration renewal will be required every two years — or sooner if significant reported amendments to the program occur (including change to program scope, qualifications required and major changes to approach or content).

A note about 'appropriate evidence'

One important criterion for program registration is that 'The program is underpinned by appropriate evidence'. It is recognised that there will be different types of evidence available across programs, and in some cases the evidence is still emerging.

Ideally 'appropriate evidence' about a program would comprise strong findings that the program is effective and reaching the target group. The evidence should demonstrate that the program is achieving measurable and meaningful behavioural changes with the target group and possibly the broader community. However, in practice, it may be that the evidence will need to be drawn from studies that may have similar program outlines or target groups.

Applicants are encouraged to identify specific evidence supporting the effectiveness of their program, and to note where there is a lack of evidence. It will be particularly useful to present the logic underpinning a program in those cases where there are evidence gaps or if the evidence is not strong. Applicants are encouraged to consider the following sources to check available evidence for healthy lifestyle programs:

- The Community Guide (US)
www.thecommunityguide.org/index.html
- Sax Institute (Aust)
www.saxinstitute.org.au/policyresearchexchange/EvidenceCheckReviews.cfm?objid=945
- Physical Activity Nutrition Obesity Research Group (PANORG, Aust)
www.sydney.edu.au/medicine/public-health/panorg/research-themes/intervention/evidence-summaries.php
- Health evidence, Canada
www.health-evidence.ca
- Collaboration of community-based obesity prevention sites (Aust)
www.co-ops.net.au/Pages/Public/2009_Evidence_Summaries.aspx

Guide to completing Program Registration

Scope and target

The healthy lifestyle program documentation must include a description of the scope and target of the program.

Describing the scope and target of a program is one of the most important parts of program definition and planning processes. It sets the broad parameters for what a program will do, and boundaries around what it won't do.

A succinct and well defined program scope is required. The scope and target will include a definition of the:

- intended objectives (the reasons for doing the program and what is hoped to be achieved)
- intended target groups (the people or groups that are the focus of a particular program or service)
- intended environments in which the program is applied. This may include the:
 - physical environment
 - organisational environment (e.g., is it running in conjunction with any other organisation/program?)
 - social environment or culture within which the program interacts or targets
- excluded target groups and environments (details of the people/groups and environments that a program is not suitable for)
- any special equipment required or unique environmental factors which must be in place to implement the program
- program approach (what is done, in what order, how it is done and who does it).

Skills and qualifications required to implement

The healthy lifestyle program documentation should include a description of and justification for the type and level of skill and/or qualifications required in order to deliver the specified program. This may be the requirement to hold certain nationally recognised qualifications such as a First Aid Certificate or Certificate 3 in Fitness, a professional background such as a dietitian, a minimum number of years' experience, or simply the attendance at a specific training course.

Wherever possible and relevant, any specifications for skills and qualifications should be:

- linked to nationally recognised qualification or units of competency such as the Australian Qualifications Framework (AQF)
- determined by taking into account the safety, quality and access requirements of the program
- not higher than can be reasonably justified as relevant for the program — for example, not specifying a university qualification if the program can be appropriately delivered by an instructor with a certificate-level qualification.

Duration

The healthy lifestyle program documentation should describe the amount of time and/or time intervals required for program participation.

In some cases it may be more appropriate to define the duration based on client outcomes if the program is not set around a specific number of attendances, hours or length of time.

Keep in mind adult learning principles when setting duration and give consideration to flexibility and recognition of prior learning.

Goal setting

The healthy lifestyle program documentation should include a description of the way goals are set for the program and how participants are consulted during this process.

Goal setting is the process of identifying what an individual wants. Understanding and setting goals enables:

- clear understanding of the target/s to be reached or outcomes to be achieved
- a sense of direction and purpose for both the program provider and the participants
- identification of the steps required to reach the desired outcome or target
- the inspiration to achieve goals and reach performance expectations.

The program may have overarching goals applicable to all participants or there may be a defined process whereby goals are set by and for individuals. The program outline should include how these goals will be assessed. The goals will ideally be Specific, Measurable, Achievable, Realistic and Time-limited (SMART).

Monitoring outcomes

(see also Program evaluation)

The healthy lifestyle program documentation should provide a description of the:

- types of outcomes to be measured
- frequency of measurement
- process to monitor/measure outcomes, including how this will be documented and communicated as necessary.

Where relevant, monitoring of outcomes should occur at two levels – at the individual and at the group level.

At the individual level a process should be defined to monitor whether the individual is making sufficient progress towards their agreed individual or program goals.

At the group level processes should be established to monitor trends in group attitudes, beliefs, behaviours and intentions to change behaviour before, during and/or after the intervention.

Exercise intensity (if applicable)

If the healthy lifestyle program contains a physical activity component, a description of the exercise intensity of the program is needed in the program documentation. The combination of heart rate, breathing and ability to hold a conversation provides a measure of the level of exercise intensity and an indication of how hard the body will be working during physical activity.

It is important that the program documentation demonstrates an understanding and awareness of the relevance of intensity of exercise in a program in order to:

- help to determine if a person has an appropriate level of existing fitness to participate in a program taking into account medical conditions, medications, etc. This allows potential risks to be identified and strategies to be employed to reduce the risk prior to program participation
- provide guidance to ensure that a person exercises at the right intensity to achieve the desired health benefit
- identify the skills, knowledge and fitness level requirements of the workforce needed to deliver the program.

Risk screening/ assessment requirements

The healthy lifestyle program documentation should include a description of the risk screening and assessment requirements of the program.

Observation, screening and assessment form a continuous process through which an individual's strengths and needs are identified and inform the plan of intervention/action.

Risk screening provides a mechanism to:

- identify an individual's characteristics and needs
- trigger a more in-depth assessment, such as a medical review, if necessary
- identify if the participant is suitable for the program
- identify if the participant requires a modified program.

The program documentation should define a consistent approach to how risk screening and assessment is undertaken (who, how, when) and should include risk screening and assessment templates and flowcharts/decision trees as appropriate.

Risk management

The healthy lifestyle program documentation should include a description of the risk management processes and considerations for the program.

Risk management involves the identification, assessment, and prioritisation of risks (positive or negative) with a coordinated application of strategies and resources to minimise, monitor and control the occurrence or impact of events.

The program's risk management processes should include:

- a description of the way risks are identified, assessed and prioritised (who, how, when)
- a description of the way common risks are managed or mitigated
- a risk register (a register of identified risks and their mitigation strategies)
- a description of the way risks are communicated in the program.

The level of risk for any given program will depend on the scope and target of the program and the environment in which it is delivered. The level of risk identified for the program can then determine what mitigation strategies can be applied. These may include (but not be limited to):

- the level of qualifications required by the person/s delivering the program
- participant selection criteria, screening and exclusion criteria
- modification of the program or program environment.

Where the program involves potentially risky interventions such as cooking, high intensity physical activity, the use of exercise equipment, and swimming pools, the program outline should include standard risk statements and mitigation strategies for providers to incorporate into their risk processes.

Communication and marketing messages

The healthy lifestyle program documentation should outline a description of the communication and marketing messages of a program.

The common messages and related media to be used to communicate about the program should be clearly defined to ensure consistency of message delivery, 'look and feel' and branding of a program throughout marketing and delivery.

Where possible logos, style formats, brochures, forms, etc., should be supplied in template form and available to program providers electronically.

The program outline should define which aspects of the communication strategies can be customised to local settings and include strict guidelines on the use of any branding information.

The program is consistent with national guidelines

All programs must be consistent with national guidelines for adult physical activity, healthy eating, healthy weight and obesity prevention (where available and where applicable).

The healthy lifestyle program documentation must make specific reference to relevant guidelines as appropriate. Any deviation must be noted and justified for consideration by the Registration Body.

The following websites outline some useful resources:

Physical Activity Guidelines

- National guidelines for adult physical activity
www.health.gov.au/internet/main/publishing.nsf/content/health-publth-strateg-phys-act-guidelines
- Physical Activity Recommendations for Older Australians (Recommendations and Discussion Document)
www.health.gov.au/internet/main/publishing.nsf/Content/phd-physical-rec-older

Healthy Eating Guidelines

- NHMRC Dietary Guidelines for Australian Adults
www.nhmrc.gov.au/publications/synopses/dietsyn.htm
- Australian Guide to Healthy Eating: Background Information for Nutrition Educators
www.health.gov.au/internet/main/publishing.nsf/Content/health-pubhlth-publicat-document-fdeduc-cnt.htm
- Australian Guide to Healthy Eating: Background Information for Consumers
www.health.gov.au/internet/main/publishing.nsf/Content/health-pubhlth-publicat-document-fdcons-cnt.htm

Healthy Weight Guidelines

- Healthy Weight for Adults and Older Australians
[www.healthyactive.gov.au/internet/healthyactive/publishing.nsf/Content/healthy_weight06_10.pdf/\\$File/healthy_weight06_10.pdf](http://www.healthyactive.gov.au/internet/healthyactive/publishing.nsf/Content/healthy_weight06_10.pdf/$File/healthy_weight06_10.pdf)

Evidence

The program documentation must contain details of the evidence that underpins a program (development, implementation, evaluation).

Basing a program on contemporary, reliable information (evidence based or best available industry endorsed practice) increases the potential effectiveness of the intervention, and decreases the risk of interventions that are ineffective or even harmful.

When reviewing the evidence consider:

- How well the study/ies was conducted – were the sample size, interventions, and measures appropriate?
- How relevant is the evidence to this target group?
- How relevant is the evidence to this setting?
- How credible are the findings? Are the findings supported by other studies, the literature?

References to evidence should be described in the program documentation.

Stakeholder input into development

The program documentation (or a separate attachment) should provide evidence of stakeholder input into the development of the program.

Consumer and community involvement in program development helps to ensure that programs are acceptable, accessible and meet the needs of the specific target group.

Evidence of stakeholder involvement should include position/discipline of those involved, whether or not these stakeholders were internal or external stakeholders, and how they were involved.

Testing with target group

The program documentation should outline a description of the testing conducted on the program, including outcomes of that testing.

Program testing, including evaluation of pilot projects, is a valuable means of identifying improvements to program effectiveness.

The evidence can be forwarded as an attachment and should include any pilots conducted, their format, design, outcome and changes made to the final program as a result.

Program flexibility

Access to programs can be affected by a range of barriers, including cultural, transport, financial, literacy and language, physical access and disability.

The program outline must include information on how a program can be adapted to manage barriers and/or differences across target populations, geographical and facility settings, resources, and client values, whilst maintaining the program integrity.

Support material

Copies of support material should be provided to QMS.

This refers to any information or materials that will support the person/s delivering the program to implement the program safely and effectively. This may include resources such as:

- facilitator manuals
- templates
- participant manuals, handouts, etc
- guidance on equipment procurement, venue selection, etc.

Program evaluation

A description of the approach to evaluation of the program is to be specified in the program documentation and consider both process and outcome. It should include specific review of the efficacy of risk management processes for the program. The evaluation should include details on:

- what will be measured
- the method, including:
 - who is involved
 - frequency of measurement
 - techniques/processes for data collection
 - processes for analysis and review
- data collection and storage
- data security
- reporting processes, including suggested formats
- any benchmarks or performance indicators that may be relevant.

Review processes and timeframe

Program documentation must include information on how and when a formal program review will be undertaken, and how program evaluation/s and other data contributes to this review.

Glossary

The following terms are used within this document.

Activity	A specific occurrence where a program or a collection of occurrences of the program is implemented. i.e. Small walking group
Agency	The body, organisation, consortium to be appointed by the Department of Health and Ageing to manage the Framework
Clients/consumers	Recipients of programs
Communities	People in a geographical setting
Criteria	A subset of a standard describing an element of how the standard can be achieved
Framework	The Quality Framework for the Healthy Communities Initiative comprising the three components: Service Provider Registration, Program Registration, and Principles for LGAs
Group	People coming together with common needs for a program
Licensee	Person or organisation with an approved license and/or formal recognition to deliver a program or activity developed by a 3rd party. i.e. Walking Group leader
Organisation	Businesses/organisations/sole service providers providing healthy living programs to individuals, groups and communities
Healthy Living Network registration portal	The web based information site to be established to support the Healthy Communities Initiative and the Framework
Program	A formal approach or intervention to assist individuals, groups, communities achieve improvements in their healthy living.
QMS	The Registration Body contracted by DoHA to develop, manage and implement the HCI Quality Framework Registration and the Healthy Living Network registration portal
Service Provider	As for organisation
Staff/workforce	Paid and unpaid workers assisting service providers to implement programs. Workforce includes those who are licensed to deliver a program through a 'train the trainer' or similar activity
Standard	An overarching statement of quality

Program Registration criteria

The below table is used as a checklist for program registration.

Program Registration Criteria	Evidence provided?			Description of evidence provided or justification for why a criterion is not applicable. Indicate where evidence for each criterion can be found in the program outline or attached documents (e.g. page numbers, sections, etc)
	Yes	No	N/A	
<p>The program adequately describes:</p> <ul style="list-style-type: none"> → Scope and target population/group (if required, criteria for inclusion/exclusion) → Skills and qualifications required to implement → Duration → Goal setting → Monitoring outcomes → Exercise intensity (if applicable) → Risk screening/assessment requirements → Risk management → Communication and marketing messages 				
<p>The program is consistent with the national guidelines for adult physical activity, healthy eating, healthy weight and obesity prevention (where available and applicable).</p>				
<p>The program is underpinned by appropriate evidence.</p>				
<p>The program has been developed with appropriate multidisciplinary/specialist/consumer input.</p>				
<p>The program has been tested with its target group and adjusted accordingly.</p>				
<p>The program allows sufficient flexibility to take account of differences in target populations, geographical and facility settings, resources, and clients' values and preferences whilst maintaining program goals.</p>				
<p>There is adequate and appropriate support material for providers and clients for quality implementation.</p>				
<p>An appropriate approach to program evaluation is described.</p>				
<p>A review mechanism/timeframe for the program is specified.</p>				
<p>Risk Assessment for the program is attached.</p>				

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