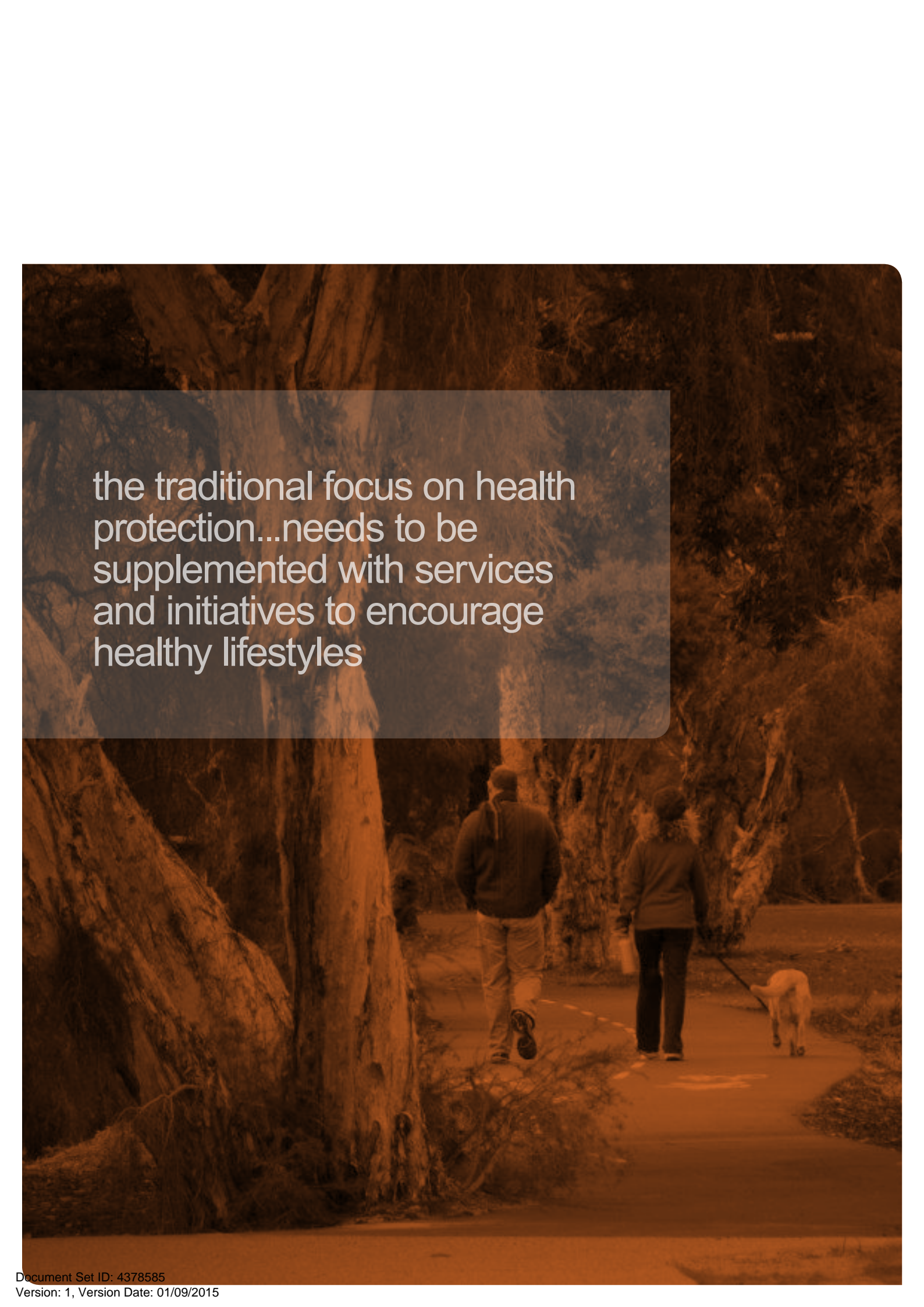


CITY OF COCKBURN
PUBLIC HEALTH PLAN

2013 - 2018



the traditional focus on health protection...needs to be supplemented with services and initiatives to encourage healthy lifestyles

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The principle target of the Public Health Plan will be the 74% of adults who are either obese or overweight





EXECUTIVE SUMMARY

The City of Cockburn is committed to ensuring that the occupants of the city have an acceptable level of health today and into the future. The City will continue to provide traditional Health protection through regulations and compliance. In addition there is a need for more attention to the growing problem of lifestyle diseases especially obesity. In its first 5 Year Public Health Plan (PHP) the City will continue with its excellent programs and initiatives such as Co-Health and Your Move. The key features of the PHP are the services provided by the City's Health Promotion Officer, and the identification of cost effective initiatives aimed at creating and supporting environments that encourage residents and workers to adopt healthy lifestyles. The principle target of the PHP will be the 74% of adults who are either obese or overweight. The PHP will be reviewed annually with a major review in 2018.

SUMMARY

What is a Public Health Plan?

A Public Health Plan (PHP) is sometimes called a Health and Wellbeing Plan and it outlines actions necessary to ensure that the occupants of the city have an acceptable level of health today and into the future. This should help to reduce the predicted increase in the cost of providing health services for the aging population and minimise the number of people whose lifestyle is compromised by the symptoms of preventable diseases.

Why does the City need a Public Health Plan?

All Councils have a role to play in Public Health. The State Government is proposing to introduce a new Act to replace the existing Health Act 1911. Using the State Public Health Plan as a guide, Local Governments will be required to develop a Public Health Plan to be reviewed annually and updated every three years. The first objective of the draft Public Health Act is “to promote public health and wellbeing and to prevent disease, injury, disability and premature death”. This new focus upon promoting health and wellbeing recognises that the traditional focus on health protection through regulations and compliance needs to be supplemented with services and initiatives to encourage healthy lifestyles. Local Government’s role in preventive health is being recognised as both essential and underutilized but the funding of an expanded role needs significant attention.

The major outcomes of the City’s Public Health Plan

The outcomes of the City’s PHP will depend upon the extent of changes to Federal and State legislation and the extent of additional funding for infrastructure and services. The minimum outcome is likely to involve a continuation of Public Health Compliance Services plus a specialist Health Promotion Officer and \$25,000 annually for programs. The expanded role may see new and improved infrastructure to provide an environment that promotes healthy lifestyles. Managers of all service areas at the City will be encouraged to consider how they integrate sustainable, preventive health measures into all Corporate Strategic and Operational plans. Particular focus will be given to plans relating to recreational facilities, parks, public open space, footpaths, cycle paths, Planning/Development, and Community/Human Services.

It is important to acknowledge a number of unusual circumstances that exist at the moment. These are the impending Local Government Reform, the proposed new Health Act, the City’s Healthy Communities Co-Health program, the National Partnership Agreement on Preventive Health (NPAPH), the City’s expanded Travelsmart program (Your Move), and the opening of the new GP Super Clinic in 2013/14. Therefore the focus will be directed towards building, implementing and improving existing strategies and a number of ongoing special projects. The City is in a fortunate position to be one of the industry leaders in this area within Local Government in WA. This is reflected by the City’s proactive role in the Co-Health program, TravelSmart/”Your Move” and other activities associated with Smoking, Alcohol management and increased focus on Physical Activity and Nutrition. Therefore we can move forward maintaining and expanding existing preventive health related programs and services.

It is extremely likely that future versions of the PHP will incorporate significant changes to the City's activities aimed at creating and supporting environments that encourage residents and workers to adopt healthy lifestyles. While the City's current focus is on new and improved infrastructure for sport, recreation, walking and cycling, and some policies relating to smoking, alcohol and nutrition, there is a need for much more especially in light of evidence showing that sedentary living, poor nutrition and alcohol/drug use contributes to obesity and poor mental health in the community.

Financial Implications

The financial implications of the PHP do not involve significant additional expenditure. The cost of continuing to provide traditional focus on health protection through regulations and compliance is about \$1 million per year and will remain largely unchanged subject to the projected need for additional Environmental Health Officers as the City's population grows. The Health Promotion Officer position represents an additional cost of about \$100,000 per year and reflects the need for the City to focus upon promoting health and wellbeing services and initiatives to encourage healthy lifestyles.

The PHP also includes a number of initiatives involving investigations of the value of providing infrastructure to make healthy lifestyles the default option for people in the City of Cockburn. These initiatives relating to infrastructure (facilities in parks, cycle paths etc.) could be extremely expensive therefore they must be carefully researched and evaluated to ensure that they are cost effective and evidence based. The City will look to trial some of these innovative initiatives wherever possible with external funding.



The City is in a fortunate position to be one of the industry leaders in this area within Local Government in WA

INTRODUCTION

The Public Health Plan report is split into five parts.

Part 1

Covers the big picture and the state of public health from a National and State perspective.

Part 2

Describes the current and potential role that Local Government might play.

Part 3

Describes the Public Health profile of the City of Cockburn.

Part 4

Outlines the unusual circumstances and existing/ongoing programs.

Part 5

Outlines the key actions to be implemented and lists the actions in a table which identifies the responsible officer, priority and likely costs.

PART 1 THE BIG PICTURE



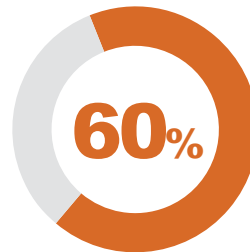
Over a third of Australia's adults are physically inactive.



Australia is now one of the most overweight nations in the OECD

\$58.2 BILLION

In 2008 obesity was estimated to cost \$58.2 billion to the economy due to diabetes, cardiovascular disease, various cancers and osteoarthritis.



More than 60% of adults and one in four children being overweight or obese

Many of the Public Health statistics in Australia are alarming and justify a broad based response. Over a third of Australia's adults are physically inactive. Australia is now one of the most overweight nations in the OECD, with more than 60% of adults and one in four children being overweight or obese. In 2008 obesity was estimated to cost \$58.2 billion to the economy due to diabetes, cardiovascular disease, various cancers and osteoarthritis. The growing prevalence of alcohol and its impacts on young people are of concern to the community as is the increasing incidence of diabetes.

The Australian Institute of Health and Welfare (2010) identifies that on a per-person basis, the amount of money spent on health when adjusted for inflation has increased by 45% in the last decade. This is now in excess of 10% of all of Australia's expenditure, but with 80% of this dedicated to reactive expenditure and only 20% on proactive expenditure.

Governments around the developing world have recognised the looming cost of lifestyle diseases associated with inactivity and poor nutrition. There appears to be little doubt that the current efforts and investment to reverse the

obesity and diabetes statistics are inadequate and that combined with the aging population this represents a considerable cost to the community in the coming decades. There is a critical need for a radical change to the urban setting so that our cities are designed to make healthy behaviours the default option.

An increased focus on programs trying to convince residents to find the willpower to ignore the marketing of food, alcohol and labour saving devices that help make us unhealthy, will have a very limited impact on the key statistics unless the relevant legislation is improved first.

This is a national problem that should be tackled uniformly with all three tiers of Government coordinated to achieve commonly agreed targets. Targets (Attachment 1) have been established through the National Partnership Agreement on Preventive Health (NPAPH) which is a ten year project with funding of \$872.1 million until 2018. This initiative and the targets have been recognised by State Government in WA according to the WA Health Promotion Strategic Framework 2012-2016. There is a need for Local Councils to also adopt these targets.



PART 2

CURRENT AND POTENTIAL ROLE OF LOCAL GOVERNMENT IN PUBLIC HEALTH

Strategic Community Plan

The City of Cockburn's Public Health Plan supports the City's recently adopted Strategic Community Plan (2012-2022):

Promotion of active and healthy communities

- Provide and promote activities, services and recreational facilities that encourage our community towards an active and healthy lifestyle.

Facilitate and promote healthy transport opportunities

- Develop and implement walkway, bike and trails master plans
- Develop and promote the City's TravelSmart initiative

Infrastructure that supports the uptake of public transport and pedestrian movement

- Work with stakeholders to provide and support end of journey facilities

Identification and minimisation of impacts to human health risk

- Implement human health risk management strategies

Health Regulation and Health Protection Services

The Health Act 1911 delegates responsibility to Local Government in a number of areas including sewage and drainage of land, public buildings, nuisances and offensive trades, water, infectious diseases, and the administration of health local laws. Traditionally, Local Government has played a regulatory role in the protection of public health as identified by the Health Act 1911. These services currently provided by the City's Health Services Team have been reviewed by the Manager of Environmental Health Services (Attachment 2). In conclusion we are able to predict areas that are likely to increase in priority and justify the allocation of additional resources, but there are no areas where levels of service can be safely reduced. This includes the City's actions associated with the Health Effects of Climate Change. This means that the new focus upon lifestyle diseases cannot be delivered through savings from a reduction in traditional Health Protection Services.

Existing Plans, Programs and Services at Cockburn

There are numerous initiatives implemented by other plans and strategies within the various departments at the City focused on influencing health through economic, social, and environmental development. More information about the City of Cockburn's Corporate Strategic plans can be found on the City's website.

Much of the City's health related statistics have been acknowledged and targeted in existing programs and services. The City has already responded to issues such as obesity, alcohol, smoking, mental illness, drugs, and indigenous health. The City has developed programs and services aimed at the general population plus early childhood development, childhood obesity, and focussed upon low socio economic groups.

These plans, programs and services include the following:-

- Recreation Services - Kids Sport
- Sport and Recreation Plan
- Proposed new Cockburn Central Sports and Recreation Facility
- Travelsmart Program including Travelsmart Schools
- Co-Health Program
- Liquor Licence Policy and Position Statement
- Smoking Position Statement
- Cycle Path Plan
- Trails Master Plan
- Be- Active Cockburn including Heart Foundation Walking Groups
- Uninhabitable Premises Position Statement (dealing empathetically with hoarders and people living in squalor)
- Children's Services Strategic Plan
- Youth Services Strategic Plan
- Reconciliation action Plan
- Age Friendly Strategic Plan
- Crime Prevention Plan including the Co-Safe safety and security patrol service
- Sustainability Action Plan
- Grant and Fee Funded Human Services Strategic Plan

However there is a need for more action in order to achieve reductions in chronic disease statistics.

The Role of Local Government in Public Health and Well Being

A review of the numerous plans developed by the WA State Government relating to lifestyle diseases reveals that many of the actions can only be delivered by Local Government. Clearly Local Governments have a role to play in chronic disease prevention but this does not include responsibility for acute health and medical services typically provided by hospitals and GP's. It is predicted that once the new Public Health Act is passed, the State Government will develop the State Public Health Plan which will guide Local Governments to determine the extent of their role in Public Health. Needless to say there is limited capacity for Councils to extend their role with current levels of funding.

The health statistics in Cockburn show some areas of concern and it is appropriate for the City to take steps to address these areas. However the effectiveness of these steps will be limited by external factors such as marketing and availability of alcohol and unhealthy foods. There is a need for legislative change controlling the availability and marketing of unhealthy foods, sugary drinks and alcohol. There is a need for action to be taken in these areas by State and Commonwealth Governments to compliment any strategies adopted by Cockburn or any other Council in Australia. In addition to the statistics of concern it would be fair to say that many of the public health statistics in Australia are alarming and justify a broad based response.

There is a critical need for a coordinated "whole of government" approach to preventive health and the promotion of healthy lifestyles across Australia with Local Government's role being expanded, exploited and appreciated. It is likely that Local Government's role will be expanded but only subject to complimentary changes to legislation and the provision of significant additional funding from Commonwealth and State Governments for infrastructure and

services. There is a need for significant additional funding to create destinations for all residents to walk/cycle to and for safe accessible paths and public transport services. There is a need for consistent and strong healthy lifestyle messages and clear information to be provided rather than the current proliferation of contrasting and confusing information across all media.

As recognized by Commonwealth and State Governments in the NPAPH there are three settings for actions to be targeted on either infrastructure, promotion and/or support services. These settings are schools/childcare and youth centres, workplaces, and the community. Local Government will play a critical role in the direct provision and maintenance of infrastructure and in services to their communities. In addition Local Government could also play a significant supportive role in the school/education and workplaces settings. None of these actions/initiatives are currently effectively coordinated.

In response to requests from a number of stakeholders including the City, West Australian Local Government Association (WALGA) have formed a new Healthy Communities Working Group to explore opportunities for councils to expand their roles in preventive health with a unified consistent approach. The City is represented on this new working group by the Managers of Health Services and Strategic Planning.

An important element of new healthy lifestyle initiatives is to ensure that they are cost effective and evidence based. There is a need for some new initiatives to be researched and evaluated. The City is typical of many similar urban areas with suburbs representative of several development eras. We should be prepared to work with other stakeholders to investigate the effectiveness of innovative new ideas that if successful may be repeated in other suburbs.



There is a critical need for a coordinated “whole of government” approach to preventive health and the promotion of healthy lifestyles across Australia with Local Government’s role being expanded, exploited and appreciated.

PART 3

THE PUBLIC HEALTH PROFILE OF THE CITY OF COCKBURN

In determining the City of Cockburn's community profile, it is important to consider the population profile of the City, the health status, and lifestyle behaviours of the local community. Demographic data was largely taken from the Australian Bureau of Statistics (ABS) and the health status of the community was derived from data provided by the Department of Health WA (DOH).

Population Profile

Cockburn currently has a total population of 94, 377 (2012) according to forecasts based on 2011 ABS Census data and is expected to reach 116, 143 by the year 2021, an increase of 21, 766 (23%) from the current population. This represents an average annual growth rate of 2.6%. The largest population growth will be seen in the suburbs of Hammond Park, Wattleup, Henderson, Coogee, North Coogee, Aubin Grove and Banjup.

The population density of area is currently 565 people per square kilometre compared with the Perth metro area which contains about 319 persons per square kilometre.

In regards to family structure, the City of Cockburn has a similar proportion of couple families with children (48.3%) and one parent families (14.9%) when compared to the State, at (44.9%) and (14.9%) respectively. There are, however, a higher proportion of one parent families in Coolbellup (24.1%) and Hamilton Hill (23.2%) when compared with overall Cockburn (14.9%) and State (14.5%) proportions.

The ABS Socioeconomic Index for Area (SEIFA) is used to rank suburbs according to the population's socioeconomic advantage, disadvantage, economic resources, and education and occupation status. SEIFA scores show how disadvantaged an area is compared with other areas in Australia. The latest SEIFA scores obtained from the 2011 Census shows

that the suburbs of Coolbellup, Hamilton Hill and Spearwood have the lowest SEIFA scores in the City of Cockburn. Coolbellup is placed in the lowest 20 per cent both nationally and when compared with the state. Hamilton Hill and Spearwood's rankings place them in the lowest 30-40 per cent when compared to the state and nationally. In contrast there are five suburbs in Cockburn ranking in the highest 10 per cent, including North Lake, which borders Coolbellup, and Aubin Grove, Hammond Park, Jandakot and Leeming.

There is an abundance of research linking SEIFA indexes to poorer health, for example low levels of education can affect the ability to obtain information on health services or the ability to make healthy choices.

Aboriginal and Torres Strait Island people account for 1.8% of the population, which is lower than the State's 3.1% however in line with Perth Metropolitan statistics according to the 2011 census. There are however some suburbs where there are higher proportions of Aboriginal and Torres Strait Island people including South lake (4.2%) and Coolbellup (4.1%).

Chronic disease contributes to two-thirds of the health gap between Indigenous and non-Indigenous Australians. The prevalence of diabetes is a particular cause for concern, as in 2004-5, Indigenous people were 3.4 times more likely than non-Indigenous people to report having some form of diabetes and Indigenous people died from diabetes at almost seven times the rate of other Australians. It also is well documented that Aboriginal and Torres Strait Island people have poorer self-assessed health than non-Indigenous Australians.

In working towards closing the gaps in health, the healthy lifestyle programs included in this plan are focussed within suburbs experiencing higher levels of need and poorer health status, including Aboriginal and Torres Strait Island



PART 3

THE PUBLIC HEALTH PROFILE OF THE CITY OF COCKBURN (CONT)

people. However as 74% of adults in Cockburn are either overweight or obese there is equally a need to focus attention in all suburbs and in the general population.

Health Indicators for Cockburn

Health indicators of chronic disease in the City of Cockburn have been provided by the DOH through the Health and Wellbeing Surveillance System (HWSS) on four occasions since 2004. The most up to date report provided for the City by DoH (South Metropolitan Public Health Unit) is the City of Cockburn Health and Wellbeing Profile dated October 2012.

This report highlights the issues of concern common to all LGA's and specifically for the City. This enables the City to consider applying additional resources to services and infrastructure to target these issues. The key health priorities in Cockburn are the significant number of adults (74%) who are overweight or obese, and the high number of residents with high levels of psychological distress or lack of control over life in general. The number of male youth suicides is higher than the state average and is also a cause of concern.

Like other LGA's the incidence of preventable diseases including heart disease is high. There are some unusual causes of hospitalisation including diseases of the oesophagus, stomach and duodenum but as the data is presented for the whole of the City it is impossible to consider any responsive action. This data will be monitored over time.

The strategies outlined in this plan have been developed to address the unhealthy lifestyle behaviours chosen by many Cockburn residents, with the ultimate aim to prevent chronic diseases associated with such preventable risk factors.

Although suburb by suburb data for health indicators is lacking, the large inter-suburb variations seen in Cockburn's population data,

SEIFA scores and ethnicity highlights the need to provide health and wellbeing programs to specific population groups within specific demographical areas and further supports the services that are currently offered through the City's Co-Health Healthy Communities Project.

In terms of Public Health priority it is relevant to focus special attention upon children because it is highly likely that lifestyle diseases are associated with learned behaviours at a young age. The Australian Early Development Index (AEDI) survey, a population measure of young children's development was first implemented nationwide in 2009. The survey is completed by teachers and focuses on five domains including physical health and wellbeing, social competence, emotional maturity, language and cognitive skills (school-based) and communication skills and general knowledge.

The children surveyed were of an average age of 5 years and 5 months and the survey found that 2.9% of children living in Cockburn identified as Aboriginal or Torres Strait Islander compared to 6.5% in the state. The AEDI survey showed that 18.7% of children living in the City of Cockburn were vulnerable on one or more domain and 10% were vulnerable on two or more domains.

PART 4

THE UNUSUAL CIRCUMSTANCES AND EXISTING/ONGOING PROGRAMS LOCAL GOVERNMENT REFORM

It is important to acknowledge a number of unusual circumstances that exist at the moment. These are the impending Local Government Reform, the proposed new Health Act, the National Partnership Agreement on Preventive Health (NPAPH), the City's Healthy Communities Co-Health program, the City's expanded Travelsmart program, and the opening of the new GP Super Clinic in 2013/14.

Local Government Reform

Any proposal for a Council to initiate major new programs and or partnerships with other stakeholders would likely benefit from waiting until the outcomes of the Local Government Reform have been identified.

New Health Act

The proposed new Act will replace the Health Act 1911 and using the State Public Health Plan as a guide, Local Governments will be required to develop a Public Health Plan to be reviewed annually and updated every three years. The first objective of the draft Public Health Act is "to promote public health and wellbeing and to prevent disease, injury, disability and premature death". This new focus upon promoting health and wellbeing recognises that the traditional focus on health protection through regulations and compliance needs to be supplemented with services and initiatives to encourage healthy lifestyles. Local Government's role in preventive health is being recognised as both essential and underutilized but the funding of an expanded role needs significant attention.

National Partnership Agreement on Preventive Health (NPAPH)

The Commonwealth and State governments have recognised the need to do more to reverse the poor health statistics relating to obesity, diabetes, tobacco and alcohol. This is reflected in the National Partnership Agreement

on Preventive Health (NPAPH) which is a ten year project with funding of \$872.1 million until 2018. The NPAPH sets performance targets for each State for rates of physical activity, unhealthy weight, consumption of fruit and vegetables, and smoking. It is assumed that the targets are achievable and therefore with this plan, the City of Cockburn will work towards the performance benchmarks outlined in the NPAPH. These performance benchmarks can be found in Attachment 1. The WA Health Promotion Strategic Framework (HPSF) is the principle guiding document for Healthy Lifestyles in WA and was released in January 2013. The City's PHP is aligned with the HPSF which has adopted the same targets and performance benchmarks as the NPAPH.

The strategies included within this plan are largely supported by the Healthy Communities Initiative (HCI), part of the NPAPH. The City received funding under Phase 2 of the HCI.

The NPAPH also includes a Healthy Children's Initiative and a Healthy Workers Initiative. The Healthy Children's Initiative focuses upon reaching children through settings such as childcare centres and schools, as well as through initiatives directly targeting parents. The Healthy Workers Initiative, called Healthier Workplace WA, will support WA workplaces to implement healthy lifestyle initiatives. Both initiatives are being delivered by a range of service providers on behalf of the Department of Health, and it is likely that there will be opportunities for the City to partner with service providers in both the Children and Workforce settings.

Importantly there has been no indication that the NPAPH will continue beyond 2018 and this is likely dependent upon the outcome of the 2013 Federal election.

PART 4

THE UNUSUAL CIRCUMSTANCES AND EXISTING/ONGOING PROGRAMS LOCAL GOVERNMENT REFORM (CONT)



Co-Health (Healthy Communities Initiative)

The Healthy Communities funding has enabled the City to create the Co-Health Healthy Lifestyles Project which is funded until April 2014. The Co-Health project includes physical activity and healthy eating programs and health promotion and health screening at various events within the City of Cockburn. All Co-Health programs are limited to adults in the City of Cockburn who are not in the full time workforce, at risk of weight-related chronic conditions, single parents, and Aboriginal and Torres Strait Island people living in the City of Cockburn, Fremantle, East Fremantle and Melville areas. Co-Health also strives to increase the capacity of the Cockburn community to deliver innovative healthy lifestyle programs through providing education and training opportunities. Co-Health partners with seven government and non-government organisations, aiding the success of the program. Partners in the Co-Health program include South Metropolitan Public Health Unit (SMPHU), Fremantle Medicare Local, St John of God Murdoch Hospital Ferns House, Burdiya Aboriginal Corporation, Women's Health Service, South Lake Ottey Family and Neighbourhood Centre and Solid Women Aboriginal Corporation.

The City will work with SMPHU which is responsible for implementing a range of chronic disease prevention initiatives. The SMPHU works in partnership to deliver initiatives that benefit those groups at higher risk of poorer health outcomes, with a specific focus on the Aboriginal community.

Partnerships – Schools and Workplaces

As outlined in the City of Cockburn's Strategic Community Plan 2012-2022, the City has well-developed partnerships with strategic stakeholders. The City recognises the importance of partnerships in ensuring that the best services practical are made available to the

residents of Cockburn. The implementation of this plan will involve partnerships with service providers, including other government and non-government agencies and local organisations. The City will endeavour to work with the Healthy Workplace WA service, towards achieving the common aims of the NPAPH Healthy Workers initiative that is to address the rising prevalence of lifestyle related chronic diseases for people in the workplace. The City will also endeavour to work with the Department of Health and its service providers and the Department of Education to deliver healthy lifestyle programs in schools and other related settings.

Partnerships - Travelsmart/Activesmart – “Your Move”.

The City will work with the WA Department of Transport and the WA Department of Sport and Recreation to deliver the Active Smart/TravelSmart program in 2013/14. This major new initiative called “Your Move” aims to increase the number of people using active transport and therefore the number of people gaining health benefits from increased physical activity. The program commencing early in 2013 involves an investment of about \$4 million from the State Government and runs for about 2 years. It is an intensive and personalised program that focuses on providing simple information, incentives and ongoing support and motivation to encourage residents to be more active and travel less by car. It is largely delivered by the State Government in partnership with the City and involves direct contact with about 20,000 households within Cockburn.

Partnerships - The new GP Super Clinic in Cockburn Central

The role of GP's in preventive health initiatives is important and we hope to develop strong links with the new GP super clinic under construction at Cockburn Central.

PART 5.1 THE KEY ACTIONS EXPLAINED

Guiding document from WA Department of Health

This plan has been guided by the 'Pathway to a Healthy Community' document developed by South Metropolitan Public Health Unit with input from staff and elected members from the City. The prompting questions from section five of the Pathways document has served as a key tool used in consultation with the relevant departments/experts within the City of Cockburn. By asking the right questions, the many ways in which the City is currently responsive to the needs of the community were identified, and the gaps in service provision for the community were highlighted. A table which presents a summary of the findings is included as Attachment 3.

The information obtained from the City's experts indicates that as far as local governments go in Western Australia, the City of Cockburn is proactive in preventive health. The City is already providing a number of preventive health services for specific populations and disadvantaged groups living in the local community and surrounding local government areas. The health indicators presented in this plan maintain the need for these services and support the notion to provide further health promotion initiatives especially in the area of chronic disease management.

Summary of Key Actions

While it is acknowledged that there are identified gaps in other areas, there will be opportunities to re assess the priority areas and actions through annual reviews and upon a major review of this plan in 2018.

The actions in this PHP are listed in the table in part five and are categorised as follows:-

1. General Health Promotion opportunities
2. Key preventive health priority areas
 - 2.1 Alcohol
 - 2.2 Smoking
 - 2.3 Physical activity and nutrition

In terms of Health Regulation and Health Protection Services there will be little change as these services will remain.

In terms of healthy lifestyles, it is proposed that the City will continue to focus upon existing programs for the life of this plan. Co-Health will be completed in mid 2014 when the Commonwealth funding ceases and following evaluation some of the most effective programs will be retained. The new "Your Move" behaviour-change project will combine Travelsmart and Sport and Recreation programs for about 20,000 households. A new Health Promotion Officer position has been created to coordinate most of the actions.

The City to lobby the State and Commonwealth Governments to improve the laws controlling the availability and marketing of unhealthy foods, sugary drinks and alcohol. The City to audit all its suburbs and develop plans to create destinations for all residents to walk/cycle to and for safe accessible paths and public transport. The City's parks will be audited and facilities to attract all age groups identified. The City will review the success and failures of planning legislation to determine the potential for positive improvements to make healthy behaviours the default option for residents and workers. The City will focus on nutrition because 74% of our adults are currently overweight or obese.

There will be a continued focus upon the more vulnerable members of the community. The City will target its lower socio economic suburbs particularly focusing on mental health and suicide in young people. The City will play a more active role in liquor licencing to reduce harmful drinking. The City will look to partner with stakeholders in workplaces and schools to enhance their Healthy Lifestyle services. The City will maintain existing programs to "make smoking history". The City will actively participate in WALGA's Healthy Communities Working Group and seek to partner with a range of agencies and stakeholders to attain the targets set out in the NPAPH.

The table of actions nominates a predicted cost of each action. Where the cost is none or minimal then it will be absorbed into existing services or included in the \$25,000 allocated to Health Promotion. Where the action involves additional costs or is "to be costed", these items will be subject to the normal Council budgetary approvals process.

PART 5.2

LIST THE KEY ACTIONS

References

1. World Health Organisation. *2011 World conference on social determinants of health: meeting report, 19-21 October 2011*. Rio de Janeiro, Brazil, World Health Organization.
2. Department of Health. 2008. *Public Health Bill: Draft bill for public comment*. Perth: Government of Western Australia.
3. Department of Health. 2010. *Pathway to a healthy community: a guide for councillors*. Perth: South Metropolitan Area Health Service
4. Forecast .id. City of Cockburn population and household forecasts
5. Australian Bureau of Statistics. 2006. *Socio-Economic Indexes for Areas (SEIFA 2006)*. Canberra: ABS.
6. Australian Bureau of Statistics. 2011. *Census QuickStats: Cockburn (C)*. Canberra: ABS, http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/LGA51820?opendocument&navpos=220 (accessed date 15/08/2012)
7. Australian Bureau of Statistics. 2011. *Census QuickStats: South Lake*. Canberra: ABS http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/SSC50723?opendocument&navpos=220 (accessed date 15/08/2012)
8. Australian Bureau of Statistics. 2011 *Census QuickStats: Coolbellup*. Canberra: ABS. http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/SSC50173?opendocument&navpos=220 (accessed date 15/08/2012)
9. Australian Bureau of Statistics. 2011 *Census QuickStats: Hamilton Hill*. Canberra: ABS. http://www.censusdata.abs.gov.au/census_services/getproduct/census/2011/quickstat/SSC50317?opendocument&navpos=220 (accessed date 15/08/2012)
10. Department of Health. 2004. *Health Survey of Cockburn, Kwinana and Rockingham, September 2004*, Perth:DOH
11. Department of Health. 2009. *Health Profile for Adults, Cockburn (C) LGA, 2006-09. Epidemiology Branch, Public Health Intelligence Directorate*, Perth: Public Health Division (WA DoH)
12. Department of Health. 2012. *Summary of population characteristics and the health and wellbeing of residents of the Cockburn (C) LGA*. Epidemiology Branch (WA DoH) in collaboration with the Cooperative Research Centre for Spatial Information (CRC-SI).
13. Australian Bureau of Statistics. 2011. *Australian Early Development Index. AEDI Community Profile, Cockburn Western Australia* : ABS
14. Australian Bureau of Statistics. 2010. *Australian Social Trends, 4102.0*. Canberra: ABS.
15. Australian Bureau of Statistics.2010. *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples* Canberra: ABS

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16. National Partnership on Preventive health, National Implementation Plan 2009-2015
 17. City of Cockburn Corporate Strategic Plan
 18. The Ottawa Charter for Health Promotion, World Health Organisation. <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/> (accessed date 05/09/2012)
 19. Thomson N, MacRae A, Brankovich J, Burns J, Catto M, Gray C, Levitan L, Maling C, Potter C, Ride K, Stumpers S, Urquhart B. *Overview of Australian Indigenous health status, 2011*. Retrieved [access date] from http://www.healthinfonet.ecu.edu.au/overview_2012.pdf
 20. Australian Health Ministers' Advisory Council, 2011, *Aboriginal and Torres Strait Islander Health Performance Framework Report 2010*, AHMAC, Canberra.

PART 5.1 LIST OF ACTIONS

5.1 GENERAL HEALTH PROMOTION OPPORTUNITIES

The actions that relate to Healthy Lifestyles without a specific focus upon a Priority Area or Issue are listed below.

Objectives	Actions	Responsibility	Timeframe & Cost	Progress
1. Increase the capacity of the City to develop and deliver Healthy Lifestyle initiatives and to obtain external funding	1.1 Employ a qualified Health Promotion Officer	Manager Health Services	2013 \$93,000	Included in budget for 2013/14
2. Increase the role played by Local Government in Perth towards Preventative Health initiatives	2.1 Play an active role in the WALGA Healthy Communities Working Group	Manager Health Services Manager Strategic Planning	2013-ongoing No cost	
3. Improve legislation to make healthy lifestyles easier	3.1 Lobby State and Commonwealth Governments to change the laws controlling the availability, advertising, marketing and taxing of unhealthy foods, sugary drinks and alcohol	Manager Health Services	2013-ongoing No cost	
4. Increase the Cockburn community's awareness of the importance and benefits of adopting and maintaining a healthy lifestyle	4.1 New GP Superclinic - Develop and implement healthy lifestyle programs linked to GP's surgeries and the new GP Superclinic 4.2 Fremantle Football Club - Develop and promote healthy lifestyle messages linked to the Fremantle Dockers	Health Promotion Officer Health Promotion Officer	2013-ongoing No cost	

	<p>4.3 Healthy Workers initiative – Liaise with the DoH and Heart Foundation to develop projects funded by the NPAPH linked to City staff and other workplaces in Cockburn</p>	<p>Health Promotion Officer</p>	<p>2013-2015 No cost</p>	
	<p>4.4 Healthy Children Initiative – Liaise with DoH and other service providers to develop projects funded by NPAPH linked to schools in Cockburn</p>	<p>Health Promotion Officer</p>	<p>2013-2015 No cost</p>	
	<p>4.5 New Mens Shed - Develop and implement healthy lifestyle programs linked to the new Mens Shed</p>	<p>Health Promotion Officer</p>	<p>2013-2015 Minor cost</p>	
<p>5. Ensure seniors are safe during heatwaves</p>	<p>5.1 Develop a Heatwave Response Plan to ensure the elderly are safe during heatwaves</p>	<p>Health Promotion Officer, Seniors Centre Manager</p>	<p>2013-2014 No cost</p>	
<p>6. Improved services for children and parents</p>	<p>6.1 Investigate provision of additional Child Health Centres</p>	<p>Manager Human Services</p>	<p>2014-2015 No cost</p>	
<p>7. Improved dental health services for aboriginal residents</p>	<p>7.1 Investigate provision of culturally appropriate dental services for aboriginal residents</p>	<p>Manager Human Services</p>	<p>2014-2015 No cost</p>	
<p>8. Improved services aimed at Culturally and Linguistically Diverse (CALD) residents</p>	<p>8.1 Develop a Multi-Cultural Strategy and investigate the employment of a Multicultural Engagement Officer</p>	<p>Manager Human Services</p>	<p>2014-2015 Approx \$60,000</p>	<p>Level 7 officer at 3 days per week included in the workforce plan</p>

PART 5.1
LIST OF ACTIONS 5.1 GENERAL HEALTH PROMOTION OPPORTUNITIES CONT.

<p>9. Improved services aimed at minimising mental health issues in the community</p>	<p>9.1 The City of Cockburn to provide free access to Council managed Community Centres by not for profit organisations providing preventative health services and City of Cockburn Services</p>	<p>Manager Community Services</p>	<p>2014-2015 \$7000 for hall subsidy</p>	
	<p>9.2 City of Cockburn services to provide mental health awareness workshops or group programs which will be at no cost to the community</p>	<p>Manager Human Services</p>	<p>2014-2015 To be costed</p>	
	<p>9.3 The City of Cockburn to continue to provide and subsidise human services programs that reduce social isolation and support people who are vulnerable or “at risk” in our community</p>	<p>Manager Human Services</p>	<p>2013-2014 No cost</p>	
	<p>9.4 The City of Cockburn encourage and provide incentives for not for profit organisations who provide support services for people with mental health issues to locate their client services within the City of Cockburn boundaries to improve accessibility for Cockburn residents</p>	<p>Manager Human Services</p>	<p>2013-2014 No cost</p>	
	<p>9.5 The City of Cockburn to raise staff awareness regarding who to contact if they or someone they know is experiencing mental health issues</p>	<p>Manager Human Services</p>	<p>2013-2014 No cost</p>	

<p>10. Improve access to sport and recreation services and facilities for people with disabilities, CALD and/or indigenous residents</p>	<p>9.6 The City of Cockburn to work with key stakeholders to identify risk factors associated with youth suicide and assist in development of interventions and services.</p>	<p>Manager Human Services</p>	<p>2014-2015 Minor cost</p>	
	<p>10.1 Investigate implementation of a program similar to City of Meville Activelink. Available to residents who have a disability, are Indigenous or from CALD backgrounds who are experiencing barriers to participation in sport or recreational activities.</p>	<p>Manager Human Services, Disability Access Coordinator</p>	<p>2014-2015 \$40,000</p>	<p>Included in the Children's Plan</p>

PART 5.2
LIST OF ACTIONS 5.2 KEY PREVENTATIVE HEALTH PRIORITY AREAS

PRIORITY AREA - ALCOHOL

Alcohol is a part of the Australian culture and way of life, however our challenge is to balance alcohol's place in the culture with the negative health impacts associated with drinking too much and drinking more than is healthy over a longer period. The harmful use of alcohol, defined as "a pattern of alcohol use that is causing damage to health", is a serious health burden worldwide (WHO). Four per cent of all deaths worldwide are attributable to alcohol (WHO). The short term health risks caused by drinking harmful levels of alcohol, including injury or premature death caused by accidents and violence, affects virtually all individuals. Long term effects from drinking excessive levels of alcohol can increase a person's risk of developing chronic disease including cancer, cardiovascular disease and liver cirrhosis.

In relation to initiatives aimed at reducing alcohol related harm, the City has been active in this area through its opposition to Dan Murphy's

adjacent to the Youth Centre near the Gateway Shopping Centre, and through the development of a planning policy and position statement. The latter documents place a requirement upon applicants for new liquor licences to provide a copy of the Public Interest Assessment Report in sufficient time to allow the City to make a determination on whether the application is supported or otherwise by the community. The City will become more actively engaged in the liquor licence process and fulfil the role of Local Government as provided in the Liquor Act.

Objective: To raise local awareness of the negative health impacts caused by harmful use of alcohol and increase the City of Cockburn's commitment to addressing the harmful use of alcohol.

Objectives	Actions	Responsibility	Timeframe and cost	Progress
1. Encourage the responsible service of and safe consumption of alcohol to staff and the wider Cockburn community	1.1 Apply the City's existing Alcohol policy to ensure that it promotes safe drinking levels and effectively reduces the risk factors associated with preventable injuries caused by harmful levels of alcohol consumption.	Manager Environmental Health Services	2013-ongoing No cost	

	<p>1.2 Map the location of all liquor outlets – compare with location of schools, low Socioeconomic Index for Areas (SEIFA) suburbs, and at risk groups</p>	<p>Manager Environmental Health Services</p>	<p>2013-2015 No cost</p>	
	<p>1.3 Assess new liquor licence applications in compliance with the City's Position Statement Licenced Premises</p>	<p>Manager Environmental Health Services</p>	<p>2013-ongoing No cost</p>	
	<p>1.4 Investigate existing plans for a Dry-Out Centre for people affected by alcohol/ drugs, lobby State Government as necessary</p>	<p>Manager Human Services</p>	<p>2013-2014 No cost</p>	
<p>2. Support and encourage the promotion of safe drinking messages in the community</p>	<p>2.1 Partner with Youth Services to support the promotion of safe drinking messages</p>	<p>Manager Environmental Health Services Manager Youth Services</p>	<p>2013-ongoing Minor cost</p>	
	<p>2.2 Promote drinking in moderation and educate on the negative health affects related to harmful levels of drinking through all healthy eating programs including Beat It and Healthy Eating Activity and Lifestyle (HEAL)</p>	<p>Healthy Communities Coordinator Health Promotion Officer</p>	<p>2013-2015 Minor cost</p>	
<p>3. Improve laws, limit alcohol use in the community</p>	<p>3.1 Lobby State and Commonwealth Governments to change the laws controlling the availability and marketing of alcohol especially to young people</p>	<p>Manager Environmental Health Services</p>	<p>2013-ongoing No cost</p>	

PART 5.3
LIST OF ACTIONS 5.3 PRIORITY AREA - SMOKING

Smoking is a leading cause of preventable death and illness internationally. Smoking increase's a person's risk of cancer, cardiovascular disease and respiratory conditions. While there have been reductions over the past decade, there are still nearly 15000 adults in Cockburn who currently smoke. Passive smoking also causes detrimental health effects. In relation to initiatives aimed at reducing

smoking, the City has been a leader in local government in Perth and the existing strategies will be maintained

Objective: To enhance the health and wellbeing of the Cockburn community by creating a smoke free environment for all to enjoy.

Objectives	Actions	Responsibility	Timeframe and cost	Progress
1. To reduce the Cockburn residents and visitors exposure to second hand smoke	1.1 Promote all City run events as smoke free	Community Services	2013-ongoing Minor cost	
	1.2 Reduce Council employees' exposure to environmental tobacco smoke in the Workplace by designating Council Offices grounds as Smoke Free Areas	Health Services/ Environmental Services	2013-ongoing Minor cost	
	1.3 Continue to enforce all aspects of the City's Smoke Free Council Policy (includes - signs/stickers on vehicles, job adverts state we are a smoke-free workplace)	Health Services	2013-ongoing Minor cost	
	1.4 Continue to enforce all aspects of the Smoke free environment policy (includes - signs/stickers on playgrounds and buildings, "Quit" promotion at events)	Manager Environmental Health Services	2013-ongoing Minor cost	

<p>2. Decrease the prevalence of smoking in the City of Cockburn</p>	<p>2.1 Educate the community on the effects of smoking through healthy lifestyle education programs and the Healthy Lifestyles website.</p> <p>2.2 Provide services and support to employees that would like assistance to quit smoking</p>	<p>Healthy Communities Coordinator/ Health Promotion Officer</p> <p>Manager Human Resources</p>	<p>2013-ongoing Minor cost</p> <p>2013-ongoing Minor cost</p>	
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PART 5.4
LIST OF ACTIONS 5.4 PRIORITY AREA - PHYSICAL ACTIVITY AND HEALTHY EATING

Significant health benefits can be obtained through participating in sufficient levels of physical activity. Maintaining a healthy diet is also vital to good health. Regular physical activity and good nutrition can reduce the risk of many chronic conditions including heart disease, stroke, high blood pressure, and type 2 diabetes. They can also help to achieve and maintain a healthy body weight and reduce feelings of stress, anxiety and depression, along with many other positive health benefits. The City has been particularly active in the areas of Physical

Activity and Nutrition for several years and this level of commitment will be maintained. Commonwealth funding for the Co-Health program will cease in 2014 at which time a number of the services will also cease, however the most effective initiatives will be maintained subject to the Council approval within the normal budget process.

Objective: To encourage healthy eating and physical activity in the Cockburn community in the City's workplaces.

Objective	Actions	Responsibility	Timeframe and cost	Progress
1. Increase the Cockburn community's awareness of the importance and benefits of physical activity and healthy eating	1.1 Promote healthy eating and physical activity at Cockburn events and during Cockburn Healthy Lifestyles week.	Healthy Communities Coordinator	2013-ongoing up to \$10,000 p/yr	
	1.2 Dispel myths and increase knowledge in the community about healthy eating through providing Healthy Communities Workshops (Foodcents)	Healthy Communities Coordinator/Health Promotion Officer	2013-2015 \$3000 p/yr	
	1.3 Work internally with Youth Services to ensure nutrition education is included within the Youth Centre programs (Foodcents)	Health Promotion Officer/ Youth Services Manager	2013-2015 \$5000 p/yr	
	1.4 Investigate provision of additional transport options for youth to access physical activity services	Health Promotion Officer	2013-2014 \$4000 p/yr	

<p>1.5 Promote existing social marketing campaigns that focus on healthy eating and/or physical activity e.g. the Swap it Campaign</p>	<p>Healthy Communities Coordinator/Health Promotion Officer</p>	<p>2013-ongoing Minor cost</p>
<p>1.6 Promote the City's Healthy Lifestyles website, ensuring all program and event information is up to date</p>	<p>Healthy Communities Coordinator/Health Promotion Officer</p>	<p>2013-ongoing Minor cost</p>
<p>2.1 Continue to run HCI funded programs until April 2014 including: Heartmoves HEAL Beat It Heart Foundation Walking Nordic Walking Aboriginal women's exercise group AustCycle Lifeskills courses Healthy Families Workshops Community Gardens (Ottey Centre and Randwick Stables)</p>	<p>Healthy Communities Coordinator</p>	<p>2013-2014 To be costed and evaluated</p>
<p>2.2 Work in partnership with Health Promotion NGOs such as Red Cross, Heart Foundation, Cancer Council and Diabetes WA/Diabetes Council of Australia to pool resources in working towards continuing some Co-Health programs beyond the HCI funding period (post April 2014): Heartmoves Cockburn Youth Centre Beat It Aboriginal women's exercise groups in Coolbellup Healthy Families Workshops Community Gardens (Ottey Centre and Randwick Stables)</p>	<p>Health Promotion Officer</p>	<p>2014-2015 To be costed and evaluated</p>

2. Increase the number and accessibility of proven and culturally appropriate physical activity, healthy eating, and healthy lifestyle programs

PART 5.4
LIST OF ACTIONS 5.4 PRIORITY AREA - PHYSICAL ACTIVITY AND HEALTHY EATING (CONT.)

Objective	Actions	Responsibility	Timeframe and cost	Progress
2. Increase the number and accessibility of proven and culturally appropriate physical activity, healthy eating, and healthy lifestyle programs (Continued)	2.3 Work in partnership with the Heart Foundation to continue to support Heart Foundation Walking groups and Heart Foundation Walking events in the City of Cockburn and provide training to new Walk Organisers to increase the number of walking groups in Cockburn	Healthy Communities Coordinator / Health Promotion Officer	2013-ongoing \$1500 p/yr	
	2.4 Identify external funding sources for further physical activity initiatives – grants, corporate sponsorships etc	Grants and Research Officer/Sport and Recreation Services/ Health Promotion Officer	2014 No cost	
	2.5 Investigate adding a concession/health care card holder entry fee into SLLC (there is currently a reduced rate for students and pensioners)	Manager Environmental Health Services/ Manager Community Services	2013-2014 To be costed	
	2.6 Continue to provide exercise and dance classes and walking groups for seniors through the seniors centre	Coordinator Seniors centre	2013-2014 Minor cost	
	2.7 Continue to support a local group that provides a low cost inclusive sporting arrangement for people with disabilities.	Disability Access & Inclusion Officer	2013-2014 No cost	

2.8	Investigate establishing an all abilities AFL team in Cockburn in partnership with a local club	Disability Access & Inclusion Officer	2013-2014 No cost	
2.9	Continue to develop the Cockburn Central West Regional Aquatic and Recreation Facility	Recreation Services Coordinator	2013-2014 No cost	
2.10	Investigate a major new regional sporting facility with Dept Sport and Recreation and Cities of Canning and Melville	Recreation Services Coordinator	2013-2014 No cost	
2.11	Investigate additional programs provided by Youth Services including swimming and skateboarding	Health Promotion Officer, Youth Centre Manager	2013-2014 \$5000 p/yr	
2.12	Investigate additional programs at Youth Centre including cooking and nutrition classes	Health Promotion Officer, Youth Centre Manager	2013-2014 \$5000 p/yr	
2.13	Investigate the level of accessibility at the new Super Clinic for Aboriginal residents (Bulk billing, pension card holders, health care card holders)	Manager Human Services	2013-2014 No cost	
2.14	Investigate provision of Healing centre for Aboriginal residents	Manager Human Services	2013-2014 To be costed	
2.15	Investigate and identify the prevalence of economic barriers to nutritious food in low SEIFA suburbs and at risk groups,	Manager Human Services	2013-2014 No cost	

PART 5.4
LIST OF ACTIONS 5.4 PRIORITY AREA - PHYSICAL ACTIVITY AND HEALTHY EATING (CONT.)

Objective	Actions	Responsibility	Timeframe and cost	Progress
3. Increase community participation in physical activity and lifestyle activities	3.1 Continue to promote all Co-Health programs through social media, Cockburn Soundings, newspaper adverts and posters around the community	Healthy Communities Coordinator	2013-2014 \$10,000 Co-Health Funded	
	3.2 Work with the Heart Foundation to promote Heartmoves classes run at both the Cockburn Seniors centre and the Cockburn Youth centre and Salvation Army	Health Promotion Officer	2013-2015 \$15,000 Co-Health Funded	
	3.3 Investigate using the seniors bus to provide transport for some physical activity programs to reduce barriers to participation beyond HCl funding	Health Promotion Officer	2014-2015 \$5000	
	3.4 Investigate more affordable and culturally appropriate recreational services for seniors	Health Promotion Officer	2013-2015 No cost	
	3.5 Continue to provide funding through the Youth Active program	Recreation Services	2013-2015 To be costed	
	3.6 Work with schools to encourage active transport through the TravelSmart to school initiative	TravelSmart Officer	2013-2014 \$10,500	

<p>3.7 Encourage and support the community in making active travel choices including events such as Bike Week, Bike Rescue Project and Cockburn Youth Centre. Advocate, promote and work with Cockburn Bicycle User Group around local cycling issues.</p>	<p>TravelSmart Officer</p>	<p>2013-2014 \$14,000</p>	
<p>3.8 Work in partnership with WA Department's of Transport and Sport and Recreation to implement the Your Move program. NOTE this is a major new project costing about \$4million funded by the State Government</p>	<p>TravelSmart Officer</p>	<p>2013-2014 \$100,000</p>	<p>\$100,000 is the City's commitment to the State Government \$4 million Your Move Project. Most of the funds to be spent on local schools, wayfinding signage and new cycling infrastructure.</p>
<p>3.9 Investigate provision of free physical activity options in parks</p>	<p>TravelSmart Officer</p>	<p>2013-2014 To be costed</p>	
<p>3.10 Road Safety and Travelsmart Reference Group to facilitate and promote healthy transport options.</p>	<p>Director Engineering, Transport Engineer, Travel Smart Officer</p>	<p>2013-2018 No cost</p>	
<p>3.11 Through the WALGA Healthy Communities Working Group, lobby for a review of the effectiveness of the Liveable Neighbourhoods Planning Policy</p>	<p>Manager Strategic Planning</p>	<p>2013-2014 No cost</p>	
<p>4. Provide every residence in Cockburn with a destination within 400m to encourage regular walking/cycling</p>	<p>Travel Smart Officer, Health Promotion Officer, Manager Parks and Environment, Manager Engineering</p>	<p>2013-2015 To be costed</p>	

PART 5.4
LIST OF ACTIONS 5.4 PRIORITY AREA - PHYSICAL ACTIVITY AND HEALTHY EATING (CONT.)

Objective	Actions	Responsibility	Timeframe and cost	Progress
5. Provide functional, accessible and active Public Open Space(Parks) to encourage walking and physical activity	<p>5.1 Based on the results of the Walking Destination Audit, audit the City's public open space (parks) and develop a 10 year implementation plan. Key infrastructure for all ages to include:</p> <ul style="list-style-type: none"> Playgrounds; Exercise equipment; Skateparks; Informal BMX Tracks; Footpath / Cycle path networks (inc lighting) Half-Court Basketball Courts BBQ facilities Drinking fountains Seating 	Manager Parks and Environment	2013-2015 To be costed	
	<p>5.2 Review the Cycle Path Plan, Trails Master Plan and audit existing networks and develop an implementation program that enables residents to walk and /or cycle safely through tree lined streets to every POS, bus stop, commercial hub / activity centre.</p>	Manager Parks and Environment, Manager Engineering	2013-2015 To be costed	
	<p>5.3 Investigate external funding / grant opportunities for park infrastructure and paths</p>	Manager Parks and Environment, Manager Engineering, Health Promotion Officer	2013-2015 To be costed	

	<p>5.4 Develop a web page informing residents of activity equipment and main walking / cycle routes to each POS.</p>	<p>Manager Parks and Environment</p>	<p>2013-2015 Minor cost</p>	
	<p>5.5 Review the implementation “Calico” and increase network of sites or consider the develop a City of Cockburn interactive activity program</p>	<p>Manager Parks and Environment</p>	<p>2013-2015 To be costed</p>	
<p>6. Increase the capacity within the community to deliver innovative healthy eating and/or physical activity programs through support and training</p>	<p>6.1 Provide education and training to community members that will enable them to run physical activity and healthy eating programs.</p>	<p>Healthy Communities Coordinator</p>	<p>2013-2014 Minor cost</p>	
<p>7. Engage with the Aboriginal population living within the Cockburn, Fremantle, East Fremantle and Melville Local Government Areas</p>	<p>7.1 Utilise existing partnerships with Government, non-government and Aboriginal organisations within the community</p>	<p>Healthy Communities Coordinator</p>	<p>2013-2014 No cost</p>	
	<p>7.2 Employ two Aboriginal engagement officers to help engage community members to join and continue to take part in Co-Health programs.</p>	<p>Healthy Communities Coordinator</p>	<p>2013-2014 \$25,000 p/yr for 2 officers 1 day per week equiv Co-Health Funded</p>	
	<p>7.3 Continue investigate funding options to fund exercise classes for Aboriginal women in Coolbellup</p>	<p>Health Promotion Officer</p>	<p>2014-2015 \$22,000</p>	

PART 5.4
LIST OF ACTIONS 5.4 PRIORITY AREA - PHYSICAL ACTIVITY AND HEALTHY EATING (CONT.)

Objective	Actions	Responsibility	Timeframe and cost	Progress
8. Develop a Workplace Healthy Catering Policy which ensures healthy eating options are available at workshops, meetings, functions and events run by the City of Cockburn	8.1 Encourage businesses that provide healthy food products to participate in council run events and catered meetings, workshops and functions and provide recognition for this.	Manager Environmental Health Services	2013-2015 No cost	
	8.2 Undertake an audit of foods provided at City run events to determine areas requiring improvement.	Public Health Planning Officer/ Manager Health Services	2013-2014 No cost	
	8.3 Investigate the possibility of fruit baskets in the workplace	Health promotion Officer	2013-2015 Minor cost	
9. Encourage and support staff to increase their participation in physical activity	9.1 Encourage active transport in the workplace by promoting council bikes, bike lockers and end of trip facilities to all staff	TravelSmart Officer	2013-2014 No cost	
	9.2 Continue to encourage and support staff to enter local events e.g. RAC Freeway Bike ride, National Ride to Work, Cycle in Spring Challenge and Department of Transport Online Corporate Walking Challenge.	TravelSmart Officer	2013-2015 \$4,500	
	9.3 Provide a shuttle bus service to and from Cockburn station for the work commute for Cockburn employees to encourage active transport	TravelSmart Officer	2013-2014 \$4,500	

	<p>9.4 Investigate the development of a gym at the Seniors centre for use by Seniors Centre and the City staff</p>	<p>Health Promotion Officer</p>	<p>2013-2014 No cost</p>	
	<p>9.5 Investigate the development of a fitness track in the admin office precinct for use by staff from the City and Phoenix Shopping Centre and the general public. Seek external funding.</p>	<p>Health Promotion Officer</p>	<p>2013-2014 To be costed</p>	
<p>10. Increase staff awareness of the importance of physical activity and healthy eating</p>	<p>10.1 Establish a working group across council (Health and Wellbeing Reference group) to enhance communication and maximise resources across the City's Strategies</p>	<p>Health Promotion Officer Manager Environmental Health Services</p>	<p>2013-2015 No cost</p>	
	<p>10.2 Encourage the managers of all service areas at the City to consider how they integrate sustainable, preventative health measures into all Corporate Strategic and Operational Plans</p>	<p>Manager Environmental Health Services</p>	<p>2013-2015 No cost</p>	

ATTACHMENT 1 TARGETS OF THE NATIONAL PARTNERSHIP AGREEMENT ON PREVENTATIVE HEALTH

The Council of Australian Governments Preventative Health Agreement (COAGPHA) aims to:-

- Increase the proportion of children and adults at healthy body weight by 3% within 10 years
- Increase the proportion of children and adults meeting national guidelines for healthy eating and physical activity by 15% within 9 years
- Reduce the proportion of Australian adults smoking daily to 10% within 10 years
- Reduce the harmful and hazardous consumption of alcohol
- Help assure Australian children of a healthy start to life, including through positive parenting and supportive communities, and an emphasis on the new-born

Commonwealth and States have agreed to meet the following performance benchmarks:-

1. Increase in proportion of children at unhealthy weight held at less than 5% from baseline in each state by 2016; proportion of children at healthy weight returned to baseline level by 2018
2. Increase in mean number of daily serves of fruit and vegetables consumed by children by at least 0.2 for fruits and 0.5 for vegetables from baseline for each State by 2016; 0.6 for fruits and 1.5 for vegetables by 2018
3. Increase in proportion of children participating in at least 60 minutes of moderate physical activity every day from baseline for each State by 5% by 2016; by 15% by 2018
4. Increase proportion of adults at unhealthy weight held at less than 5% from baseline for each state by 2016; proportion of adults at healthy weight returned to baseline level by 2018
5. Increase in mean number of daily serves of fruit and vegetables consumed by adults adults by at least 0.2 for fruits and 0.5 for

vegetables from baseline for each State by 2016; 0.6 for fruits and 1.5 for vegetables by 2018

6. Increase in proportion of adults participating in at least 30 minutes of moderate physical activity every day from baseline for each State by 5% by 2016; by 15% by 2018
7. Reduction in state baseline for proportion of adults smoking daily commensurate with a 2% reduction in smoking from 2007 national baseline by 2011; 3.5% reduction from 2007 national baseline by 2013
8. Performance against benchmarks will be assessed at 2 time points: June 2016 and December 2017

ATTACHMENT 2

REPORT INTO THE TRADITIONAL HEALTH PROTECTION SERVICES CURRENTLY PROVIDED BY THE HEALTH SERVICES TEAM

Introduction and summary

This is a review of the current services provided by the Health Services Team to ensure they are relevant, and to identify areas that are emerging and which may justify additional attention and resources. The current services provided are listed in Appendix 1. In summary we are able to predict areas that are likely to increase in priority and justify the allocation of additional resources but there are no areas where levels of service can be safely reduced.

Discussion

The traditional areas of Health Services in Local Government in WA have been established over many years and largely originated from the Health Act 1911. They typically relate to food, water, accommodation (houses and public buildings), public safety at events, disease, air pollution, nuisances such as noise, and property based complaints (asbestos, odours, flies etc).

Each service area has been assessed and the current level of service is considered to be appropriate to comply with legislation and a duty of care. I have based this assessment on a circumstance where if a worst case scenario occurred neither the City nor the Manager of Health Services would be deemed to be liable or responsible for failing to meet minimum standards. The worst case would include a death or injury or complaint and any subsequent investigation by relevant authorities.

I have separated the City's Health Services work/duties into 5 categories, these are:-

1. Complaints/Customer Requests
2. Audits of Health Premises
3. Health Impact Assessment, Applications and licencing
4. Health Impacts of Climate Change

5. Other activities

Complaints/Customer Requests

Health Services responds annually to about 500 various types of complaints typically from land owners or occupiers. Most of the complaints relate to noise and other activities on residential premises. The complaints are investigated according to well established protocols based upon legislation and customer service. The City has a statutory obligation to investigate the complaints and take action relating to breaches of legislation. There are a small number of whacky complaints that may not fit into the definition of a statutory obligation and in some cases the complainant is advised to contact the responsible agency or that the City is unable to assist. These represent a negligible impact upon resources and wherever possible Health Officers endeavor to provide assistance to complainants.

Investigation of complaints involves an assessment for compliance with relevant legislation typically with the head powers of the Health Act and the Environmental Protection Act. This process is complex and the authorized officer has traditionally been an Environmental Health Officer (EHO's) operating under the delegated authority of both the Council and the Executive Director of Public Health (EDPH - WA Dept of Health). The powers in the proposed new Health Act have the capacity to alter this arrangement and there is the potential for some of this body of work to be carried out by other members of staff. It remains to be seen whether this happens and whether the Council and/or the EDPH are prepared to accept lower qualified and lower paid officers to carry out some tasks in the interest of saving money.

It is not worth giving too much focus on the "what-if's" at this stage because the new Health Act has yet to be passed through parliament and the definition of authorized officer has yet to be determined. There is no doubt that much of the

ATTACHMENT 2 (CONTINUED)

body of work carried out by EHO's involve both high level understanding of Health Risks e.g. asbestos and the potentially sensitive issues associated with powers to enter private property, gather evidence and force owner/occupiers to change their behavior. A new Health Act will have little impact on the complaints receive by LGA's which will have to respond acceptably and I foresee little change in the current status quo.

As the City moves towards accepting complaints and service requests such as mosquito investigation via electronic media it is likely that the number of complaints will increase as the process becomes simpler than providing the complaint in writing. Wherever possible the Health Officer will request each complaint to be lodged in writing so that the person gives a commitment to provide evidence should the case progress to legal action.

Conclusion – there is little scope to reduce the resources allocated to the investigation of complaints.

Future predictions

- Increased expectations of the community to lodge complaints electronically and addressed quickly and with comprehensive response recorded electronically and made more widely accessible.
- Complaints relating to noise are predicted to rise in frequency and complexity due to increased high density living (subwoofers and air conditioners and parties).
- Complaints about mosquitoes and associated diseases will increase due to large numbers of residents located near to wetlands and low lying poorly drained areas.

Audits of Health Premises

Health Premises includes a range of premises where activities are carried out that may impact on public health including food premises, offensive trades, public buildings, tattoo parlours

and the like. These premises are audited to ensure compliance with the minimum standards established by relevant legislation. The minimum frequency of audits are set down under guidelines by the WA Department of Health but they are largely the responsibility of the City's Manager Health Services.

As previously mentioned the level of service is based upon a worst case scenario and a risk assessment for each type of premises. The highest risk premises are large public buildings and large producers and providers of food especially high risk food. All premises are audited at a frequency that is considered to be the minimum safe frequency and premises with a history of poor standards are audited more frequently.

Conclusion - there is little scope to reduce the resources allocated to the audits of Health Premises.

Future predictions

Typically the largest audit program for each LGA is Food Premises. There is constant pressure to minimize EHO surveillance of food premises while maximizing a risk based approach with self monitoring by the proprietors. We have established a minimum of 1 inspection of every high/medium risk premises per year and I believe that this represents the minimum safe frequency of audit.

Health Impact Assessment, Health Applications and licencing

EHO's carry out Health Impact Assessment of Planning and Building Licence applications to ensure compliance with minimum standards including those relating to off-site impacts such as noise and dust. Other licences and approvals relate to Health Premises plus events. The fees associated with these activities are comparable to fees charged by other LGA's

Conclusion - there is little scope to reduce the resources allocated to Health Impact Assessment, Health Applications and licencing.

Health Impacts of Climate Change

The City has developed a Climate Change Adaptation Action Plan which includes a number of initiatives relating to Public Health. These include impacts triggered by the increase in temperature such as changes to vectors of disease including mosquitoes, increased disease from water including swimming, increased disease from perishable food, and impacts of heat wave stress. In most cases there is no action required at this early stage, but there is a need for in-house experts to maintain awareness of the impacts of Climate Change and to liaise with experts in the Commonwealth and State Government Health Departments.

Conclusion - there is little scope to reduce the resources allocated to the Health Impacts of Climate Change.

Other activities

There will always be a number of activities and services provided by Health Services that are sometimes loosely associated with Public Health but which must be done. Some of these are extremely significant including the management of the City's contaminated sites, mosquito management program, storage and transport of dangerous chemicals (Magellan, Lynas Corp), and surveillance of the Naval Base Shacks. Other matters that sometimes involve frivolous or low risk complaints such as syringes in public places, cats, Portuguese millipedes, noise from birds, people living on moored boats, people camping under heritage listed trees and the like, simply cannot be ignored and are dealt with appropriately by EHO's.

Conclusion – while there may be some scope to minimise Council's costs by employing a

lower paid officer to carry out investigations of minor complaints this is not considered to be worth pursuing while we continue to employ a trainee EHO who is able to carry out some of these investigations. Also note that experience suggests that some of these cases have the potential to develop in complexity due to political and media interest. In these situations the stewardship of a qualified and experienced EHO is invaluable.

Conclusion

In the short term there is no scope to change the structure or function of the Health Services Team. As included for several years in the Plan for the District and the draft Workforce Plan there will be a need for additional EHO's to attend to traditional Health Protection work in 2014-15 and 2016-17.

Nick Jones
Manager Environmental Health Services
January 2013

ATTACHMENT 3

“PATHWAY TO A HEALTHY COMMUNITY” DOCUMENT COMMENTS FROM COUNCIL’S EXPERTS AND CONSULTATION FINDINGS

Population Group	Area expert
Older people	Paul Gabbert, Seniors Centre Coordinator

Summary of Services provided

Population ageing will impact on planning and service delivery, creating growing challenges for local government authorities. The City has an Age Friendly Strategic Plan which contains a list of current and planned services ranging from Active Ageing services through to services for the frail aged and people with disabilities.

The City operates the Cockburn Seniors Centre which offers diverse recreational and cultural activities to cater for its ageing population and it currently has 42 volunteers. There are a number of carer support programs in the City and there are a number of very active organisations meeting the needs of older people in the community.

The City also operates Home and Community Care Services and 35 Community Aged Care packages to assist seniors to remain living independently in their own homes.

Summary of identified gaps and Key consultation findings relating to health

Through public consultation conducted as part of the City’s Age Friendly Strategic plan residents identified the parks, beaches, senior’s centres, and libraries as significant. Access to shopping centres, medical centres and transport was also significant.

- During the consultation undertaken the following gaps were identified:
- Insufficient affordable housing options and respite services
- Insufficient home help services
- Access and funding issues related to current services

- Social isolation (mental health)
- Lack of affordable and culturally appropriate social and recreational services
- Lack of coordination of information and services supporting ‘healthy ageing’
- Lack of promotion of services that council provide
- Inadequate safety and security for some seniors both in home and the community
- Inadequate affordable access to public spaces, services and events
- Poor transport
- Insufficient intergenerational activities

Community and Health Services

Outcome

- That the ageing population in the City of Cockburn has access to affordable quality community support services and health care.
- To support outreach health services that improve access to affordable medical services
- To support recreation facilities, parks and walkways that support access for the ageing population
- To provide relevant activities that reflect the WA Active Ageing Strategy
- It has been identified that the City needs to develop an emergency plan for the elderly in cases of extreme hot/cold weather.

Population Group	Area expert
Young Children	Barbara Freeman, Family Services Manager

Summary of Services provided

The City has a Children's Services Plan 2010-15 which identifies the current and future services the City wishes to provide. The City is considered an innovative leader in the provision of children's services. The City currently operates an Early Years Service, extensive child care services and mobile outdoor play group service, and has just formed a Children's Reference Group for Primary school aged children launched November 8th 2012. The City has a Children's development area which provides support to child health services, play groups, toy libraries and children's services across Cockburn.

The City also has the kids sport program, and other recreation activities available for young children through sporting clubs, and community halls.

The City runs numerous programs and events that cater to and support young children and their families, including a number of initiatives for young children with disabilities or their carers.

There are 131 parks which have playground equipment including a universal playground at Manning Park.

Summary of identified gaps and Key consultation findings relating to health

A key outcome to be achieved as part of the Children's Services Strategic Plan is:

Community and Health Services

Outcome

That children and their parents/caregivers in the City of Cockburn are able to access affordable, inclusive, and quality community support and health services. Access includes cost, transport, availability of services, and physical/social access issues.

Other gaps include:

Provision of early intervention health services for children, sufficient to address need

Infrastructure development, planned by the City through its Sport and Recreation Strategic Plan, to upgrade parks and sporting facilities (including the swimming pool) will provide improved services and activities for this age group. Capacity building for sporting clubs and associations also identified in the Plan will enhance opportunities for an increased number of young people to participate in community based teams of a wider range of sports and increase the likelihood of sustainability of these activities in the future.

Indigenous young people (both boys and girls) also reported that dance activities are valued, e.g. through local church groups. Parents of children with a disability reported that it is difficult to find a dance activity in which children with a disability can participate.

ATTACHMENT 3 (CONTINUED)

The City's officers responsible for youth, sport/ recreation and planning/infrastructure work in conjunction to provide optimal public sports facilities, and successful access of target groups to these facilities, in order to address the needs of different age, gender and specific user groups, e.g. scooter, skateboard.

Children, youth, parents and services providers identified that lack of transport services across the City limited access to activities.

Child Health Services

There has been no increase in provision of child health staff or services in a number of years, despite the rapidly growing population in Cockburn. There is a need for additional Child health centres to address this growth in demand for services.

Playgrounds

With the growing numbers of young children in the eastern corridor of the city it is important to take into consideration our increased understanding of the critical value of play and the provision of play environments for the optimal development of a child.

The provision of stimulating, engaging and challenging play spaces for young children is perhaps of greater importance in current times than previously, due to the propensity towards passive entertainment & technology, time pressures on families, and the growth in obesity levels.

Due to the large percentage of children in the south east quadrant and the lack of a Regional playground in this area there is a need to develop a Regional Playground for children of all ages and abilities.

Population Group	Area expert
Young People	Michelle Champion, Youth Services Manager

Summary of Services provided

The City has a Youth Services Strategic Plan 2011-2016 which was developed by independent consultants and the Youth Centre is the major service location for young people. A full list of current and planned services is contained within the plan.

In summary the City provides youth work counselling services for at risk young people, general recreation, education, and performing arts activities from the Youth Centre, a youth holiday program and community development programs for young people.

The South Lake Leisure Centre offers a range of activities and indoor sports and the City has plans in place to build a new leisure facility at Cockburn Central. The City also has in place the Kids Sport Program that allows families to apply to have part of their children's sporting fees paid for.

Summary of identified gaps and Key consultation findings relating to health

The City of Cockburn is home to beautiful beaches, parks, bush land and lakes and it is these aspects that young people identified as the best parts of living in Cockburn at the moment. They want to be able to get to and use these places (see transport) and they also want facilities that make being out in the open more comfortable – such as more public toilets and shade structures, skate park facilities, bmx and motorbike trails.

The City strives to provide a range of recreation, and counselling, and well being services from the Youth Centre The “one stop shop” model needs further development with the need for a drug and alcohol counsellor.

Young people also said that they wanted more sporting centres as well as sporting opportunities that are social rather than competitive. For example, they would like for boys and girls to be allowed to play on the same sports teams when they are over 13.

The Reconciliation Action Plan consultation and Youth Consultation identified that some families did not find the Kids sports subsidy sufficient to allow ongoing sports participation, and that a subsidy for use of the leisure centre facilities is also required for people in financial hardship.

Additional resources and/or programs

More programs such as swimming, cooking and skate competitions (we already have one cooking class but need more education on nutrition)

ATTACHMENT 3 (CONTINUED)

Population Group	Area expert
Aboriginal people	Barbara Freeman, Family Services Manager

Summary of Services provided

The City has a Reconciliation Action Plan 2013-16 which includes Aboriginal awareness training for staff, Reconciliation Week activities, Naidoc week celebrations, Welcome to countries at Citizenship ceremonies; The City's Aboriginal Reference Group, who participate in the City's Australia Day event; an annual Bus Tour of significant sites, and involvement/partnerships with the Walyalup Reconciliation Group. The City currently employs eight Aboriginal people and has a Close the Gap project which raises awareness of the health inequalities experienced by Aboriginal people.

The City liaises with schools in reconciliation activities and Nyungar language is being taught at some Cockburn primary schools and has been planned for the Youth Centre. There is planning for signage in Cockburn using Nyungar names for parks etc. An Aboriginal Cultural Centre is proposed for COC but is dependent on funding support.

The City has developed formal relationships with organisations run by or involved with the Aboriginal community, including Medicare Local, the South Lake Ottey Centre, the Halo organisation and Burdiya Aboriginal Corporation through the Healthy Communities Initiative. There are also several Aboriginal organisations within the City that are usually auspiced by another organisation such as the Ottey Centre.

The City was successful in gaining Healthy Communities funding and this has been successful in providing Culturally appropriate Healthy eating and physical activity programs for Aboriginal people in this region. This needs to continue to be provided.

Summary of identified gaps and Key consultation findings relating to health

Major barriers to accessing mainstream services are feelings of not being welcomed or included or not being familiar with the environment or it not being culturally welcoming.

Key health gaps from the RAP consultation were:

- Need for a Healing centre where Noongars (Aboriginal people) can go that is culturally appropriate
- Need a Dry-out Centre for alcohol and drugs
- Need to ensure the Accessibility of the Super Clinic – Indigenous health. Bulk Billing pension card holders/ Health care holders at the Superclinic is critical to access by ATSI and others on low incomes
- Need the superclinic to Target Young people and older people who are more at risk
- Need additional resources for the Street Doctor to go to more locations
- Seniors Centre- Need more Health programs for women and men and nutrition
- Dental Clinic- needs to consider strategies to engage Aboriginal People
- Ancillary health services-Hands on Health St Pats needed in Cockburn as well
- General Health Check for Aboriginal People should be available more often
- Physical activity programs that are culturally appropriate
- Healthy eating programs that are culturally appropriate are needed.
- Continue with Co-Health Healthy eating and physical activity programs that are culturally appropriate for Aboriginal people.

Population Group	Area expert
People from culturally and linguistically diverse backgrounds	Gail Bowman, Manager Human Services

Summary of Services provided

Approximately 30% of the population of Cockburn has been born overseas. Languages other than English that are most commonly spoken at home are Italian (3.7%), Croatian (2.2%), Portuguese (1.8%) and Mandarin (1%). Between July 2005 and June 2010 about one quarter of settlement arrivals were humanitarian and three quarters were family. With a total of 443, Cockburn was the largest recipient of settlement arrivals in the South West Metropolitan Statistical Sub-Division.

Cockburn is a very diverse community and this is expressed in a number of ways including through events and entertainment.

The City provides interpreters upon request.

The City has a good representation of CaLD groups in some of our areas such as Family Support services, and our Events include entertainment from a diverse range of cultural groups. However some service areas are under representative of CaLD groups.

Summary of identified gaps and Key consultation findings relating to health

The built environment is not very conducive to languages other than English. If English is a second language, people may experience barriers to participation in economic, social, cultural and recreational activities.

- The City does not undertake consultations in different languages.
- The City needs a Multicultural Officer to engage with the CALD community.
- The City needs to develop a Multicultural Strategy.

ATTACHMENT 3 (CONTINUED)

Population Group	Area expert
People with a disability	Jason Hoggan, Disability Access and Inclusion Officer

Summary of Services provided

The City has a Disability Access and Inclusion Plan which in addition to the 6 obligatory outcomes, has recently included a 7th outcome: Businesses and services within the City of Cockburn are encouraged to improve the access and inclusion of their businesses for people with disabilities.

The City has a Disability Reference Group that advises council on a broad range of issues within the City of Cockburn

The City has engaged an access auditor to audit the accessibility of all council owned buildings and other social, cultural and recreational activities. The affected areas are identified and action is taken to rectify the issues at hand.

The City ensures meaningful participation in consultation processes by people with disabilities by providing Auslan interpreters, providing one on one assistance in filling out and explaining documents and ensuring that all public forums have audio loop systems. All public consultations must be held in buildings that are accessible to all members of the public regardless of their ability and all documents can be made available in alternative formats and Auslan interpreters are also available on request.

The City also has an accessible and inclusive youth centre that is extremely welcoming of people of all levels of ability.

It has recently been revealed by the Disability Services Commission that the City of Cockburn is one of four areas for the pilot project My Way. My Way will improve the choice, flexibility and control that people with a disability have over their supports and services. Individualised funding, allowing more choice and control for people with a disability of the services and supports that suit them in their local community are hallmarks of the project.

In 2012 the City of Cockburn laid accessible beach matting at Port Coogee Beach. The matting was laid to ensure that all members of the community have the ability to enjoy the beach during the summer months. In addition a Beach Trekker wheelchair is available and can be booked by calling the Disability Access and Inclusion Officer. These allow people who use wheelchairs greater access to the beaches within the City.

The new Coogee Beach Surf Life Saving Club at Poore Grove will be completed in 2013 and will include many accessible features. One welcome addition to the local area is an adult change facility. This will allow users of this service to adequately change and refresh which will promote greater community access and participation.

Summary of identified gaps and Key consultation findings relating to health

Disability Access and Inclusion Plan identified the following gaps:

- Staff training needs to include mental health awareness
- Ensure psychiatric disability is a representative group in City of Cockburn planning and processes
- Additional funding and staffing support to address domestic squalor and hoarding issues, such as a skip bin, home maintenance or support with housing relocation.
- Additional funding to promote the individual sporting and recreation activities for people with disabilities of all ages.
- Support to overcome transport as a barrier to participation
- Extend free or low cost recreational activities
- Target activities to specific resident groups (eg: CALD, young adults)

Review future exercise equipment provision for universal access opportunities

Population Group	Area expert
People with mental illness	Sian Halsall, Support Services Team Leader

Summary of Services provided

Family centres are welcoming for people with mental illness as they have centre managers who can assist and get to know the people attending. Family support services consult formally and informally, in groups, at events and one on one with people with mental illness.

A mental health component is incorporated in the City's Disability awareness training.

There are varied services offered across the City to work with people who are at risk and numerous ways in which these people can be identified including through Child Health, schools, the Youth Centre and Family Support Services

Summary of identified gaps and Key consultation findings relating to health

It has been identified that there are not adequate services for people with acute or multidisciplinary approaches for people with multiple needs within the City, however there are adequate services in the neighbouring LGAs. Further research needs to be conducted into whether it is enough that these services are available in neighbouring areas.

Information is readily available in the community regarding mental health, however mental health awareness could be more heavily promoted by the City, for example in the Cockburn Soundings or at public workshops.

ATTACHMENT 3 (CONTINUED)

Population Group	Area expert
Economically disadvantaged people	Gail Bowman, Manager Human Services

Summary of Services provided

The City's most disadvantaged suburbs according to the SEIFA index are Coolbellup and Hamilton Hill. The City employs two financial counsellors, who have frequent contact with people living in the City who are experiencing financial hardship. Annual surveys are conducted with this target group and community education life skills workshops are run on a regular basis targeting economically disadvantaged people where we specifically consult with them on issues that affect their lives.

There are financial barriers to using local government recreation services. The state Government and Commonwealth Govt funded services and library are all free of charge, however the City's recreation programs are provided at a subsidised rate but do incur fees. Seniors Centre and Youth Centre programs have fee waiver or negotiation policies if people are experiencing financial hardship; however other facilities such as the South Lake Leisure Centre operate on a commercial basis. The City's Kid Sport program assist's children's parents in paying for the cost of their children participating in club sport but for large families this may be insufficient.

Summary of identified gaps and Key consultation findings relating to health

There is a shortage of affordable housing in all household types with long waiting lists. .Housing is a basic human need which if not adequate affects health outcomes and so the City should develop an affordable housing strategy to address this gap in partnership with others.

There is a need to Extend the availability of free or low cost City organised recreational activities for all ages and abilities targeting low income households.

There is a need for adequately resourced well located passive parks and active open space to provide free physical activity options that are accessible for low income households.

