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# Regional Public Health Plan 2019-2024

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District Council of Franklin Harbour



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## **INTRODUCTION AND BACKGROUND**

The South Australian Public Health Act 2011 (the Act) is part of a range of public health legislation designed to promote and protect the health of South Australians. The Act's objectives are to "promote and provide for the protection of the health of the public of South Australia and to reduce the incidence of illness, injury and disability".

Section 50 of the Act lays out the obligations of the State in respect of delivering the State's overall plan. Within this section the Minister is excused for non-performance of any requirements of Section 50. The Act recognises that Local Councils contribute to Public Health outcomes in their individual Council areas. Under section 51 of the Act, Local Councils are required to prepare a Public Health Plan.

## **METHODOLOGY**

As well as reviewing population health data relevant to our district, Council has also engaged with health stakeholders within our individual Council area. With the best will of compliance with Section 51, the draft district health plan has been prepared and will be submitted to SA Health for comment.



## Public Health Planning Guide for Local Government

<b>Health determinant</b>	<b>Factor</b>	<b>Description / health risk(s)</b>
<b>Biomedical factors</b>	Age	A person's age can influence the types of diseases or risks they are susceptible to. For example older people are at greater risk of coronary heart disease, stroke, type 2 diabetes, osteoporosis, bone fractures, falls, and mental illness.
	Sex	Men and women suffer from different types of diseases and health concerns.
	Hereditary factors	Inheritance plays a part in determining lifespan, healthiness and the likelihood of developing certain illnesses. Some examples include muscular dystrophy, cystic fibrosis, hemophilia.
<b>Health behaviours</b>	Physical activity	Participating in physical activity is important for good physical health.
	Diet and nutrition	The amount and quality of food a person consumes influences their health. Poor diet and nutrition may lead to malnourishment, or excess body weight.
	Risk-taking behaviours	Personal behaviours including smoking, alcohol consumption and drugs can impact negatively on a person's health.
	Stress and mental health	A person's emotional wellbeing and how they deal with life's stresses can influence their health.
	Communicable diseases	An insufficient level of immunisation within the community may expose a person to measles, diphtheria, tetanus, pertussis, poliomyelitis.
	Sexual activity	Sexual activity and unsafe sex may expose people to HIV/AIDS, hepatitis, cervical cancer, infertility, pelvic infection, and sexually-transmitted diseases such as gonorrhoea, chlamydia and syphilis.
<b>Community and socioeconomic factors</b>	Family structure and relationships	Being accepted by others and interacting well within different groups of people, including family and peers, is very important for good health.
	Housing conditions	Key housing-related health risks include respiratory and cardiovascular diseases from indoor air pollution; illness and deaths from temperature extremes; the spread of communicable diseases from poor living conditions; and injuries. Overcrowding also results in poorer health outcomes.
	Working conditions	The health of workers and their families will ultimately be improved by strengthening fair access to employment and the other dimensions of decent work, including safe workplaces.
	Education	Poor education levels are linked with poorer health and poorer health choices due to lack of knowledge. Lower education levels may also lead to high risk or low paid employment, more stress and lower self-confidence.

<b>Health determinant</b>	<b>Factor</b>	<b>Description / health risk(s)</b>
<b>Community and socioeconomic factors</b>	Ethnicity / Aboriginality	People from culturally and linguistically diverse backgrounds may experience social exclusion or lack of social support, leading to increases in mental disorders. Health-related practices and beliefs may lead to positive or negative health outcomes
	Crime and safety	People feel safer living in areas with lower rates of crime and fear of crime.
	Health and social services	Availability and ready access to appropriate services in the community that prevent and treat disease influence health outcomes.
	Income	Higher income and social status are linked to better health. The greater the gap between the richest and poorest people, the greater the differences in health. Being of lower socioeconomic status may lead to lack of access to health resources such as dental care, and may increase mental disorders such as depression.
	Affordable housing	Families that pay a high proportion of their income for housing are more likely to have insufficient resources remaining for other essential needs, including food, medical insurance, and health care, leading to stress and poorer mental health.
	Employment opportunities	Unemployment may increase mental disorders such as depression.
<b>Environmental factors</b>	Air quality	Air pollution can be harmful to health, particularly for those people already at risk because of their age or existing health problems. High concentrations of major air pollutants are linked with respiratory problems such as coughs, bronchitis and asthma. Examples dust, wood smoke or air toxics.
	Contaminated land: soil and groundwater	Contaminated sites include soil, sediment and surface and ground water that have become polluted with materials or agents which may present a risk to human health. Contamination may arise from a range of human activities including industrial use, and needs to be properly managed, often through remediation.
	Food safety and quality	Food is said to be unsafe when it is likely to cause physical harm to a person who consumes it. This primarily relates to foodborne illness such as gastroenteritis ('food poisoning'), although other forms of illness and injury can be triggered by short or long-term exposure to particular contaminants.
	Health hazards in the built environment	There are numerous hazards in the environment that can be harmful to human health if not controlled. These include exposures to pesticides, asbestos, chemicals and heavy metals.
	Radiation safety	There are two types of radiation, ionising and non-ionising. Examples of ionising radiation include x-rays and gamma rays (used in medicine). Examples of non-ionising radiation include ultraviolet radiation and radiation associated with power lines.
	Vector-borne diseases and pests	Poor vector management may lead to Ross River virus, Murray Valley encephalitis or Barmah Forest virus due to mosquitoes. Other pests including rodents, flies and bed bugs can cause

<b>Health determinant</b>	<b>Factor</b>	<b>Description / health risk(s)</b>
<b>Environmental factors</b>		health issues within a community.
	Drinking water	Access to clean potable water is a necessity of life. Drinking contaminated water can lead to severe illness or death.
	Wastewater disposal	Wastewater or sewage needs to be properly treated and disposed of to prevent disease.
	Recycled water	Recycled water is derived from sewage, sewer mining, greywater and industry and needs to be properly managed to prevent disease.
	Recreational water	Microbiological contamination of recreational waters (e.g. ocean, rivers, estuaries and swimming pools) can result in illness such as gastroenteritis, skin irritations, or respiratory, ear and eye infections.
	Noise, odour, light	Regular exposure to high levels of noise, bad odours and light pollution can cause poor health outcomes as well as annoyance and sleep disturbance.
	Public open spaces	Access to green spaces (parks and gardens) to recreate has a positive influence on health and wellbeing.
	Waste disposal/management	Collection and proper disposal of waste reduces health risks within a community.
	Transport	Proximity to major transport hubs (e.g. main roads, freeways, trains, buses) as well as lack of transport options can lead to negative effects such as air pollution, physical inactivity and isolation.
	Effects of climate and geography	'Extreme weather' refers to weather events or phenomena that are at the extremes of a historical distribution. These events include unusually violent storms, exceptionally high levels of precipitation, heat waves or droughts that are longer or hotter than normal and a range of other weather-related events such as bushfires, floods and landslides. Extreme weather events often have substantial social and economic consequences and may be hazardous to human life, property and the environment.

## **COUNCIL PROFILE**

The District Council of Franklin Harbour is situated on the Lincoln Highway approximately halfway between Port Augusta and Port Lincoln. From the perspective of social inclusion, Whyalla, 110 kilometers to the north, is our most important city with a substantial hospital and a regional airport delivering services to Adelaide.

In 1853 the districts first farmers settled and the clearing of land began. Since then the land surrounding Cowell has been used for both crop and livestock farming. The major crops of the area are cereals (wheat, barley and oats), legumes and canola are also grown. The local rainfall can be somewhat unreliable with an average of 281mm.

The District Council of Franklin Harbour was created by the District Councils Act of 1887 and has been a vibrant community centre for the region ever since. Being on the coast it is a recognised retirement destination for residents of neighbouring towns. It continues to attract a growing population chasing a sea change.

The aquaculture industry has developed substantially since 1985 producing premium quality and high value species. A thriving oyster industry has been established in Franklin Harbour. The clean, sheltered waters of Franklin Harbour provide an excellent environment for aquaculture, and the Pacific Oyster grown locally are recognised as amongst the best quality available anywhere. Approximately one third of the States commercial oyster production is grown in the harbour at Cowell.

The district covers an area of 3283 square kilometres, serving a population of approximately 1400 people and extends from Lucky Bay to Port Gibbon with the major town being Cowell. The summer population swells to over 3000 in the period between Christmas and Easter as holiday makers exploit the plentiful fish and crab stocks which are found in the inner harbour and out in the Spencer Gulf. As such, Cowell is an important tourism hub which, with the re-introduction of the Wallaroo to Lucky Bay Ferry, will continue to grow into the future.

During the last 2 years, Cowell has faced three significant challenges:

- The fact that no permanent doctor is available. ‘Doctors in Whyalla’ have been able to arrange visits to Cowell for two days a week during the last twelve months, but do not have the ability to offer a full service or the ability to visit or admit patients to the local hospital. Patients at the hospital are taken care of by a visiting Doctor from Cleve (50 kms away) or by locum Doctors. During times of high population growth the medical staff, and the visiting Doctors, have the issue of determining how the medical needs of these visitors are catered for during their stay as well as the long term implications of the local community members and their day to day medical needs. The medical practitioners of a specialized area, such as mental health and drug and alcohol councilors, only visit infrequently, making it difficult for patients to access and get the assistance required.
- In 2017, with the outbreak of the POMS, the state of the oyster industry in Franklin Harbour was dire. The need to reduce the number of employees, due to the cashflow of the businesses and the number of oysters available in the harbour, resulted in unemployment rates in Cowell increasing. With the industry still to recover, unemployment numbers remain high. With the establishment of the Oyster Hatchery, to produce POMS free spat, the industry looks to be secure for the long term future, however the short term prospects are still in dire need of careful and ongoing attention to assist those in need to recover quickly and completely.
- 2018 has seen one of the driest years in the last 50 years of history. The drought has affected the Mental health and wellbeing of the farmers and their families, including children. Council has engaged a wellbeing coordinator to assist the farmers with support agents and facilities available and assist the farming community with their long term farming activities.

The challenges, as a collective, have a ‘snow-ball effect’ in that they have impacted on the business community of Cowell. With not much money to go around, and the need to get medical assistance in areas out of Cowell has meant to make use of this time to purchase everyday items at the larger department stores in Whyalla and Port Lincoln, leaving the local businesses in a position of no sales.

Some of the ongoing and new positive attributes to the wellbeing of Cowell is:

- In 2018 Sea Transport and T-Ports constructed a grain terminal at Lucky Bay which is designed to export up to 750,000 tons of grain through the port which was constructed in 2005 to facilitate the Wallaroo to Lucky Bay ferry and enlarged in 2014 for the export facility. This facility is a multi-user port and can be used for the export of other commodities and import of products such as fertilizer. The barge for this facility was built overseas in 2018 and will be operational in 2019 along with the re-establishment of the ferry operation.
- The continued production of the Iron Ore mine at Iron Duke has had a great effect on the employment rate and, therefore, the retention of the younger population in Cowell. The families are taking advantage of the low-cost housing and utilising the Area School and local facilities.
- With Cowell being a relaxed, coastal town, the visitors/tourists are taking advantage of our environment. This has adding to the wellbeing of the community as a whole.
- The retiring community numbers are increasing, which means the need for the facilities to assist them to stay at home are being well utilized and supported.
- The completion of the towns Community Wastewater Management System (CWMS) has seen 63% of the total eligible household connections undertaken. The reclaimed water has been utilised in the watering of the town oval. We await with anticipation the results of the future water testing in the harbor and surrounding waters to truly see the positive effects of decommissioning the septic systems of old in the households of Franklin Harbour to keep the waters in the harbor in their pristine condition.

The community of Cowell has a ‘take care of each other’ attitude. This has assisted in keeping Cowell prosperous and, generally, healthy. The need for a permanent Doctor service and Medical Professional availability is paramount to the long-term success of the health of Cowell and Franklin Harbour.

## **REGIONAL POPULATION HEALTH PROFILE- KEY INDICATIONS FOR THE DISTRICT COUNCIL OF FRANKLIN HARBOUR**

### **Key Health Related Indicators for the Region-Immunisation**

Important implications of immunisation are to potentially decrease the spread of infectious diseases and, therefore, reduce the costs of healthcare and economic loss in the community.

Immunisation rates for Franklin Harbour were very good with the rates for infants at one year of age being 97.8%, which is 2.9% above the Regional SA average.

The rates for full immunisation at five years of age, although lower than one year, averaged 95.4% for Franklin Harbour which is 0.9% above the Regional SA average.

The rates for full immunisation for all children in Franklin Harbour was 5.1% higher than the overall SA average.

### **Key Health Related Indicators for the Region-Smoking and Pregnancy**

Smoking during pregnancy carries a higher risk of adverse outcome for babies both before and after birth. Conditions such as disability and development delays, childhood cancers, decreased lung function, increased respiratory illness, high blood pressure and obesity can effect children throughout adulthood.

Unfortunately, the results for Franklin Harbour are not available, however in the Public Health Area (PHA) of Cleve-Kimba-Franklin Habour it was reported that 8.3% for the number of pregnant women, who gave birth between 2012 to 2014, were smoking during pregnancy. The average Regional SA rate was 21.1%.

### **Key Health Related Indicators for the Region-Childhood Obesity**

For this data girls and boys between the age of 2 and 17 were assessed for the years 2014 and 2015.

Obesity in children can cause a range of physical and mental health problems and increase the risk of adulthood premature illnesses such as chronic diseases, disability and premature death. In 2017/18, it is estimated that more than one in four (28.4%) children aged between 5-17 years in South Australia were overweight or obese.

Unfortunately, this data for Franklin Habour is not available, however the Regional SA rate for males was 7.0% and females 7.2%. The metropolitan area comparison is at 6.6% and 6.7% consecutively.

For the PHA of Cleve-Kimba-Franklin Harbour it was estimated that 6.2% of male children and, also, 6.2% of female children were in this category.

### **Key Health Related Indicators for the Region-Adult Obesity**

The estimated adult obesity in the group was based on model estimates from the 2014-2015 National Health Survey. The estimated proportion was 34.2% for males and 38.1% for females in the Regional SA areas. It is estimated that over a third (35.6%) of South Australians aged 18 years and over were overweight and a further 30% were obese.

Once again, this information was not available for Franklin Harbour, however it was estimated that just over one third (34.1%) of adult males in the PHA of Cleve-Kimba-Franklin Harbour were obese.

### **Key Health Related Indicators for the Region-Daily Fruit Consumption in Children**

The consumption of adequate amounts of fresh fruit and vegetables is associated with good nutrition and better health. This includes lower rates of many cancers, coronary heart disease, stroke, hypertension, cataract, macular degeneration of the eye and type 2 diabetes. The current

recommended intake of fruit is between one and two servings each day for children aged 4-7 years, one to two servings each day for children aged 8-11 years and three to four servings each day for adolescents aged 12-18 years.

More than two thirds (68.0%) of children in the PHA of Cleve-Kimba-Franklin Harbour were estimated to have met the guidelines for daily fruit consumption compared to the Regional SA average was 66.4%.

### **Key Health Related Indicators for the Region-Daily Fruit Consumption in Adults**

These estimates were also based on the 2014-2015 National Health Survey. Regional SA results show that adults in the group were estimated to be 2.8% lower than the metropolitan average. The extent to which adults in the group met the daily requirement was 46.2%

Fewer than half (46.9%) of the adults in the PHA of Cleve-Kimba- Franklin Harbour were estimated to have met the guidelines for fruit consumption, a rate consistent with the level in Regional SA of 46.2%.

The estimated extent of physical inactivity among the adult population in Regional SA was 73.2% which was 5% higher than the average rate for whole South Australian region.

Being physically active improves mental and musculoskeletal health and reduces other risk factors such as overweight, high blood pressure and high cholesterol.

### **Key Health Related Indicators for the Region-Mental Health Problems**

An individual's mental health, like all aspects of health, is subject to change over the lifespan. Mental health issues can range from short-term issues such as anxiety and stress through to more serious clinical problems and psychosis. Most individuals experience some mental health issues at some time in their life. Mental illness can have a negative impact on individuals, families and carers with far reaching influence on social issues such as poverty, unemployment and homelessness along with discrimination and stigma.

In 2011, mental and substance use disorders accounted for 12.1% of the total disease burden in Australia. At the National Health Survey 2014-2015 mental health problems were estimated to have affected 19.5% of all South Australians.

As the rates for Franklin Harbour were not available, a summary could not be calculated. It was estimated that 18.7% of the PHA of Cleve-Kimba-Franklin Harbour male population, and 20.7% of the female population, were reported as having mental health problems.

The number of suicides in our District have been suppressed.

### **Key Health Related Indicators for the Region-Tobacco Smoking**

The estimated number of people aged 18 years and over who reported being a current smoker expressed as a rate per 100 population from the 2014-2015 National Health Survey was 15.9% for the PHA of Cleve-Kimba-Franklin Harbour. Regional SA smokers averaged at 18.0%.

### **Other Key Indicators for Franklin Harbour**

#### **Disability**

The likelihood of living with a disability increases with age. In Australia in 2009 the disability rate amongst 15-24 year old's was 6.6% and this progresses with successive older age groups with 18% for the 45-54 years of age group and 31% for the 55-64year old group.

In the 2016 census, when compared with the overall South Australian statistics, Franklin Harbour had 0.7% fewer per 100 people living in the community who reported as having a profound or severe disability. 2.7% of these were in the 0-64 years of age group and 11.5% aged 65 years and over.

One tenth (10.4%) of people in Franklin Harbour aged 15 years and over have provided unpaid care/assistance to a family member because of a disability, long-term illness or problems relating to old age.

### **Employment**

The relationship between unemployment and health is complex and varies for different population groups but there is consistent evidence from research that unemployment is associated with adverse health outcomes.

Unemployment rates in South Australia are highest amongst young people aged under 25 years of age and are generally higher in rural and remote areas than in urban areas. In the 2016 census, the number in Franklin Harbour is not available, however there were 2.3% more Regional SA people receiving Unemployment benefits than across the metropolitan areas.

There are substantially fewer people in the PHA of Cleve-Kimba-Franklin Harbour receiving unemployment benefits than in Regional SA (3.9 % and 8.6% respectively)

### **Drugs**

Drugs are an increasing problem in rural communities with distribution and availability being common place. Council internally has a zero-tolerance policy towards drugs and alcohol in the workplace. Council will continue to advocate for an improvement in stemming the flow of drugs into our district.

### **Children in Low-Income Welfare Dependent Families**

Children and young people living in families with inadequate income are at a greater risk of poor health and lower educational outcomes in the short and longer term. The Franklin Harbour numbers are unavailable, however one in eight (12.6%) of children under the age of 16 years in the PHA of Cleve-Kimba-Franklin Harbour were living in low income families, with 27.6% of all Regional SA children were living in low income families receiving welfare payments from Centrelink in June 2017.

### **Community Connectedness**

Nine out of every ten people in the group (94.1%) are estimated to be able to get community support in times of crisis in Regional SA. This average cannot be compared to the local average as this data is not available.

### **Personal and Community Safety**

This statistic addresses the number of people who feel safe walking alone in the local area after dark and expressed as a rate/100 population. Over half (57.6%) of the Regional SA population were estimated to feel safe or very safe walking in their local area after dark. This is above the metropolitan Adelaide figure of 49.7%.

### **Residential Aged Care**

Residential aged care facilities provide accommodation, personal support care and nursing support care services to people who can no longer manage to live in their own homes. Government spending on aged care is projected to rise significantly in the future.

The rate of residential aged care places in Franklin Harbour is not available. No recommendations or future foresight can be gained by not having the relevant data available.

### **Admission to Hospitals**

The rate of admission to the Cowell Hospital of residents was a total of 492 for the 2016/17 period. Cowell Hospital offers an acute and long term care facility with emergency and aged Care facilities

attached. At the moment there is no permanent doctor in Cowell with only visiting doctors, in a private practice, 2 days per week and a doctor from Cleve visiting the hospital as required. All emergency patients are seen by the nurse on duty and assessed.

### **Home and Community Care Program**

This data is determined by the number of Home and Community Care Program clients whose status is recorded as living alone at the date of the most recent assessment, as a proportion of the total client population (2014/15).

In Regional SA, HACC clients in the group that are living alone is 31.3% compared with the whole of South Australia at 35.8%.

Franklin Harbour statistics were not available. Just over one third (36.9%) of the PHA of Cleve-Kimba-Franklin Harbour HACC clients were living alone.

### **Other points of some interest are:**

There are 17 people in Franklin Harbour (1.3% of the population) who were born overseas in a predominantly non-english speaking country.

1.7% of Franklin Harbour households were affected by household crowding. This is identified if a dwelling is either under or over utilized and requiring extra bedrooms, taking into account the number of residents, their relationship to each other, age and sex.

Mortgage stress is effecting 6.2%, and rental stress 19.2%, of all low-income households in Franklin Harbour. Within the PHA of Cleve-Kimba-Franklin Harbour, 8.4% of households are receiving rental assistance from the Australian Government.

Of all the households in Franklin Harbour, 4.1% did not have a motor vehicle.

10.9% of the PHA of Cleve-Kimba-Franklin Harbour population reported that their state of health was either good, very good or excellent. It was also noted that 4.1% reported the prevalence of diabetes.

The median age of death in Franklin Harbour males is 80 years and females is 87 years. This is 2-3 years higher than the Regional SA age.

Almost three quarters of Franklin Harbour households reported that someone had accessed the Internet in 2016

## **REGIONAL PUBLIC HEALTH PLAN**

This Regional Public Health Plan has been devised supporting the four strategic priorities of the vision for South Australia: a Better Place to Live:

- **Promote:** build stronger communities and healthier environments
- **Protect:** against public and environmental health risks and responds to climate change
- **Prevent:** chronic disease, communicable disease and injury
- **Progress:** strengthen the systems that support public health and community wellbeing

## **PROMOTE: BUILD STRONGER COMMUNITIES AND HEALTHIER ENVIRONMENTS**

- Provide information to community members and organisations on the wide range of State & Commonwealth Government and non-government organisations programs and services
- Work with the LGA and relevant Federal and State agencies to ensure funding for consistent Commonwealth Home Support and Home Care Packages service delivery
- Work with relevant Federal and State agencies to promote and facilitate planning and related funding for Aged and Retirement Housing
- Concern with retaining local health services in the local area, not be centralised in Adelaide. Council will work with EFNLHN and private providers to ensure the community has access to appropriate health services
- Provide support programs and community participation opportunities which build communities
- Promote the engagement of volunteers from within our community. This is essential to the provision of a vast range of services and benefits. The scarcity of resources and the increasing community expectations of improved quality of life and amenity mean that more voluntary effort will be required to deliver these expectations. Volunteerism also provides a welcome social outlet for community building and nurturing community pride. The retention, recruitment, support and recognition for volunteers is a high priority for Council
- Council has many public assets that were achieved or created through public giving or philanthropy. Over time this generosity has enriched the community and made it a better place. Council encourages this practice to continue and grow
- To recognise, protect and enhance, for current and future generations, the unique and diverse open space environment within the Council area
- Continue promoting the design and development of open space that reflects local ambience, site characteristics, the need and aspirations of the user groups and creates safe environments
- Continue partnerships with community groups and other levels of government in the development and promotion of particular open space areas including recreational trails, National Parks and other reserves that provide opportunities for multiple recreational experiences and wild life corridors
- Council will, with the assistance of such groups as the Franklin Harbour Community Development Group and other community groups, promote the availability and use of open space throughout the region
- Participate in local emergency management and response, building community resilience and coordinates recovery efforts
- Council's Safe Environment Policy will be communicated to all relevant audiences to ensure awareness and understanding of Council's commitment to ensuring a safe environment. This will include Council Members, staff, volunteers, contractors, consultants, parents, carers and children where relevant
- Council, in accordance with its Safe Environment Policy, will identify and assess potential sources of harm and take steps to decrease the likelihood that harm will occur to children, young people and other vulnerable people who use Councils services
- Council will take all reasonable steps to ensure that it engages the most suitable and appropriate people to work with and provide services to children and other vulnerable

people. Applicants for prescribed positions will be screened for their suitability to provide services. Screening will involve criminal history screening, interviews, referee reports, checking qualifications and previous employment history in working with children

- Council will promote the involvement of children, young people and other vulnerable people in service development planning where relevant, and inform them of their rights and how to access grievance procedures where relevant
- Council will ensure that staff, volunteers, contractors and consultants providing services to and/or working with children are aware of and are trained, and appropriately supported to report any suspicion of abuse or neglect on reasonable grounds
- Work with the LGA to ensure the development of a strategic direction in providing services to vulnerable groups during extreme weather events
- Councils will provide a road network that is fit for purpose and sustainable such that it provides for safe and efficient movement of people and goods, enhances economic viability and improves the quality of life for people that travel in the district.



## **PROTECT: AGAINST PUBLIC AND ENVIRONMENTAL HEALTH RISKS AND RESPOND TO CLIMATE CHANGE**

- Councils are of the opinion that the uncertainty in climate change predictions should not be a reason to delay planning for a warmer and water constrained future.
- Multiple university-based research projects now prove that there has been no increase in relative sea level rise in the last fifty years in the District of Franklin Harbour and its coastline facing the Spencer Gulf. Efforts to build seawalls to defend our coast line will continue to be a priority in the future development of the district.
- Council understands that responding to climate change is a multi-dimensional challenge that is subject to considerable uncertainty as our knowledge about climate change is refined with the benefit of new observations and insights.
- Council will consider a range of possible adaptation measures that might be undertaken at a local level including structural and technological, planning and legislation related, internal management, research and educational/behavioral/cognitive.
- Council has considered that the likely climate change-related challenges will have a direct impact on socio-economic wellbeing on our local community and can affect road/pavement construction and maintenance, buildings, community/workplace health, emergency/bushfire management, biodiversity, wastewater and water supply.
- Work with the LGA and relevant Federal and State government agencies to ensure sector wide understanding of the potential impact of climate change on public health requirements, and to secure ongoing funding to meet community needs
- Partner with relevant stakeholders, including the LGA and State Government, to advocate for appropriate research on the impacts of climate change on the viability of industries that Council may rely on for ongoing sustainability.
- Council will reduce legal risks through proactive approaches bases on consulting our community and coordinating efforts with other organisations.
- Council has considered the potential impacts of climate change for cropping, pasture and grazing viticulture, horticulture and aquaculture.
- Work with SA State Emergency Service/Country Fire Services and other authorities to ensure bushfire management planning policies meet changing bushfire conditions.
- Will ensure bushfire risk management is undertaken with a focus on open space areas that prevent present public safety implications.
- Review and update asset management plans to include the impacts of climate change as a key strategic planning initiative.
- Review outdoor staff personal protective clothing to ensure safety and comfort during extreme weather conditions.
- Work with relevant stakeholders and identify changes to vector-borne diseases due to increase frequency in extreme weather conditions.
- Encourage the establishment of sources of alternative energy, especially solar, wind and Hydrogen.
- Council will endeavour to obtain funding from government agencies to undertake specific local projects.
- Council will incorporate a program to update the energy and water efficiency of Council

owned buildings into the review of the Council asset management plan.

- Provide greater shade in our community through green infrastructure projects considering future raised temperatures and extreme heat.
- Will include provision of shade structures in design of new council recreational facilities.
- Continue to provide attractive and comfortable outdoor environments that encourage use by providing safe places that are shaded in summer and protected in winter.
- Council will provide accessible air-conditioned public facilities e.g. libraries, encourage increased use of insulation in new buildings and encourage the use of passive cooling systems, improved use of thermal properties of building materials and reduce solar heating using recessed windows, roof overhangs and shades.
- Encourage the use of recycled water where possible, using alternative supplies of water such as rainwater tanks and reclaimed effluent.
- Encourage the use of plants in parks and open spaces that are indigenous to the local area
- Council can request for prescribed burns, especially on Council property.
- Preparation and continuous improvement of community programs to support the agricultural sector in times of long term drought.



## **PREPARE: CHRONIC DISEASE, COMMUNICABLE DISEASE AND INJURY**

- Administer public health regulation (e.g. food safety, cooling tower and warm water system monitoring of specific businesses, waste control, mosquito control).
- Promoting consulting, communicating and supporting policies, guidelines and Codes of Practices from the Department of Health and Ageing
- Enforcement of the South Australian Public Health Act
- Investigate and answer all enquiries or complaints
- Approve all wastewater applications and conduct inspections
- Undertake annual premise inspections to comply with the Act
- Monitor auditor reports and compliance requirements for warm water systems and cooling towers
- Enforcement of the Food Act
- Undertake annual food premise inspections to comply with Food Safety Standards
- Monitoring food safety related incidences and initiating appropriate responses. Conduct inspections to determine causes of food borne diseases
- Provide result of each food premise/business inspections to owner/occupier
- Supporting, consultation and communication with food businesses on food safety issues
- Monitoring and taking appropriate action to ensure food recall for health and safety reasons is removed from sale
- Monitor food auditors reports and ensure non-compliance issues are rectified
- Ensure Councils enforcement on matters relating to WHS Legislation, Regulations, Codes of Practice and Safe Work procedures to facilitate Council compliance with its WHS obligations and responsibilities
- To develop, implement and review Council's Risk Management policies, plans, programs, systems and procedures to facilitate the application of best strategies to minimise/respond to risk in all Council operations
- In accordance with Council's Strategic Management Plan to ensure the provision of quality public facilities and amenities for the ratepayers and the community including the implementation of systems for the cost effective management of Council's infrastructure assets including parks and gardens and reserves, cemeteries, public buildings and community land
- Maintaining a safe working environment for all Council staff, contractors, the public and users of Council's community facilities
- Ensure the delivery of a professional, timely and quality WHS service in responding to the requirements of the Council's external and internal customers
- Support the provision of immunisation in Council's area
- Reduce reliance on Council's landfill sites
- Increase participation rates for recycling
- Implement waste water management strategy in accordance with Environmental

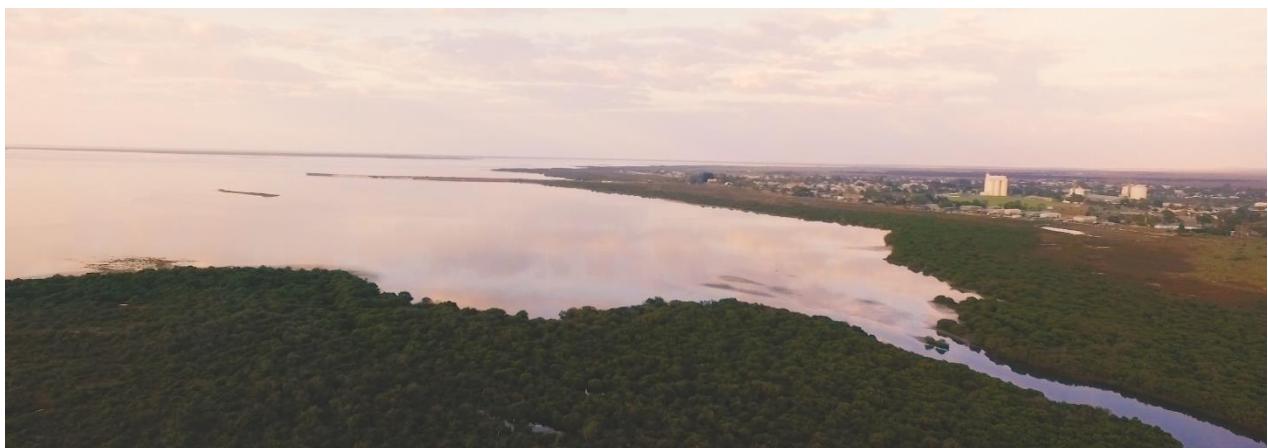
### Protection Authority requirements

- To administer, monitor and document Council and community compliance with environment and related legislation
- To plan and contribute to community awareness programs related to responsible animal management



## **PROGRESS: STRENGTHEN THE SYSTEMS THAT SUPPORT PUBLIC HEALTH AND COMMUNITY WELLBEING**

- Council recognises the existence and significance of strong environmental values within the district and the importance of conserving our natural resources for the continuing enjoyment of future generations
- Council to continue to represent communities needs and aspirations to relevant State and Federal Government agencies
- Provide community infrastructure and support (e.g. parks and gardens, recreation facilities)
- Council has dedicated additional resources to the provision and maintenance of parks and gardens
- Promote the establishment of community gardens
- Provide safe and accessible areas for active recreation and bicycle paths for improving opportunities for residents to be less physically inactive
- Establish the districts as bicycle friendly through the development of trails and education of all road users
- Council will continually upgrade signage and interpretative information about pedestrian / cycling trails, loops and links
- Promote the most important risk factors linked to preventable disease in Australia which are tobacco smoking, physical inactivity, excessive alcohol use, poor nutrition and overweight / obesity
- Incorporate the use of the new tobacco control powers under the Tobacco Products Regulation Act (1997) relating to outdoor areas and events by applying for a total ban or making events smoke free
- Promote and educate public on conditions of dry zone areas
- Review local government's participation in State Government initiatives ,e.g. Cancer Council SA's Sunsmart program etc. to explore opportunities for integration into Council operations.



## **COUNCILS MAJOR INITIATIVES AND PROGRAMS**

### **District Council of Franklin Harbour**

#### **Cowell Cottages**

Council has taken over ownership & management of the Cowell Cottages. Council is interested in expanding the number of available cottages as the population is aging and it is felt there will be a demand in the near future.

#### **Community Wastewater Management Scheme**

Council has completed the installation of a CWMS system. This Scheme incorporated the re-use of treated wastewater by irrigation of the town oval.

#### **Bicycle/Boardwalk**

In conjunction with the Franklin Harbour Community Development Group, Council is in the process of applying for funds to develop a project to construct a bicycle/boardwalk from the Esplanade in Cowell. This is a large project, but it is felt that the provision of such a facility will encourage more people to exercise & enjoy where we are.

#### **Improvement of ablution facilities in Cowell, Lucky Bay and Port Gibbon**

Cowell is an important stop off point for tourists traveling between Whyalla and Port Lincoln. Council is embarking on a project to upgrade services at all of those sites with shower and toilet facilities.

#### **Cowell Foreshore Upgrade**

Council has commenced upgrading the foreshore. Incorporated in the plan is a marina and support facilities and restaurants, a skating facility, outdoor exercise equipment and further development of a water playground, as well as the usual Bar-B-Q facilities and lawn areas.

#### **Expansion of Boat Ramps**

A new boat ramp at Lucky Bay, four Mile and the Boat Shed are planned. New ramps will provide safe access for community and visitors to get out on the water.

### **Eastern Eyre Health Services**

The catchment area for the Eastern Eyre Health Service contains Cleve, Kimba and Cowell Hospitals located between approximately 500 - 560 kilometres from Adelaide and 110 - 150 kilometres from the Whyalla Country General Hospital. Eastern Eyre Peninsula experiences a high degree of isolation in relation to local and intrastate transport options.

The Eastern Eyre Health Service in conjunction with the Eastern Eyre Health Advisory Council Inc undertook a needs analysis process which identified priority areas including:

- Attract and retain a strong health and medical workforce.
- Maintain good infrastructure, business systems and equipment to sustain services locally.
- Primary health care principles to underpin service delivery.
- Clinical care to be provided as close to home as possible.

- Older people to continue to receive coordinated care to remain living at home or in residential care within Eastern Eyre.
- Reduce the impact of remoteness and isolation from other acute services.
- Respond to an increasing rate of chronic disease and prevalence of lifestyle and behaviour risk factors.
- Opportunity to increase access by aligning closely with the development of a Country General Hospital at Whyalla.

With Cowell having a growing population, the lack of Doctors / locum Doctors and other Medical Professional services is placing an unreasonable strain on the local hospital staff and the Flying Doctor. Cowell residents are having to travel as far as Port Lincoln or Whyalla, or even Adelaide, to see doctors. This is also having a negative effect on their buying patterns which is hurting our main street traders. Council will continue to work with key stakeholders to attract and retain a resident GP as well as supporting other locally based health professionals.

### **Eastern Health & Aged Care**

Eastern Eyre Health & Aged Care is governed by Eyre and Far North Local Health Network and is committed to providing high quality health care and supporting people living in the district council. Council during the period of the last plan sought to obtain additional hostel licenses to support an MOU with Mathew Flinders. This is yet to come to fruition.

### **Local Government Public Health Plans and Country SA Primary Health Network**

In response to the South Australian Public Health Act 2011, Country SA PHN has registered with the SA Minister for Health, to become a Public Health Partner Authority for all Local Governments in its region.

As a Partner Authority, Country SA PHN is able to provide Local Governments with local population health statistics, be involved in planning, consultative forums and offer partnership in developing health related activities where resources are available. Country SA PHN also offers membership to Local Health Cluster organisations as an avenue to having a local voice in addressing health issues.

## REFERENCES

District Council of Franklin Harbour, Strategic Management Plan 2017 – 2021

Eastern Eyre Health Advisory Council, Eastern Eyre Health and Aged Care and Eastern Eyre SA Local Health Network Eastern Eyre 10 year Local Health Service Plan, 2011

SA Health. Public Health Act 2011, Government of South Australia Adelaide

SA Health. South Australia: a better place to live (Consultation draft). Government of South Australia, Adelaide, 2013

University of Adelaide. Population Health Profile of the Upper Eastern Eyre Peninsula Local Government Area to assist in the preparation of the Regional Public Health Plan. Adelaide, 2013

Health Care Act:

<http://www.countryhealthsa.sa.gov.au/LinkClick.aspx?fileticket=w7FYc3M4hJO=&tabid=672>

HAC Constitution

<http://www.countryhealthsa.sa.gov.au/LinkClic.kaspx?fileticket=wYRfbByB/Yc=&tabid>

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## **Appendix A: Council Assets Promoting Environmental Health and Healthy Lifestyles**

	<b>Franklin Harbour</b>
Community Wastewater Management Schemes	2
Swimming Pools	0
Playgrounds	3
Halls/Sporting Clubs	5
Recreation Grounds	1
Public Toilets	4
Landfills	1
Information Centre	1
Visitor Facilities	2
RV Park	1
Skate Park	1
Walking Trail	1
Gymnasium	0
Estuary Boardwalk	1