



## ORAN PARK TOWN

# HIGH-LEVEL STRATEGIC HEALTH SERVICES NEEDS ASSESSMENT SUMMARY REPORT

MARCH 2020

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## THE OPPORTUNITY\_VISION

Oran Park Town is a unique urban hub for Sydney's south west growth sector. When completed in 2040 it will be one of the strategic centres of Camden and the wider south west region. In 2006, Oran Park Town was amongst the first precincts to be released by NSW government for detailed precinct planning. To date it has been one of Sydney's fastest growing towns and a cornerstone of the New South Wales Government's South West Priority Growth Area.

An innovative master planned community, Oran Park Town will be an international exemplar centre for health and wellbeing founded on the principles of community pride, well-being, healthy living, research and educational excellence.

Greenfields Development Company's (GDC) vision is to

*"provide centralised and integrated health services that continually improve and promote the health and wellbeing of the community of Oran Park, with connectedness of services and community remaining at the forefront."*

The strategies implemented by GDC have revitalised and established a relationship between the built environment and health services and professions so that together they create a town that supports people being healthy in their everyday lives.

Oran Park is a town that is and will continue to be planned, designed, developed and managed to promote and protect the health of all people in the community. GDC is committed to enhancing the wellbeing of Oran Park Town residents and the wider community through facilitation of access to the required healthcare services as the population grows.

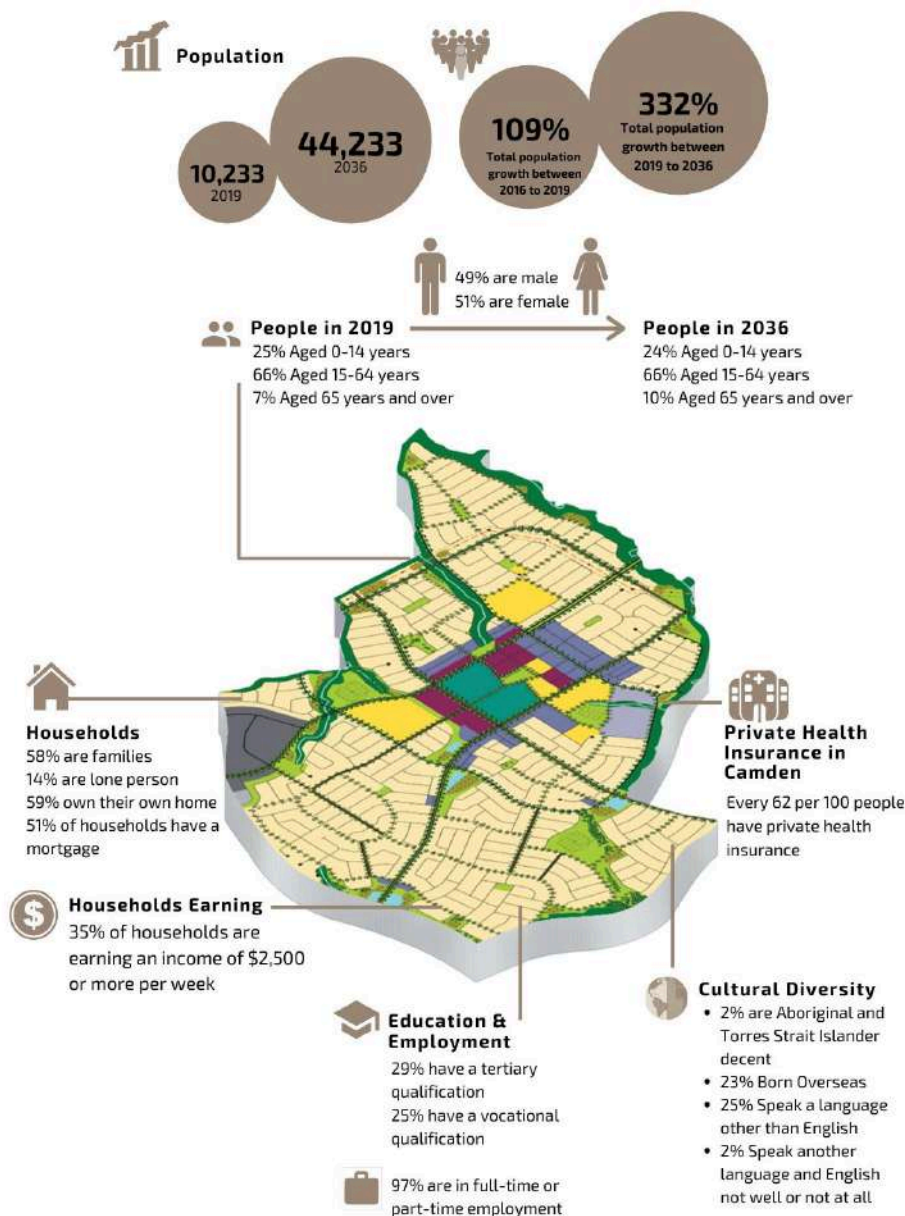
# THE OPPORTUNITY

## POPULATION AND DEMOGRAPHY

For the past 10 years, Oran Park Town has experienced explosive population growth that has been enabled by its unique sole landowner and single developer model.

In the 2011 Census, 125 people were reported to be residing in Oran Park Town. By the 2016 Census, the total population was reported at 4,891 people, demonstrating a growth rate of over 3,800%. The outstanding growth trajectory experienced within Oran Park Town has continued with the current population of Oran Park Town being 10,233 people, signifying a 109% growth rate from 2016. By 2036 the total population of Oran Park Town will be 44,233.

To date GDC has consistently executed their ambitious development program for both residential and commercial portfolios, providing an exceptional track record for delivering this higher than forecasted growth for Oran Park Town.



Oran Park Town will also be impacted by the wider population growth and changes attributed to development and investment in the Western City District, the Western Parklands City and the Western Sydney Aerotropolis. It is anticipated that these new urban regions will grow in population from 740,000 in 2016 to 1.1 million by 2036, and to well over 1.5 million by 2056.

Significant growth is also expected in the number of people visiting this region on a regular basis, such as for work, education or leisure. In 2016, 12.4 million visitors came to the Western Sydney region with this to rapidly increase as the region develops.

In response to this growing demand, GDC are committed to working collaboratively in a partnership with health service providers across both public and private health systems to ensure seamless and integrated access to health services that meets the needs and expectations of Oran Park Town residents and the wider community.

# THE OPPORTUNITY\_

## POPULATION AND DEMOGRAPHY

On average over the next 20 years, Oran Park will be characterised as a young population, however, as the community matures so will the increase in older residents within Oran Park, with considerable growth expected in the over 65 years age cohort by 2036.

Combining population with other demographic features, Oran Park Town is currently characterised by:

- A high proportion of young families
- High proportion of residents engaged in either full time or part time employment
- Predominately home owners, with over half having a mortgage
- Considerable proportion of the households earning more than \$2,500 per week
- Higher socioeconomic advantage compared to Camden
- Over half of residents have either a vocational or tertiary qualification
- Increasing cultural diversity with a quarter of the community speaking a language other than English at home
- The Camden LGA Private Health Insurance Rates are above the NSW state average.



These characteristics show that the current and future population of Oran Park Town will be characterised by positive socioeconomic factors. This highlights that the residents of Oran Park Town are well positioned to access a broader range of services required to maintain their health and wellbeing.

The health status, including risk behaviours, for the Camden LGA was utilised to assist with determining the health status of the Oran Park community. Recognising that while Oran Park currently has a younger demographic profile, ageing of the population is inevitable, and the health burden of older residents is likely to be experienced within Oran Park Town as this community continues to grow and mature.

## THE OPPORTUNITY POPULATION AND DEMOGRAPHY

Over the past five years, the following were identified for the community of Camden:

- Life expectancy for males was 81.1 years and 84.6 years for females
- Hospitalisations attributed to obesity were at a rate of 857 per 100,000 population, have increased by 8% and are higher than the overall NSW rate
- Potentially preventable hospitalisations for all conditions have increased by 18%, at a rate of 2,516 per 100,000 population and higher than the overall NSW rate
- Diabetes-related hospitalisations, including gestational and diabetes in pregnancy, were at a rate of 179 per 100,000 population, had increased by 84% and were higher than the overall NSW rate
- Circulatory disease hospitalisations were at a rate of 1,739 per 100,000 population and have decreased
- Hospitalisations related to chronic obstructive pulmonary diseases have increased by 10%, at rate of 198 per 100,000 population
- Falls-related hospitalisations have increased by 5% to a rate of 630 per 100,000 population
- Urogenital, breast and bowel cancers were the most common cancers
- While cancer incidence rates for men had decreased by 30% over the past five years, rates for females had increased by 9%
- Dementia related hospitalisation rates at 1,779 per 100,000 population have remained higher than the overall NSW rate at 1,616 per 100,000 population.

With higher rates for some chronic conditions, such as diabetes, respiratory and potentially preventable hospitalisations, planning and developing health services that are delivered closer to home, outside the hospital setting and focused on early intervention and prevention are required to meet the health concerns for the residents of Oran Park Town and the wider Camden community.

To ensure holistic health service provision now and into the future, specific health services, relating to older people, people with mental health conditions and those experiencing disability (physical and mental), are also to be considered, developed and expanded in Oran Park Town.

To future proof health service provision for Oran Park Town, other factors, such as climate change, that may impact the health and wellbeing of the Oran Park Town residence will continue to be assessed and strategies developed by GDC.

GDC acknowledges that keeping the community healthy is a task that requires a whole-of-system approach. This needs collaboration and coordination of service providers and decision makers from health, social, housing, transport, environmental services and many other sectors (irrespective of organisational or geographic boundaries) playing a vital role. GDC is continuing its consultation and collaboration with current and future partnering organisations to ensure the implementation of this approach.



## THE OPPORTUNITY CURRENT AND FUTURE HEALTH SERVICES

Through the commissioning of this report, GDC has developed a high level strategy to effectively plan health services over the short (2-5 years), medium (5-10 years) and long term (10-20 years). This will enable health service delivery that is responsive to the health needs of the Oran Park Town community. Such planning has considered the community, as well as current and future public and private health service provider's directions and priorities. It has also sought guidance and the views and expertise of other service partners, as well as relevant government agencies and private organisations.

Table 1 demonstrates the current and future health service supply requirements for Oran Park Town, as well as 3km, 5km and 10km radiuses of Oran Park Town service catchments.

South Western Sydney Local Health District's (SWSLHD) current vision and long standing direction is the development of the Integrated Health Neighbourhood (IHN). The focus of this model is to provide care closer to home and reduce the need for hospital admissions. IHNs incorporate hospital-based services, general practice and primary services, community health, health promotion, telehealth, social and welfare services, integrated health hubs and private service providers.

An IHN has been designated for the Macarthur region, with the Oran Park Town Integrated Health Hub (IHH) forming a crucial component of the Macarthur IHN model.

In 2015, SWSLHD commissioned the first stage (Stage One) of the IHH, the Oran Park Family Health (OPFH), which is an Integrated Primary Care Centre (IPCC) model.

The Oran Park Town IHH will be undertaken in a three (3) stage hierarchical development of services. This includes:

1. Stage One, with services focused on general practice-led, team-based primary care, with key allied health specialties, child and family nursing, pathology and medical imaging.
2. Stage Two will include the prioritisation of visiting medical specialists on a sessional basis aimed at drawing on a broader service catchment and becoming viable once the service population exceeds 4,000 registered patients.
3. Stage Three will represent a large and diverse facility, incorporating matured services through Stages One and Two, residential medical specialist suites, day surgery, ambulatory care clinics, dentistry and advanced diagnostics. This Stage is considered to become viable once the service population exceeds 18,000 registered patients.

The current OPFH service reflect Stages 1 and 2 of the planned model. Stage Three will be a large service, providing management of low acuity and ambulatory care conditions, as well as chronic disease management, preventative health and hospital avoidance initiatives and complementing the care provided by Camden and Campbelltown Hospitals. When completed, it will deliver a new range of clinical services traditionally delivered from hospital facilities.

This model provides a unique opportunity by supporting linkages for providers with the broader role of publicly-funded Community Health, including specialised teams, as well as population-based and networking activities with other relevant government agencies and social welfare services.

	Oran Park Town					3km					5km					10km				
	2019- Actual <sup>α</sup>	2019- calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019- Actual	2019- calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019- Actual	2019- calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019- Actual	2019- calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>
Total Population	10,233	10,233	14,233	24,233	44,233	17,011	17,011	26,217	37,474	60,398	37,212	37,212	52,510	68,733	118,178	138,248	138,248	160,712	204,636	348,740
Primary Care and Specialist <sup>β</sup>																				
GPs (FSE <sup>δ</sup> )	11	11	15	25	46	20	18	27	39	63	52	39	54	71	122	41	143	166	212	361
Nurses <sup>ε</sup>	6	117	163	277	506	n.d	195	300	429	692	n.d	426	601	787	1,353	n.d	1,583	1,840	2,343	3,993
Medical/Surgical Specialists	0	15	20	35	63	0	24	37	54	86	4	53	75	98	169	13	198	230	293	499
Allied Health <sup>β,ζ</sup>																				
Chiropractors	1	2	2	4	7	1	3	4	6	9	2	6	8	11	18	7	21	25	32	54
Dentists <sup>η,θ</sup>	1	6	8	14	26	2	10	15	22	35	8	21	30	40	68	17	80	93	118	201
Dietetics <sup>ι</sup>	1	5	6	11	20	1	8	12	17	27	5	17	24	31	54	15	63	73	93	159
Occupational Therapists	0	5	6	11	20	0	8	12	17	27	6	17	24	31	53	7	62	72	92	157
Optometrists	1	2	2	4	8	1	3	4	6	10	3	6	9	12	20	12	24	27	35	59
Pharmacy <sup>κ</sup>	1	9	13	21	39	2	15	23	33	54	8	33	47	61	105	22	123	143	182	309
Physiotherapists	3	9	13	22	41	1	16	24	34	56	8	34	48	63	109	21	127	148	188	321
Podiatrists	1	2	2	4	7	1	3	4	6	9	2	5	8	10	17	11	20	24	30	51
Psychologists <sup>λ</sup>	1	9	13	22	39	1	15	23	33	54	5	33	47	61	105	23	123	143	182	310
Speech Pathology <sup>μ</sup>	2	5	6	11	20	3	8	12	17	27	5	17	24	31	54	12	63	73	93	159
Diagnostic Service <sup>β</sup>																				
Pathology (collection centres) <sup>μ</sup>	1	5	7	12	22	2	9	13	19	30	11	19	26	34	59	31	69	80	102	174
Radiology (centre)	1	n.d	n.d	n.d	n.d	1	n.d	n.d	n.d	n.d	7	n.d	n.d	n.d	n.d	17	n.d	n.d	n.d	n.d
Xray (units)	1	2	2	4	8	1	3	5	7	11	n.d	6	9	12	21	n.d	24	28	36	61
Ultrasound (units)	1	4	5	9	17	1	7	10	14	23	n.d	14	20	26	45	n.d	53	62	78	134
CT (units)	1	1	1	2	3	1	1	2	3	4	n.d	3	4	5	9	n.d	10	12	15	25
MRI (units)	1	0	0	0	1	1	0	0	1	1	n.d	1	1	1	2	n.d	2	3	3	6
Public and Private Hospital Activity <sup>ν</sup>																				
Same Day Public Admissions	n.d <sup>ξ</sup>	1,398	1,944	3,310	6,042	n.d	2,324	3,581	5,119	8,250	n.d	5,083	7,173	9,389	16,143	n.d	18,885	21,953	27,953	47,638
Overnight Public Admissions	n.d	1,207	1,679	2,859	5,219	n.d	2,007	3,094	4,422	7,127	n.d	4,391	6,196	8,110	13,945	n.d	16,313	18,964	24,147	41,151
Same Day Private Admissions	n.d	1,226	1,705	2,903	5,299	n.d	2,038	3,141	4,489	7,236	n.d	4,458	6,291	8,234	14,158	n.d	16,562	19,253	24,515	41,779
Overnight Private Admissions	n.d	490	682	1,161	2,119	n.d	815	1,256	1,795	2,893	n.d	1,782	2,515	3,292	5,661	n.d	6,622	7,698	9,802	16,705

TABLE 1: Current and Future Health Service (Public and Private) Supply for Oran Park and the Three Key Service Catchment, 2019-2039  
Source: AIHW, 2013; 2016, 2018; 2019; Australian Government, 2018; Australian Medical Association (AMA), 2019; DPIE NSW 2019 Population Projections, 2019; GapMaps, 2019; Google, 2020.

Notes

- <sup>α</sup> The values displayed in 2019-Actual columns represent services due to variability in the identification of individual practitioners/unit numbers (FTE) at the service level.
- <sup>β</sup> Actual and projected values includes practitioners and units providing services within public and private health sectors including within hospitals and community as well as private practices.
- <sup>γ</sup> Projected values, unless stated otherwise, are based on Full-Time Equivalent (FTE) (standard measure based on 38 hours a week).
- <sup>δ</sup> For GPs for 2019 Actuals, is based on practitioner number. While, 2019-Calculated, 2021, 2026 and 2036, values are counted as Full Service Equivalent (FSE) (a measure based on 37.5 hour working week). Source: AMA, 2019.
- <sup>ε</sup> For Nurses for Oran Park Town 2019-Actuals, three are within the primary care service, two providing public child and family nursing services as part of the LHD and one providing Karitane child and family services. This value is based actual practitioners as compared to service in Note <sup>α</sup>.
- <sup>ζ</sup> The data for the allied health professions indicated below are informed from the annual registration process, together with data from a workforce survey that is voluntarily completed at the time of registration to create the National Health Workforce Dataset (NHWDS). Data in the NHWDS includes demographic and employment information for registered health professionals. The health professionals may be an employee or self-employed within a public and/or private organisation. It may include allied health professionals who hold provisional registrations and employed within clinical and/or non-clinical roles such as teaching, research and consultancy.
- <sup>η</sup> For Dentists for Oran Park Town 2019-Actuals, eight dentists were identified to be servicing both an Oran Park clinic and Harrington Park clinic.
- <sup>θ</sup> Excludes dental prosthetists, dental hygienists, oral health therapists and dental therapists.
- <sup>ι</sup> Included modelled estimates based on overall allied health professions rate per 100,000 as indicated by AIHW. (AIHW, 2013; 2018)).
- <sup>κ</sup> includes registered pharmacists only.
- <sup>λ</sup> includes Clinical psychology, counselling psychology, forensic psychology, clinical neuropsychology, organisational psychology, sport and exercise psychology, educational and developmental psychology, health psychology and community psychology.
- <sup>μ</sup> modelled estimate utilised due to rate per 100,000 not determined.
- <sup>ν</sup> Public and Private Hospital activity included public acute, public psychiatric, private free-standing day hospital facilities and those coded as other private hospital including private psychiatric hospitals.
- <sup>ξ</sup> n.d indicates that not determined, given that practitioners and/or services could not be confirmed within data validity parameters for the specific catchment groups.  
This does not include outreach services provided by public and/or private services/operators.

## THE OPPORTUNITY\_ CURRENT AND FUTURE HEALTH SERVICES

The Oran Park Town IHH/OPFH is also part of the NSW Government HealthOne program, with funding allocated for an information and communications technology (ICT) system. As part of this program, OPFH is being supported to develop a virtual integration model, including linked information and communications technology (ICT) systems for all staff and service partners. Work is currently being undertaken to develop an interoperable ICT platform. This platform will provide a cross-enterprise document sharing (XDS) system that will support safe, real-time sharing of electronic clinical information between the providers' range of software applications.

Currently, there is a general practice-led primary care service, MyHealth Oran Park, within the Oran Park Podium. This service has 11 individual GPs, 2 nurses, and 3 allied health practitioners. This is co-located with SWSLHD IHH, Karitane Early Parenting clinic and a community Pharmacy.

Other health services provided within Oran Park Town include twelve allied health services, such as physiotherapy, dietetics, chiropractor, podiatry, speech and psychology. Also, there is one pathology collection centre and one medical imaging service, expected to be operational by mid-2020

The MyHealth Oran Park services are experiencing increased demand, leading to long wait times, and overcrowding in waiting rooms for the existing 11 GPs. This has resulted in Oran Park residents having to seek care outside of Oran Park Town. MyHealth Oran Park has been operating extended hours to try and meet this demand. Despite this strategy, the current supply of GPs for the community is struggling to meet the demand. By 2021, the estimated supply requirement for the projected population is 15 Full Service Equivalent (FSE) GPs.

Karitane's Early Parenting Clinic is also at capacity and will require expansion of their services to meet the current and forecasted increased demand. Similarly, SWSLHD have also outlined that due to rapid growth the centre is now operational 7 days a week for extended hours and other allied health practitioners have been engaged on a sessional basis.



## THE OPPORTUNITY CURRENT AND FUTURE HEALTH SERVICES

Recent trends have identified that Emergency Department (ED) presentations, for semi-urgent and non-urgent ED presentations, to Campbelltown Hospital accounted for 47% of all ED presentations in 2017/18. This also presents an opportunity for primary health care providers to provide services locally to capture this proportion of health service activity and ease the burden on local public services.

With no medical and/or surgical specialists within a 3km radius of Oran Park Town, opportunities exist for specialists/consultants to establish a service within Oran Park Town, including a hub and spoke model of care with the current public and private services located in Macarthur.

Day surgery and private hospitals support the public health system in their ability to provide care to residents. There are no private health service facilities within a 10km radius of Oran Park Town. National trends have indicated that delivery of same day private activity has increased while overnight private services are declining. This creates a potential for day medical, surgical and procedural services within the medium to long term for Oran Park Town.

The estimated hospital activity indicates the likely number of hospital admissions that would be expected based on average current hospital admission rates. As there are no existing public or private hospitals within Oran Park town, this estimate represents the potential additional burden on the surrounding existing public and private health services.

In addition, with Camden LGA rates for a number of procedural and surgical admissions in private hospitals higher than the NSW rates, there is a potential market for private health service delivery within Oran Park Town. This is supported by higher rates of private health insurance coverage exhibited by Camden LGA residents as compared to NSW, with Oran Park residents mirroring this trend. This provides opportunities for locally based services that provide services to a wider catchment for procedures such as ear nose and throat, ophthalmology, knee replacement and colonoscopy.

As per current GDC planning, there will be two Residential Aged Care Facilities (RACFs) in Oran Park supplying up to 324 beds by 2021. Projected calculations demonstrated that an additional 75 places for people aged over 70 years will be required by 2036.

Over the next 20 years, the estimated supply requirements for all health service categories within Oran Park Town and the wider service catchments will increase. This is primarily driven by the considerable growth in population within Oran Park town and the surrounding 3km, 5km and 10km radius catchments. By 2036, the health service supply requirements, within public and private sector, for Oran Park Town will be 46 FTE GPs, 227 FTE allied health practitioners and personnel (e.g. Chiropractors, Dentists, Dietetics, Occupational Therapists, Optometrists, Pharmacy, Physiotherapists, Podiatrists, Psychologists and Speech Pathology), 22 pathology collection centres, 8 X-rays units, 17 ultrasound units, 3 CT units and 1 MRI unit.

To future proof Oran Park Town, GDC will continue its consultation and partnerships with current and new health service providers to ensure a planned approach relating to the delivery of required health services within the short, medium and long term.

# THE OPPORTUNITY FUTURE HEALTH SERVICE SUPPLY REQUIREMENTS

GDC and their current service partners have made considerable effort over the past ten years to create a vibrant, sustainable and healthy community. To support the health and wellbeing of current and future Oran Park Town residents, investment in health services, infrastructure and research will be required to enable tangible outcomes to be realised. These include:

- Optimal health outcomes for all residents of Oran Park Town community and the wider region
- Transforming Oran Park Town into an economic and health, research and innovative hub
- Optimal health outcomes for all residence of Oran Park Town community and the wider region
- Enhancing community pride and fostering caring and nurturing environments
- Better social connectedness and sense of community, reducing the risk of isolation and loneliness.

The interconnectedness of health, society and economy will result in longstanding benefits for residents, visitors and workers of Oran Park Town, offering opportunities to develop and prototype innovation and change, inform and influence policy and strategic decision making, as well as transform the way people live, work and play.

Table 2 outlines the future health service supply requirements for Oran Park Town for the three (3) strategic timeframes.



## THE OPPORTUNITY UNIQUE FEATURES

Oran Park Town, when completed will have all the features of an international exemplar centre for innovation, health and wellbeing. From inception, GDC have built a strong foundation through implementation of contemporary healthy built environment principles, place-based strategies, as well as a Strategic Social Plan that outlines Social Sustainability Objectives. These have enabled the design, development and operation of a healthy community.

The unique sole landowner and single developer model, facilitates the coordinated master planning of the infrastructure and services within Oran Park Town.

Now and into the future, Oran Park Town is going to be a place that will offer:

- Integrated Health Hub in partnership with SWSLHD and other public and private health service providers
- Comprehensive and accessible health and social care to address the community's needs and aspirations
- Seamless connectivity between health, education and other government and non-government services. GDC has established a Community Partners Meeting that brings together service partners to allow for planning and integration of health and social services
- A digitally enabled town, with high speed internet fibre to enable delivery of virtual health and social services, as well as research
- Optimal environment for research, an incubator and hub, to expand the body of knowledge related to health and medical, engineering, economics, and social sciences
- Strong relationships and connections to major economic centres such as the new airport and health, research and education precincts
- High amenity urban and natural environments, with an emphasis on promoting physical health and social and mental wellbeing through its high-quality green spaces and green canopy streets, sporting, fitness and cultural facilities and sustainable buildings, community centres and recreation facilities
- Fine grain connections, with a focus on walking, cycling and public transport that makes it a desirable place for people to work and live
- Accommodation through hotels, serviced apartments to attract a range of national and international visitors
- Fosters opportunities for development and innovation on an international scale
- A healthy, connected, integrated and resilient locality with a commitment to mitigating climate change risks through sustainable transport, developments, water, energy, air quality and waste and through community, sports and cultural facilities and activities.
- Continued sense of community and belonging.

GDC is committed to collaborating with service providers to achieve their vision, as well as maintaining and improving the health and wellbeing of the Oran Park Town community.

# THE OPPORTUNITY FUTURE HEALTH SERVICE SUPPLY REQUIREMENTS

STRATEGIC TERM	HEALTH SERVICE SUPPLY REQUIREMENTS
<p><b>SHORT 2019-2024 2-5 YEARS</b></p>	<ul style="list-style-type: none"> <li>• <b>ADDITIONAL GENERAL PRACTICE SERVICE/S</b> <ul style="list-style-type: none"> <li>– By 2021, Oran Park Town's GP supply requirements will be 15 FSE. <ul style="list-style-type: none"> <li>▪ The broader catchment of 5km will require a supply of 54 FSE GPs.</li> </ul> </li> <li>– To respond to the predominately lifestyle-related conditions of the wider Camden community that can be managed within the primary care and community setting: <ul style="list-style-type: none"> <li>▪ Increased obesity hospitalisations of 8%</li> <li>▪ Increased potential preventable hospitalisations for all conditions of 18%</li> <li>▪ Increased diabetes-related hospitalisation including gestational and diabetes in pregnancy of 84%</li> <li>▪ Increased chronic obstructive pulmonary diseases hospitalisation of 10% over the past five years.</li> </ul> </li> <li>– Current Primary Care and Community based services are experiencing increasing demand</li> <li>– Due to rapid growth the integrated service delivered in partnership with SWSLHD, Oran Park Town Family Health (OPFH), is now operational 7 days a week for extended hours. As the needs of the community continue to evolve, other allied health practitioners have been engaged on a sessional basis.</li> <li>– Supporting public health services by providing alternatives to ED, an opportunity exists for primary health care providers to capture this proportion of public health service activity</li> <li>– The establishment of 364 residential aged care places expected by 2021 will necessitate the additional supply of GPs.</li> </ul> </li> <li>• <b>ALLIED HEALTH SERVICES</b> <ul style="list-style-type: none"> <li>– By 2021, Oran Park Town's supply requirements for allied health professionals (public and private sector) is a total of 71 FTE</li> <li>– Pharmacist, physiotherapist and psychologist supply will increase to 13 FTE each by 2021</li> <li>– Currently there are 12 allied health services located within Oran Park Town, such as physiotherapy, dietetics, chiropractor, podiatry, speech pathology and psychology. Other allied health services are predominantly located in the larger centres such as Camden, Campbelltown and Liverpool. There are opportunities for allied health services to increase within the current population as indicated by the supply requirement projected to increases by 2021.</li> <li>– The higher than NSW average rates of private health insurance for Oran Park Town and the wider Camden region further supports private health service provision.</li> </ul> </li> <li>• <b>DIAGNOSTIC SERVICES INCLUDING IMAGING AND EXPANSION OF PATHOLOGY SERVICES</b> <ul style="list-style-type: none"> <li>– By 2021, Oran Park Town will have a supply requirement of 7 pathology collection centres, Radiological supply of 2 X-rays, 5 ultrasounds and 1 CT</li> <li>– The Camden falls-related hospitalisations have increased by 5% over the past five years, indicating an increased in diagnostic services.</li> <li>– The establishment of 364 residential aged care places expected by 2021 will necessitate the additional supply of diagnostic services.</li> </ul> </li> <li>• <b>OBSTETRICS CONSULTING SERVICES</b> <ul style="list-style-type: none"> <li>– Oran Park Town has a predominately young family profile.</li> <li>– Current public obstetric services are located at Camden, Campbelltown and Liverpool Hospitals.</li> <li>– To maximise the best outcomes for women and their babies, currently 82% of women attend their first antenatal visit by 14 weeks. There are opportunities to support antenatal and postnatal clinic services within Oran Park Town.</li> </ul> </li> <li>• <b>CHILD AND FAMILY SERVICES</b> <ul style="list-style-type: none"> <li>– Karitane's Early Parenting Clinic is experiencing increased waiting times and referrals shortfalls in meeting demand.</li> <li>– By 2021, the growth rate of the 0-14 age cohort will be 37%.</li> <li>– By 2021, family households will make up 62% of the total households in Oran Park Town.</li> </ul> </li> </ul>

# THE OPPORTUNITY FUTURE HEALTH SERVICE SUPPLY REQUIREMENTS

STRATEGIC TERM	HEALTH SERVICE SUPPLY REQUIREMENTS
<p><b>MEDIUM 2024-2029 5-10 YEARS</b></p>	<ul style="list-style-type: none"> <li>• <b>All services as outlined in Short Term Strategic Timeframe and their respective supply requirement increases for this timeframe.</b> <ul style="list-style-type: none"> <li>– The SWSLHD Oran Park Town IHH will be a large service incorporating a broad range of ambulatory specialist services provided on a stand-alone site in Oran Park Town Centre. When provide management of low acuity and ambulatory care conditions as well as chronic disease management, preventative health and hospital avoidance initiatives and complements the care provided by Camden and Campbelltown Hospitals. This provides primary care providers, including Allied Health services, an opportunity to partner with SWSLHD to deliver this integrated service model</li> </ul> </li> <li>• <b>DAY PROCEDURE CENTRE</b> <ul style="list-style-type: none"> <li>– Nationally, the delivery of same day private activity has increased while overnight private services are declining.</li> <li>– Camden LGA private health insurance rates are above the NSW state average.</li> <li>– For a number of procedural and surgical admissions in private hospitals the Camden LGA rates are higher than the NSW rates. With opportunities for locally based services to provide procedures such as ear nose and throat, ophthalmology, cardiac catheterisation, knee replacement, Gynaecological, and colonoscopy to the wider Camden catchment.</li> <li>– With the anticipated young adult and working family population of Oran Park Town, the requirement for flexible, efficient and accessible health services that minimise disruption to their lives and maximise convenience will be expected.</li> </ul> </li> <li>• <b>SPECIALIST MEDICAL AND SURGICAL CONSULTING SERVICES</b> <ul style="list-style-type: none"> <li>– By 2026, there will be a total supply requirement of 35 FTE medical and surgical specialists supply requirement for Oran Park Town. <ul style="list-style-type: none"> <li>▪ The 5km service catchment will have a supply requirement of 98 FTE.</li> </ul> </li> <li>– With approximately 50% of people with mild mental illness requiring treatment, the need for mental health services is likely.</li> <li>– Higher rates of private health insurance together with higher socio-economic factors, such as income and education. This is supports Oran Park Town residents accessing private health services.</li> <li>– Higher rates of hospitalisations for circulatory disease and obesity-related conditions.</li> <li>– For a number of procedural and surgical admissions in private hospitals the Camden LGA rates are higher than the NSW rates. With opportunities for locally based services to provide procedures such as Ear nose and throat, ophthalmology, cardiac catheterisation, knee replacement, gynaecological, and colonoscopy procedures to the wider Camden catchment.</li> </ul> </li> <li>• <b>SPECIALIST GERIATRIC AND RELATED AGED CARE SERVICES</b> <ul style="list-style-type: none"> <li>– By 2026, the proportion of people aged over 65 years in Oran Park will increase by 175%.</li> <li>– There will be two RACFs in Oran Park Town with 324 beds by 2021. Projected calculations demonstrated that an additional 75 places for people aged over 70 years will be required by 2036.</li> <li>– Falls related and dementia hospitalisations for Camden have already increased by 5%, with these rates higher than the NSW average.</li> <li>– With higher likelihood of loneliness and aged-related mental health illnesses affecting older people, age specific services for Oran Park Town and wider service catchment will be required.</li> </ul> </li> <li>• <b>COMMUNITY BASED DRUG AND ALCOHOL SERVICE, INCLUDING SOCIAL AND NOT-FOR-PROFIT SERVICES</b> <ul style="list-style-type: none"> <li>– As the Oran Park Town's considerable young person population matures, the requirement for early intervention and preventative services should be considered.</li> <li>– Access to psychological support with the expected supply requirement of psychologist for Oran Park town will be 22 FTE.</li> </ul> </li> </ul>

# THE OPPORTUNITY FUTURE HEALTH SERVICE SUPPLY REQUIREMENTS

STRATEGIC TERM	HEALTH SERVICE SUPPLY REQUIREMENTS
<p><b>LONG 2029-2039 10-20 YEARS</b></p>	<ul style="list-style-type: none"> <li>• All services as outlined in Medium Term Strategic Timeframe and their respective supply requirement increases for this timeframe.</li> <li>• <b>COMPREHENSIVE INTEGRATED HEALTH CENTRE</b> <ul style="list-style-type: none"> <li>– Medical and surgical services supporting day and overnight admissions (high volume short stay) within inhouse and/or co-located clinical support services. <ul style="list-style-type: none"> <li>▪ By 2036, Oran Park Town will have a supply requirement of the following public and private health services: <ul style="list-style-type: none"> <li>• 63 FTW medical and surgical specialists</li> <li>• For the wider 5km service catchment, a supply requirement of 169 FTE medical and surgical specialists</li> </ul> </li> </ul> </li> <li>– GP and Allied Health Services <ul style="list-style-type: none"> <li>▪ By 2036, Oran Park Town will have a supply requirement of the following public and private health services: <ul style="list-style-type: none"> <li>• 46 FSE GPs</li> <li>• 227 FTE allied health practitioners, public and private, including but not limited to pharmacy, dentistry, optometry, physiotherapy, psychology and speech pathology</li> <li>• For the wider 5km service catchment, a supply requirement of 122 FSE GPs, and 603 FTE allied health professionals, public and private, will be needed to service that population</li> </ul> </li> </ul> </li> <li>– With demand in public and private hospital activity expected to increase over the long term, there may be a market opportunity for expanded pathology and medical imaging services that supplements these services.</li> <li>– Consultation with public health services indicated that early intervention and prevention services located within the community are more likely to serve the needs of the residents of Oran Park Town.</li> <li>– Increased public and private hospital activity expected over the next twenty years.</li> <li>– With no existing public hospital within a 5km and no private hospitals within a 10km radius of Oran Park Town, representing a potential additional burden on the surrounding existing public and private health services. Additional private hospital demand is likely to be of interest to the market especially regarding the demand across the wider 3km, 5km and 10km catchments beyond Oran Park Town.</li> </ul> </li> <li>• <b>RESIDENTIAL AGED CARE FACILITIES</b> <ul style="list-style-type: none"> <li>– When completed the two RACFs in Oran Park Town will supplying up to 324 beds by 2021, with projected calculations demonstrated that an approximate additional 75 places for people aged over 70 years will be required by 2036.</li> </ul> </li> </ul>

**TABLE2:** High Level Summary of Service Requirements for Oran Park Town.

Note: This has been based on the information and data available at the time of this report. As new information and data becomes available the information in this table will have to be updated in line with the new information and data.

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## ORAN PARK TOWN

# HIGH-LEVEL STRATEGIC HEALTH SERVICES NEEDS ASSESSMENT REPORT

MARCH 2020

## **DISCLAIMER**

### ***INHERENT LIMITATIONS***

This report has been prepared as outlined in the Methodology sections (3.0 METHODOLOGY). No warranty of completeness, accuracy or reliability is given in relation to the statements and representations made by, and the information and documentation provided by Greenfields Development Company and stakeholders consulted as part of the process.

Linéaire Projects have indicated within this report the sources of the information provided. We have not sought to independently verify those sources unless otherwise noted within the report.

The information set out in this document has been prepared using information derived from a variety of external sources. Linéaire Projects does not warrant the accuracy of any of the information and does not accept any legal liability or responsibility for any injury, loss or damage incurred by the use of, or reliance on, or interpretation of the information contained herein.

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This report is solely for the purpose set out in our approved proposal with Greenfields Development Company and is not to be used for any other purpose or distributed to any other party in part or in full without Linéaire Projects' prior written approval.

This report has been prepared at the request of Greenfields Development Company in accordance with the Terms of the engagement contract (Linéaire Projects Terms and Conditions included in the approved proposal dated 25th July 2019) approved on 25 July 2019. Other than our responsibility to Greenfields Development Company, neither Linéaire Projects nor any member or employee of Linéaire Projects undertakes responsibility arising in any way from reliance placed by third party on this Report. Any reliance placed is that party's sole responsibility.

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ABBREVIATION / ACRONYM	EXPANSION
ABS	Australian Bureau of Statistics
AIHW	Australian Institute of Health and Welfare
BHI	NSW Bureau of Health Information
CRET	Camden Regional Economic Taskforce
CT	Computerised tomography
DPE	Department of Planning and Environment
DPIE	Department of Planning, Industry and Environment
GDC	Greenfields Development Company
GSC	Greater Sydney Commission
HI	NSW Health Infrastructure
HSNA	Health Services Needs Assessment
LHD	Local health district
LSPS	Local Strategic Planning Statement
MoH	NSW Ministry of Health
MRI	Magnetic resonance imaging
NCOSS	NSW Council of Social Services
NHWDS	National Health Workforce Dataset
PHI	Private health insurance
PHN	Primary Health Network
PHIDU	Public Health Information Development Unit
RACF	Residential Aged Care Facility
SWSLHD	South Western Sydney LHD
SWSPHN	South Western Sydney PHN
WCAA	Western City and Aerotropolis Authority

## 1.0 INTRODUCTION

Over the past 15 years, investment in the South West Area of Sydney has promoted the growth of new communities in precincts such as Oran Park, Catherine Fields, Lowe Creek and Maryland. Oran Park Town was one of the first land release areas in the South West Growth Area and has quickly established itself as a high-quality urban environment founded on the principles of community pride, well-being, healthy living and educational excellence.

With an accelerated development program within Oran Park Town, its population has increased substantially over a short period of time. The need for key infrastructure such health, education, community, transport and commercial has been recognised and Greenfields Development Company (GDC), the sole developer and overarching master planner within Oran Park Town, has planned, designed and created a town that supports the provision of key infrastructure and services, promoting connectivity and access.

GDC remains committed to enhancing and promoting the health and wellbeing of Oran Park Town residents and the wider community through best practice urban design and inclusive planning principles. Opportunities to implement and provide coordinated service delivery within Oran Park Town and the wider region continues to be encouraged.

Strengthening of long term and new partnerships will also be critical to achieving GDC vision of *'providing centralised and integrated health services that continually improve and promote the health and wellbeing of the community of Oran Park, with connectedness of services and community remaining at the forefront'*.

Acknowledging federal and state priorities for this region, including the delivery of the City Deal for Western Sydney, the Western Parkland City, the new international Western Sydney Airport and Badgerys Creek Aerotropolis, Oran Park Town and the surrounding Camden area, the region will continue to experience population growth and demographic changes. It is estimated that the population of the Western Parkland City region will grow from 740,000 in 2016 to 1.1 million people by 2036 (Greater Sydney Commission (GSC), 2018). This will require the strengthening of liveability, employment, infrastructure and business investment to support the requirements of its future residents and their emerging communities.

The development of new towns and the renewal of existing ones, with placemaking supporting the design of healthy and connected communities and neighbourhoods, is occurring across NSW (e.g. Wollongong, Sydney, Central Coast, Newcastle/Lower Hunter). There is evidence demonstrating that partnerships involving public and private developers, government and non-government organisations (NGOs), as well as service operators can lead to better outcomes for communities experiencing rapid urban development (Roberts and Siemiatycki, 2015). The recent development of Green Square in the eastern fringe of Sydney CBD, where the local council, private developers and state government agencies have collaborated to establish a connected place for residents (Landcom, 2018) is a successful example of this type of partnership.

Through commissioning of this high-level strategic Health Services Needs Assessment (HSNA) report, GDC has developed a high-level strategy to effectively plan health services over the short (2-5 years), medium (5-10 years) and long term (10-20 years). The development of the HSNA consisted of a document and data review, targeted stakeholder consultations and analysis and evaluation of data utilising service planning methodologies.

This high-level strategy will enable health service delivery that is responsive to the health needs of the Oran Park Town community. Such planning has considered the community, as well as current and future public and private health service provider's directions and priorities. It has also sought guidance and the views and expertise of other service partners, and relevant government agencies and private organisations.

## 2.0 OBJECTIVES

The key objectives of this project were:

- Development of a high-level strategic Health Services Needs Assessment report considering the short, medium- and long-term health service requirements for Oran Park Town (Table 1).
- Targeted consultation of stakeholders as determined by GDC.

Key deliverable

- Development and documentation of a high-level strategic Health Services Needs Assessment report for Oran Park.

## 3.0 METHODOLOGY

This report included the Project Initiation, Data Review and Analysis and Strategy Development phases as outlined in Figure 3.

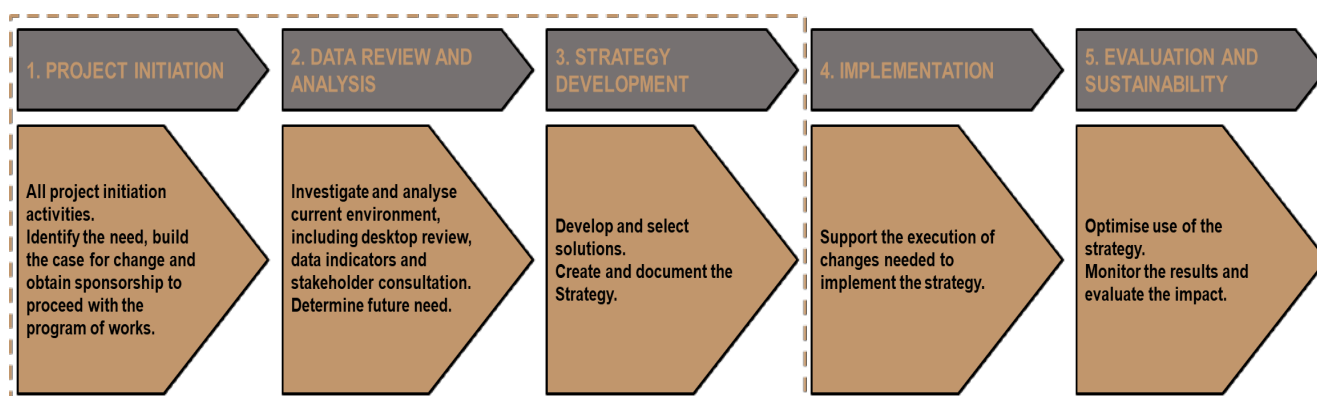


FIGURE 1: Project Methodology

### DEFINITION OF HEALTH AND HEALTH SERVICES

For the purpose of this report, 'Health' is defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (World Health Organisation, 1948). This includes the recognition and analysis of social determinants, such as education and income, which are important factors in the context of new urban developments.

Specific to this report is the acknowledgement of the relationship between health, health services and the built environment. Rapid development and the accelerated population growth within an area needs to be carefully planned and managed. Otherwise, the health of the community may be negatively impacted, and health inequities magnified. As communities grow, significant development and investment of key health, housing, transport and social infrastructure are necessary to support positive health outcomes (NSW Health, 2009).

'Health services' are defined as public and/or private primary community-based, secondary referral and tertiary referral services including:

- Primary Care Service including general practitioners (GPs)
- Pathology Collection Centres
- Radiology/Medical Imaging including x-ray, computerised tomography (CT), magnetic resonance imaging (MRI) and ultrasound
- Pharmacy
- Speech Pathology
- Optometrist
- Dentist
- Chiropractor
- Dietitian
- Physiotherapist
- Podiatrist
- Retirement Village
- Residential aged care facilities (RACFs)
- Medical and Surgical Specialist (e.g. cardiologists, general surgeons, geriatricians, psychiatrists)
- Public and/or Private hospitals
- Day Surgery and/or Day Procedure Centres.

#### DEFINITION OF SHORT MEDIUM AND LONG TERM:

The following strategic timeframes, short, medium and long term, were defined as outlined in Table 1. These strategic timeframes were approved by GDC.

STRATEGIC TIMEFRAME	DURATION	YEARS
SHORT	2019-2024	2-5 years
MEDIUM	2024-2029	5-10 years
LONG	2029-2039	10-20 years

TABLE 1: STRATEGIC TIMEFRAMES - Short, medium- and long-term timeframes for exploring health service supply requirements

### 3.1 CALCULATING PROJECTED POPULATIONS AND DEMOGRAPHY

For the purposes of this report, the scope of the health services assessment area and associated population pertains to Oran Park Town only. Any additional service catchments outlined in this report were included to inform future discussions with relevant industry stakeholders.

Critical to this report, the Oran Park Town population has been modelled on the data and information provided by GDC<sup>1</sup> specifically. Based on this direction by GDC, the following population projections have been utilised for all analysis undertaken in this report.

To model the catchment populations, as per the strategic timeframes, modelling estimates have been applied including applying kilometre radius assumption with the Oran Park Town Centre at its centre. In recognising that health services located within 5km radius of people's residence and people's place of employment will be accessed, a service catchment can be determined. Table 2 demonstrates the service catchment for three distances from the Oran Park Town Centre that reflect the short, medium and long strategic timeframes.

<sup>1</sup> As per GDC emails received on 19 September 2020 and 1 October 2020, outlining "total projected population for our GDC Oran Park development (not including adjacent developments and ongoing SW area growth) is expected to be circa 50,000 people. This estimate is based on an annual increase of 2000 people per year for the next 20 years, noting that there is circa 10,000 population currently. The above indicates that the expected year when residential Development within Oran Park Town will cease is circa 2040. Expected total dwellings would equate to circa 18,000 by 2040, linked directly to the circa 50,000 people. This includes apartments etc in another (but much smaller than existing) town centre to the north, within the LPC land holding."

SERVICE CATCHMENT RADIUS FROM ORAN PARK TOWN CENTRE	2019	2021	2026	2036
Oran Park Town	10,233	14,233	24,233	44,233
3km	17,011	26,217	37,474	60,398
5km	37,212	52,510	68,733	118,178
10km	138,248	160,712	204,636	348,740
15km	324,426	361,235	437,350	636,266

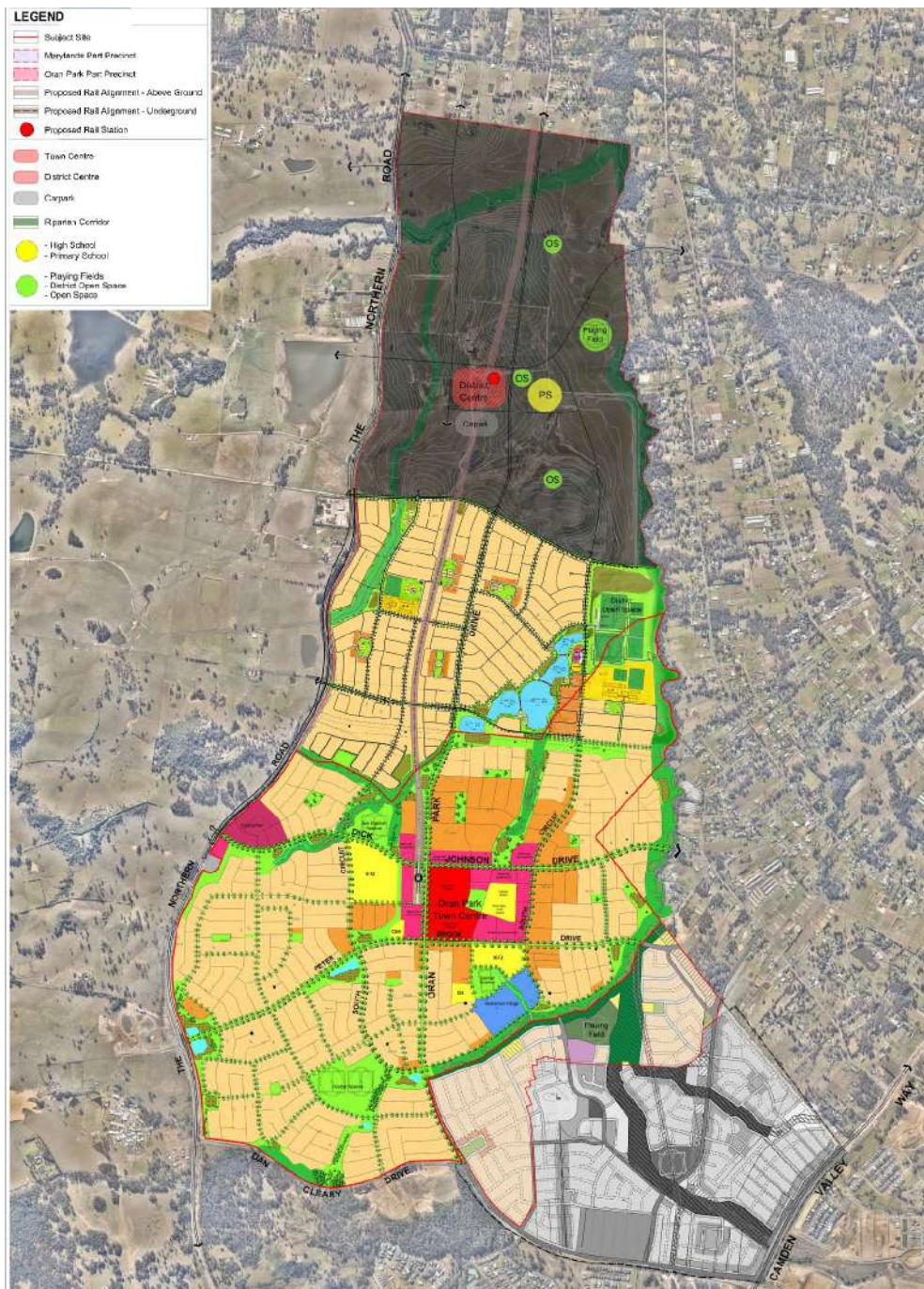
**TABLE 2:** Projected Service Catchment By 3km, 5km, 10km and 15km Radius  
Source: GapMaps, 2019; ABS, 2016; GDC, 2019.

Inconsistency in capturing the rapid growth within Oran Park Town was noted in the various sources of population calculation reviewed as part of the desktop review and data analysis process. A scenario that did not account for Oran Park Town's high expected level of growth would potentially produce results that show underserving health services supply. This is relevant when consulting with health service operators, as their sources of population calculation will impact their assessment of demand and ultimately their feasibility assessment.

The above scenario (Table 2) was developed to capture the difference between the current population reported by GDC and the population reported by other sources.

It must be noted that methodologies and projection outputs are dependent on the underlying assumptions and availability of data.

GDC has undertaken detailed master planning for Oran Park Town indicating residential, commercial and service-related developments. For this report, Figure 2 shows Oran Park Town as described throughout this report.



**FIGURE 2:** Oran Park Town and Surrounding Suburbs.  
Source: GDC, 2019.

The current and future demographic characteristics of Oran Park Town were determined utilising the State Suburb Classification as per the ABS (id, 2019) and data supplied by GDC. The State Suburb Classification closely aligns with the Oran Park Town geography and has been consistently utilised in local council and other planning activities. Additionally, the Camden LGA was used to draw comparison to and provide estimates for Oran Park Town regarding future population characteristics.

## 3.2 INITIATION

The Initiation phase consisted of the confirmation and approval of the scope, deliverables and governance for this project. A project plan, outlining all project specific information, was developed and approved by the General Manager, GDC (Reinforcing Sponsor) and Director, GDC (Authorising Sponsor).

A project initiation meeting was held on 12<sup>th</sup> August 2019 and was attended by both the GDC Leadership and Linéaire Projects teams. At this meeting the GDC's vision for the overall health and wellbeing of the Oran Park Town community and expectation of (this) project outcomes was confirmed.

Weekly status update meetings were scheduled between the GDC Project Lead, Linéaire Projects, identified by the Authorising Sponsor as key contacts for the report. The purpose of the meetings were to provide an update on the progress of the review, seek assistance to navigate key stakeholders and to communicate any issues presenting risk to the successful completion of the review.

Key stakeholders of GDC were identified by GDC Authorising Sponsor. The associated documentation for this project were provided to the Project Director, Linéaire Projects by GDC.

## 3.3 DATA REVIEW AND ANALYSIS

### 3.3.1 DESKTOP REVIEW

The Desktop Review component sought to understand the following:

- Strategic Context of Oran Park Town/South West Area of Sydney
- Current and future population and health characteristics
- Key service delivery trends and growth factors
- Current available and future health service supply requirements for Oran Park Town
- Opportunities for maintenance and improvement of the health and wellbeing of Oran Park Town residents.

Data was obtained through publicly available sources such as:

- Australian Bureau of Statistics (ABS)
- Department of Planning, Infrastructure and Environment (DPIE)
- Australian Institute of Health and Welfare (AIHW)
- Public Health Information Development Unit (PHIDU)
- Camden Council,
- South West Sydney and Nepean Blue Mountains Local Health Districts (LHDs)
- NSW Ministry of Health (MoH).

Over seventy-five documents were reviewed ranging from GDC's resident reports and data, master plans, stakeholder strategic plans and business cases, socioeconomic and market reports. Appendix 1 provides a list of documents provided and gathered by GDC, stakeholders and the Linéaire Projects team as part of the desktop review.

## HIGH-LEVEL RAPID LITERATURE REVIEW

A high-level rapid literature review was undertaken to introduce and explore themes that enable the development of healthy and well communities. This literature review relied on a university MultiSearch Database and Google Scholar. Peer-reviewed academic journal articles written in the English language were examined as part of the study. To ensure relevance and applicability, the search date was refined to exclude literature pre-dating 2011. Key search terms included 'healthcare in new communities', 'patient engagement', 'healthy built environment', 'sustainable healthcare design', 'health services in urban communities' and 'health literacy'.

### 3.3.2 STAKEHOLDER INTERVIEWS

An essential component of this assessment included interviews with key stakeholders of GDC, including public and private organisations with an influence on or interest in the health and wellbeing of the Oran Park Town community.

These interviews provided insights into the strategic directions of our stakeholders regarding health and healthcare delivery, healthy urban design and built environments. Appendix 2 provides a list of stakeholders interviewed.

Interviews were one hour in duration and conducted one-on-one (1:1). A set of questions were developed to guide the interviews. Stakeholder interviews commenced with the provision of a short introduction to establish the project's framework. Questions were tailored to each stakeholder to align with their expertise and perspectives.

### 3.3.3 HEALTH ADVISORY COMMITTEE

This report and associated recommendations were tabled and reviewed by Linéaire Projects' Health Advisory Committee, consisting of health sector industry leaders and experts in area of Information technology and Governance, for feedback and any proposed recommendations.

Their recommendations of the Health Advisory Committee have been adopted throughout this report.

## 3.4 LIMITATIONS

Potential limitations of this project have been identified and noted below:

- Population projection data variability occurred when utilising methodologies to determine a future state of Oran Park Town. This is relative to the level of assumptions by which they are underpinned. Variability between GDC provided projects and publicly available/official projects were noted, with GDC projections higher when compared to other sources.
- Future service requirement assumptions were determined through utilisation parameters at either Camden LGA, NSW, or national level as granular and local level data are not available. This is justified on the basis that the intention of the report is to describe the range of services that might be required at an approximate order of magnitude level at particular points in time.
- Multiple data sources were utilised with varying data quality and validity.

- Projection methodology is dependent on the availability of related contexts, therefore results were analysed as a point in time to reflect the known variables that influence the future state.
- Inability to meet all identified stakeholders potentially resulting in missed insights
- There are currently no Australian standard rates (e.g. FTE/100,000) for required service provision for medical and nursing and allied health services. Relevant rates as outlined by organisations such as AIHW and Australian Medical Association were utilised.

## 4.0 FINDINGS

### 4.1 STRATEGIC CONTEXT

Understanding the strategic planning context for Oran Park Town is critical. It informed the analysis of relevant information and enabled development of recommendations and solutions in line with short, medium- and long-term strategic timeframes.

This included identification of factors ranging from large scale developments of neighbouring suburbs, critical public and private infrastructure (e.g. transport, health and social facilities), and evolving population and demographic profiles of communities.

The established key strategic timeframes are important as they align with GDC's overall development program to 2040 and the broader strategic planning contexts of the South West Growth Area, Western Sydney Aerotropolis and the Western Parkland City.

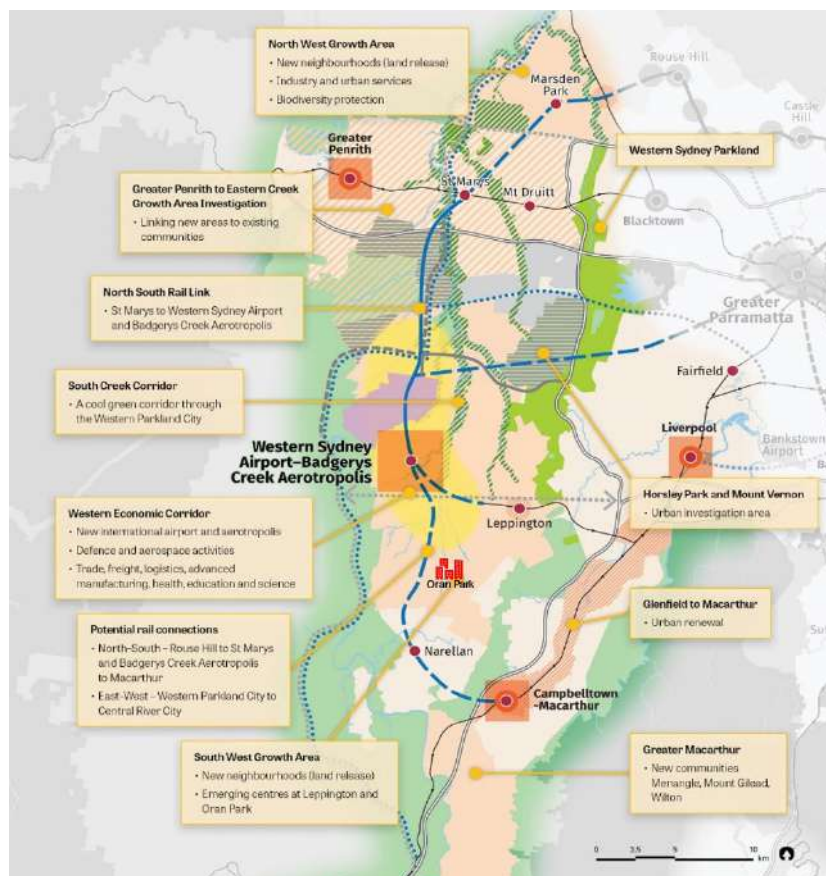


FIGURE 3: Map of Western Parkland City  
Source: GSC, 2019

It is vital to acknowledge that the development of Oran Park Town is influenced by the broader strategic framework for the region. While demand and supply of current and future health services are influenced by resident catchment populations, key strategic development and infrastructure decisions also need to be considered. For example, proposed new town developments, establishment of public transport and other key social infrastructure and broader economic strategies.

Oran Park Town has been leading the region in population growth and urban development. Consultations with Camden LGA indicated that Oran Park Town has the opportunity to be established as a strategic centre as it continues to demonstrate social and economic growth, that are supported by key infrastructure such as the proposed rail station.

#### **4.1.1 CAMDEN COMMUNITY STRATEGIC PLAN**

The Camden Community Strategic Plan is the highest-level plan for the Camden LGA. This Plan identified the community's main priorities and strategies, with the key direction by 2040 outlined to be:

1. Actively Managing Camden LGA's Growth
2. Healthy Urban and Natural Environment
3. A Prosperous Economy
4. Effective and Sustainable Transport
5. An Enriched and Connected Community
6. Strong Local Leadership

Points for consideration regarding health and wellbeing strategies include, infrastructure that enables and encourages healthy forms of transport (e.g. walking and cycling) and establishment of an enriched and connected community involving arts and culture, community safety, healthy lifestyles and community health. In addition, the further enrichment of the community through learning, access to information and recreation and leisure to build social capital and cohesion has been outlined.

The aspirations over the next 10 years includes:

- Fostering strong, cohesive, healthy and safe communities
- Supporting active transport
- Ensuring public amenities and recreational facilities

It is highlighted that the Council will be continuing to advocate on behalf of the community for social services, such as health, education as well as infrastructure, technology and digital services.

With GDC remaining committed to creating a cohesive and well community fostered on principles of inclusion and connectedness, Oran Park Town will be developed in line with the strategic direction of Camden Council. Results of the six-monthly residential snapshots (GDC, 2019) demonstrated that currently GDC is line with these aspirations for a thriving and well community.

## 4.1.2 CAMDEN COUNCIL DRAFT LOCAL STRATEGIC PLANNING STATEMENT

Camden Council Draft Local Strategic Planning Statement (LSPS) sets short, medium- and long-term actions linked to the local priorities of the Greater Sydney Region Plan (GSC, 2018) and Western City District Plan (GSC, 2018), to deliver on the community's future vision.

The plan outlines key infrastructure required to support the growing Camden population, with liveability, productivity and sustainability outlined as a priority.

Strategies pertaining to health and wellbeing include:

- Investigation of opportunities to encourage delivery of services and infrastructure
- Leveraging collaboration among key health partner, such as the Western Sydney Health Alliance
- Designs that improved access to services for the Camden community
- Range of spaces within urban environments that engage and connect people and communities of all ages and ability.

The current implementation of healthy built environment and design principles at Oran Park Town are in line with the LSPS. These include, the connected footprint of the Oran Park Town Centre and its close proximity to public education, aged services and health services, promoting access for various cohorts of the community.

## 4.1.3 SOUTH WESTERN SYDNEY LHD STRATEGIC PRIORITIES TO 2021 AND CARE IN THE COMMUNITY CLINICAL SERVICE PLAN

As outlined in the SWSLHD's *Care in The Community Clinical Service Plan*, central to SWSLHD's current vision and long-standing direction is establishment of the Integrated Health Neighbourhood (IHN). This vision is in line with one of three strategic directions in the *NSW State Health Plan: Towards 2021* of delivering truly integrated care.



FIGURE 4: SWSLHD Integrated Health Neighbourhood  
Source: SWSLHD Care in The Community Clinical Service Plan

The focus of this model is to provide care closer to home and reduce the need for hospital admissions. IHNs incorporate hospital-based services, general practice and primary services, community health, health promotion, telehealth, social and welfare service, integrated health hubs and private service providers.

An IHN has been designated for the Macarthur region, with the current Oran Park Town Integrated Health Hub (IHH) forming a crucial component of the Macarthur IHN model.

The Oran Park Town IHH, when completed, will deliver a new range of clinical services traditionally delivered from hospital facilities. The IHH will operate under a new model of care aimed at reducing demand for low acuity ambulatory care sensitive service models within Macarthur acute and sub-acute hospitals. Delivering a mix of medical, nursing and allied health specialties that support and build capacity for general practice and ambulance diversion, as well as integrated, networked and linked services providing a wide range of services appropriate to be located off hospital sites. The IHH will target prevention and early intervention strategies as part of the Macarthur IHN.

This service will provide new opportunities for greater collaboration and skill enhancement of the primary care sector and will be supported by seven day per week services for patients who require frequent care. The IHH, Community Health Centres and District Hospitals will operate as an integrated system working collaboratively with primary and secondary providers who deliver care outside the public health system. The delivery of this model requires fit for purpose infrastructure, and the latest technology, both of which has been realised for Oran Park Town's IHH.

Ultimately, the Oran Park Town IHH will provide management of low acuity and ambulatory care conditions, as well as chronic disease management, preventative health and hospital avoidance initiatives and complements the care provided by Camden and Campbelltown Hospitals.

In 2015, SWSLHD opened the Stage One of the IHH, Oran Park Family Health (OPFH), delivered within an Integrated Primary Care Centre (IPCC) model. This is the region's first integrated primary care centre, providing multidisciplinary evidence-based care that is patient centred and team-based. From the patient's perspective, integrated care at OPFH aims to provide a single point of entry to all relevant care, consistency in the quality of service delivery irrespective of the provider, continuity of care and handover between services and a single point of billing for services delivered.

In its current stage, services focus on General Practice-led, team-based primary care. Oran Park Town's OPFH is colocated with a general practice and allied health services, including physiotherapist, dietitian and podiatrist and pathology, as well as public community health services and Karitane. Privately operated diagnostic services will be operating in Oran Park Town by mid-2020, to compliment these integrated services.

The Oran Park Town IHH will be established in a three (3) stage hierarchical development of services. This includes:

1. Stage One with services focused on general practice-led, team-based primary care with key allied health specialities, child and family nursing, pathology and medical imaging.

2. Stage Two will include the prioritisation of visiting medical specialists on a sessional basis aimed at drawing on a broader service catchment and becoming viable once the service population exceeds 4,000 registered patients.
3. Stage Three will represent a large and diverse facility, incorporating matured services through Stages One and Two, residential medical specialist suites, day surgery, ambulatory care clinics, dentistry and advanced diagnostics. This become viable once the service population exceeds 18,000 registered patients and the population reaches 100,000<sup>2</sup> (SWSLHD, 2017).

The current OPFH service reflect Stages 1 and 2 of the planned model. Stage Three of the Oran Park Town IHH, as referenced in the *South Western Sydney Integrated Primary and Community Care Development Plans for the South West Growth Centre (SWGC)*, will be a large service incorporating a broad range of ambulatory specialist services provided on a stand-alone site in Oran Park Town Centre. Within this model, low acuity patients with complex needs will be identified and care matched to clinical teams built around a local medical home concept.

The Oran Park Town IHH is also part of the NSW Government HealthOne program, with funding allocated for an information and communications technology (ICT) system. As part of this program, OPFH is being supported to develop a virtual integration model, including linked information and communications technology (ICT) systems for all staff and service partners. Work is currently being undertaken to develop an interoperable ICT platform. This platform will provide a cross-enterprise document sharing (XDS) system that will support safe, real-time sharing of electronic clinical information between the providers' range of software applications.

With the evolving landscape and innovation in the provision of health services, integrated delivery models and frameworks connecting public and private tertiary, community and primary health providers are becoming increasingly more common. Addressing the health needs across the lifespan and care continuum from acute to prevention, SWSLHD is committed to establishing coordinated, integrated and sustainable services that address the needs of its communities within its boundaries.

#### 4.1.4 WESTERN PARKLAND CITY AND WESTERN CITY DISTRICT PLAN

The emerging Western Parkland City is being established on the economic and social impacts of the new international Western Sydney Airport and Western Sydney Aerotropolis. It will be a polycentric city capitalising on the established centres of Liverpool, Greater Penrith and Campbelltown-Macarthur.

The population of the Western Parkland City is projected to grow from 740,000 in 2016 to 1.1 million by 2036, and to well over 1.5 million by 2056 (GSC, 2018).

References to coordinated health, social and aged services, accessibility and shared use of infrastructure are indicated broadly within the plans. This is likely to influence Oran Park Towns service delivery over the long term as the development of the Western Parkland City occurs (GSC, 2018).

#### 4.1.5 WESTERN SYDNEY AIRPORT AND WESTERN SYDNEY AEROTROPOLIS

The Western Sydney Airport will be a full-service airport operating curfew free, delivering international, domestic and freight services. Construction of Western Sydney Airport is

<sup>2</sup> Catchment for outlined population not provided. The catchment is assumed to be the Camden LGA.

underway and on track to be in operation by 2026. The airport is a transformational infrastructure project that will generate economic activity, provide employment opportunities closer to home for people in the Western Sydney region, and meet Sydney's growing aviation needs.

Through consultation and attendance at the Property Council *Building the Western City Session*, held on 13<sup>th</sup> August 2019, it was indicated that health services for the Western Sydney Aerotropolis will predominately include primary and community healthcare.

There are currently no plans for development of a new public hospital, with the needs of this catchment population being accounted for by the hospital redevelopment in Nepean Blue Mountains and South Western Sydney LHDs. The development of a health and wellbeing strategy for this region is under planning.

With Oran Park Town located approximately 12km from the new Western Sydney Airport and Aerotropolis, there may be opportunities to investigate hub and spoke models of health service delivery between these centres. The approved North South Rail Link would provide improved connectivity and access between the two centres, that further supports the delivery of hub and spoke models of care.

#### **4.1.6 SOUTH WEST RAIL LINE AND NORTH SOUTH RAIL LINE EXTENSION CORRIDOR**

The recommended rail corridors are critical to meeting the NSW Government's ambitions for a '30-minute city' in which people have access by public transport to education, employment and services within 30 minutes regardless of where they live in Sydney.

The proposed Oran Park station is located immediately west of the town centre, offering a direct connection to the Oran Park Town Centre including the Oran Park Town IHH. Its central location within Oran Park Town would allow residents from neighbouring and connected areas to readily access health, education, community, retail and commercial services.

With GDC committed to health and economic success of Oran Park Town, a dedicated rail station for the town is aligned with the principles of liveability, productivity and sustainability proposed throughout GSC's strategies (GSC, 2018) and enabling access to key services for its residents and neighbours.

### **4.2 DEMOGRAPHY AND HEALTH STATUS**

#### **4.2.1 POPULATION AND DEMOGRAPHY**

Oran Park Town is located within the Camden LGA, approximately 60 km south west of the Sydney CBD. Considerable investment has seen the town progress from a greenfield site to a thriving community, with residential, commercial and industrial developments being built.

It is envisaged that Oran Park Town will be centred on a vibrant town centre acting as the hub of the community. The objectives are to create local jobs and feature a large variety of retail, hospitality, leisure and recreational facilities, civic buildings, apartments/housing and commercial spaces. As Oran Park Town was one of the first priority land release areas in the South West Growth Area, it has been rapidly developing since the completion of new planning controls (Department of Planning and Environment, 2018).

It is critical to acknowledge the explosive growth experienced in Oran Park Town. In the 2011 Census, 125 people were reported to be residing in Oran Park. By the 2016 Census, the total estimated resident population was reported at 4,891 people (id, 2019). This demonstrated a growth rate of over 3,800%. The outstanding growth trajectory experienced within Oran Park has continued with the current population of Oran Park Town being 10,233 people signifying a 109% growth rate from 2016. This growth is attributed to GDC's consistent execution of their ambitious development program that has met key milestones to date in their residential and commercial portfolios. Taking this into consideration, higher than publicly forecasted growth is likely to occur and continue in Oran Park Town.

According to GDC estimates, based on dwelling sales and occupancy rates, the current and future population for Oran Park Town are outlined in Table 3.<sup>3</sup>

ORAN PARK TOWN POPULATION	2019 (CURRENT)	2021	2026	2036
Person	10,233	14,233	24,233	44,233
Dwellings Completed	3,411	4,723	8,004	14,565

**TABLE 3:** Current and future population for Oran Park Town  
Source: GDC, 2019

Understanding the future population and its characteristics are critical for strategically planning and developing health services required to support a future Oran Park Town community. For Oran Park Town, the availability of housing stock and the occupancy of each household are the two key drivers for population growth.

In the absence of local data, best estimates of the age distribution for Oran Park Town for key projected years have been calculated and are indicated in Table 4.

ORAN PARK TOWN POPULATION – PERSONS	2019	2021	2026	2036
00-14	2,607	3,560	5,939	10,693
15-44	4,849	6,581	10,902	19,534
45-64	1,923	2,812	5,043	9,515
65-79	664	992	1,816	3,467
80+ years	190	288	533	1,025
<b>Total</b>	<b>10,233</b>	<b>14,233</b>	<b>24,233</b>	<b>44,233</b>
CAMDEN LGA POPULATION – PERSONS	2016	2021	2026	2036
00-14	19,403	29,637	36,803	53,821
15-44	35,445	58,205	66,539	96,258
45-64	17,265	26,436	32,104	54,661
65-79	6,291	10,434	13,717	22,300
80+ years	1,860	2,935	4,135	9,218
<b>Total</b>	<b>80,264</b>	<b>127,647</b>	<b>153,298</b>	<b>236,258</b>

**TABLE 4:** Current and Future Population by Age Profile for Oran Park and Camden LGA, 2016-2036  
Source: DPIE NSW 2019 Population Projections, 2019.

<sup>3</sup> The current 2019 population from the GDC Resident Snapshot Report, May 2019, p. 2 was utilised. And based on advice from GDC that approximately 2000 residents will reside within Oran Park per year, projected years were calculated.

ORAN PARK TOWN POPULATION GROWTH FROM 2019 - PERCENT	2021	2026	2036
00-14	37%	128%	310%
15-44	36%	125%	303%
45-64	46%	162%	395%
65-79	49%	173%	422%
80+ years	51%	180%	439%
<b>Total</b>	<b>39%</b>	<b>137%</b>	<b>332%</b>
CAMDEN LGA POPULATION GROWTH FROM 2016 - PERCENT	2021	2026	2036
00-14	53%	90%	177%
15-44	64%	88%	172%
45-64	53%	86%	217%
65-79	66%	118%	254%
80+ years	58%	122%	396%
<b>Total</b>	<b>59%</b>	<b>91%</b>	<b>194%</b>

**TABLE 5:** Population Growth by Age Profile for Oran Park and Camden LGA, 2016-2036

Source: DPIE NSW 2019 Population Projections, 2019.

On average over the next twenty years, Oran Park Town may still be characterised as a young population, with those aged between 0-14 years and 15-44 years making up 24% and 44% of the total population respectively, compared to Camden LGA with 23% and 41% for the same aforementioned age cohorts. However, as the community matures so will the increase in older residents within Oran Park Town with considerable growth expected in the over 65 years age cohort by 2036.

Overall, growth among key strategic timeframes are higher in Oran Park Town than Camden LGA for those same age profiles (0-14 and 15-44 years). This is indicative of the rapid growth within Oran Park Town, supported by GDC's residential development program (Table 5).

Importantly while the Camden LGA will continue to have high proportions of children and middle-aged people, there is expected to be considerable growth in those aged over 70 years by 2036, as the community ages in place. These trends can be attributed to young families seeking home ownership and older people moving into the area and aging in place. Currently, there is a retirement village operational within Oran Park Town. Consultation with the aged care provider, Anglicare, indicated that the current average age of residents is 70 years, which is lower than the average of 79 years as exhibited in comparable services.

It is recognised that housing development programs can drive population and influence demography within an area by influencing the age profile and type of households moving into those dwelling. The projected household types over the next 20 years for Oran Park Town and Camden LGA have been calculated and are demonstrated in Table 6.

ORAN PARK TOWN HOUSEHOLD TYPE – NUMBER	2019	2021	2026	2036
Couple only	784	1,080	1,822	3,304
Couple with children	1,590	2,223	3,807	6,974
Single parent	372	512	863	1,565
Multiple and Other family households	144	202	348	639
Lone person	479	646	1,064	1,899
Group	42	59	100	184
<b>Total households</b>	<b>3,411</b>	<b>4,723</b>	<b>8,004</b>	<b>14,565</b>
CAMDEN HOUSEHOLD TYPE – NUMBER	2016	2021	2026	2036
Couple only	5,888	10,098	11,694	18,783
Couple with children	12,427	19,755	23,720	35,460
Single parent	2,789	4,457	5,547	8,930
Multiple and Other family households	1,139	1,843	2,153	3,382
Lone person	3,384	5,631	7,151	12,464
Group	327	542	628	1,012
<b>Total households</b>	<b>25,954</b>	<b>42,327</b>	<b>50,893</b>	<b>80,031</b>

**TABLE 6:** Growth of Projected Household Types for Oran Park and Camden LGA, 2016-2036  
Source: DPIE NSW 2019 Population Projections, 2019; GDC, 2019.

Combining population with other demographic features, Oran Park Town is characterised by (Table 7):

- A high proportion of young families
- High proportion of residents engaged in either full time or part time employment
- Predominately home-owners, with over half having a mortgage
- Considerable proportion of the households earning more than \$2,500 per week
- Higher socioeconomic advantage compared to Camden
- Over half of residents have either a vocational or tertiary qualification
- Increasing cultural diversity with a quarter of the community speaking a language other than English at home.

PROPORTION OF TOTAL POPULATION	ORAN PARK TOWN	CAMDEN	NSW
Male	49.1%	49.0%	49.3%
Female	50.9%	51.0%	50.7%
Aboriginal and Torres Strait Islander Population	1.7%	2.5%	2.9%
<b>Age (years)</b>			
0-14	27.6%	23.9%	18.8%
15-64	66.9%	65.5%	65.5%
65-79	4.3%	8.1%	11.6%
80+	1.1%	2.4%	4.1%
<b>Households and Housing Tenure</b>			
Family with children	57.5%	58.6%	42.2%
Lone person	14.0%	13.0%	22.4%
Fully own their home	8.0%	23.4%	30.7%
Have a mortgage	51.1%	50.2%	30.4%
Households earning an income of \$2,500 or more per week	35.1%	32.3%	23.1%
<b>Education and Employment</b>			
Have no qualification	35.6%	41.1%	39.1%
Have a vocational qualification	25.0%	24.4%	18.1%
Have a tertiary qualification	29.0%	26.6%	32.3%
Employed	97%	95.9%	93.7%
<b>SEIFA</b>			
Index of Relative Socio-economic Advantage and Disadvantage score	1,099.2	988.9	1000
<b>Cultural Diversity</b>			
Total born overseas	23.2%	17.6%	27.6%
Speak a language at home other than English	25.3%	14.4%	25.3%
Speak another language, and English not well or not at all	2.4%	1.6%	4.5%
<b>Private Health Insurance</b>			
Rate per 100 population had private health insurance	-	62.3	51.5

**TABLE 7:** Summary of Population Characteristic by Proportion of Persons for Oran Park and Camden LGA.  
Source: .id, 2018; ABS, 2016; 2019 DPIE NSW 2019 Population Projections, 2019; PHIDU, 2019.

These characteristics portray a comparatively favourable position with regards to economic and social circumstances. This highlights that the residents of Oran Park Town are well positioned to access a broader range of services required to maintain their health and wellbeing.

Another factor demonstrating a favourable socioeconomic position is private health insurance. Currently, the Camden LGA private health insurance rates are above the NSW state average. Components of private health insurance, such as service coverage and utilisation of private health insurance, provide further understanding for access to health services outside the public health system, with this information not readily available. Recent national trends in the proportion

of people with private health insurance with hospital cover nationally documented a decline over the past ten years (Australian Prudential Regulation Authority (APRA), 2019). Determining utilisation and benefits paid on a local or regional basis is equally difficult. According to APRA (2019), between 2018-2019, utilisation increased within public and day hospitals, while decreasing within private hospitals. Reforms such as the 30% rebate and Lifetime Health Cover anticipated that hospital use would be redirected towards the public sector (Walker et al, 2007).

Utilising the New Resident Snapshot reports specific to Oran Park Town (GDC, 2019), assumptions have been made to reflect the potential future demographic characteristics over next five to 10 years. These include:

- Migration to Oran Park Town from surrounding south western suburbs will decline, while there will be increases in migration to Oran Park Town from the western Sydney and south eastern Sydney areas
- Rental tenure will increase while outright ownership and ownership with a mortgage will decline
- Public transport use will increase while motor vehicle use will decrease
- Three person households will increase
- Managerial, community and personal services and sales jobs will increase
- Residents with a diploma or higher level of education will increase
- The proportion of residents from a non-English speaking background will increase.

These characteristics highlighted that the future population of Oran Park Town will be characterised by positive socioeconomic factors with a predominately employed and well-educated community. However, it should be noted that it will be critical to avoid the pitfall of assuming that all residents within the community are affluent and without financial struggle. Stakeholder consultations indicated that with the existing resident population having high home ownership with mortgages, it may impact how they access health service into the future as their requirement for health services potentially increases, particularly those offered in the private health sector, such as allied health and/or elective surgery.

Given the 20-year strategic timeframe utilised for this report, wider population growth and changes will be attributed to development and investment in the Western City District, as outlined by the GSC, including the Western Parklands City and the Western Sydney Aerotropolis. It is anticipated that new urban region will grow from 740,000 in 2016 to 1.1 million by 2036, and to well over 1.5 million by 2056 (GSC, 2018).

Another factor that influences future health service planning and investment is the number of people visiting an area on regular basis, such as for work, education or leisure. In 2016, 12.4 million visitors came to the Western Sydney region (Destination NSW, 2018). This number is expected to grow significantly with the establishment of the Western Sydney Airport and surrounding Western Sydney Aerotropolis. GDC has indicated their commitment to exploring commercial and economic opportunities that may lead to employment options close to residents' homes, as well as those in surrounding neighbourhoods.

In recognising that there will be increased need for health services across all age cohorts, the current population and forecasted projections indicate that Oran Park Town will be characterised by high proportion of children and young people. The concentration of health services required by them and their specific health needs will need to be considered as part of the overall health service picture. Many of those health services, including early childhood nursing, child and family services, youth health, oral health and mental health are likely to be in the domain of public health service delivery. This emphasises that ongoing consultation with

SWSLHD is essential. The need for many of these services can also be met in a complementary way through availability of private health services.

This considerable growth in, and around, the Oran Park Town will generate demand for public and private services including health, social and community services. This can also offer opportunities to private health sector operators looking to expand in the south west region within an established population, such as Oran Park Town. Consultation with public and private health service providers indicated that population as an indicator of demand is a key driver to investment in health service provision within a locality.

#### **4.2.2 CURRENT HEALTH STATUS**

Understanding the health status and contributing behaviours of the local and surrounding areas is critical in planning and developing future health services that meet the needs of the community. By recognising the health needs of the local community, meaningful development, effective implementation and sustainability of relevant health services will proceed.

While health status related data for Oran Park Town is not publicly available at the locality or suburb level, the health status including risk behaviour for the Camden LGA (Table 8) was utilised to assist with determining the health status of the Oran Park Town community. Recognising that while Oran Park Town currently has a younger demographic profile, aging of the population is inevitable, and the health burden of older residents is likely to be experienced within Oran Park Town as this community continues to grow and mature.

PROPORTION OF TOTAL POPULATION	CAMDEN	NSW
<b>Population</b>		
Estimated Resident Population	80,264	7,732,858
<b>Rate per 100,000</b>		
Potentially preventable hospitalisations	2,516.0	2,213.0
Asthma hospitalisations	135.5	146.1
Chronic obstructive pulmonary diseases hospitalisations	198.0	233.9
Circulatory disease hospitalisations	1,738.8	1,630.6
Diabetes hospitalisations	179.2	143.1
Fall-related injury hospitalisations	630.9	680.7
Influenza and pneumonia hospitalisations	405.6	373.3
Stroke hospitalisations	129.3	130.8
Dementia hospitalisation for persons over 65 years	1,779.1	1,616.0
Male cancer incidence	412.7	426.7
Female cancer incidence	533.3	564.3
Alcohol attributable hospitalisations	450.8	555.6
High body mass attributable hospitalisations	857.1	722.0
Intentional self-harm hospitalisations	63.6	100.0
Smoking attributable hospitalisations	579.2	646.7
Suicide and self-inflicted injuries deaths	7.6	10.5
<b>Percent</b>		
First antenatal visit by 14 weeks	82.8	72.8
Maternal smoking in pregnancy	4.9	8.8
Children fully immunised at 5 years of age	96.9	94.6
Children aged 2-17 years who are overweight (but not obese)	17.4	17.0
Adults who are overweight (but not obese)	34.5	35.0
Children aged 2-17 years who are obese	6.5	7.4
Adults who are obese	35.2	30.9
People who undertook low, very low or no exercise in the previous week	65.5	65.3
Adults with high or very high psychological distress	11.2	12.4
Adults who were current smokers	12.1	14.4
People with a profound or severe disability (includes people in long-term accommodation)	4.5	5.6
People with a profound or severe disability and living in the community	4.0	4.9
Persons who often have a difficulty or cannot get to places needed with transport, including housebound	4.3	3.6
Persons who experienced a barrier to accessing healthcare when needed it in the last 12 months, with main reason being cost of service	1.8	2.5

**TABLE 8:** Current Health Status for Camden LGA and NSW,  
Source: DPIE NSW 2019 Population Projections, 2019; NSW HealthStats, 2019, PHIDU, 2020; Cancer Institute NSW, 2019

Over the past five years, the following were indicated for the community of Camden (MoH, 2019):

- Life expectancy for males was 81.1 years and 84.6 years for females
- Hospitalisations attributed to obesity were at a rate of 857 per 100,000 population, have increased by 8% and are higher than the overall NSW rate
- Potentially preventable hospitalisations for all conditions have increased by 18%, were at a rate of 2,516 per 100,000 population and higher than the overall NSW rate

- Diabetes-related hospitalisations, including gestational and diabetes in pregnancy, were at a rate of 179 per 100,000 population, had increased by 84% and were higher than the overall NSW rate
- Circulatory disease hospitalisations were at a rate of 1,739 per 100,000 population and have decreased
- Hospitalisations related to chronic obstructive pulmonary diseases have increased by 10% were at a rate of 198 per 100,000 population
- Falls-related hospitalisations have increased by 5% to a rate of 630 per 100,000 population
- Urogenital, breast and bowel cancers were the most common cancers.
- While cancer incidence rates for men had decreased by 30% over the past five years, rates for females had increased by 9%
- Dementia related hospitalisation rates at 1,779 per 100,000 population have remained higher than the overall NSW rate at 1,616 per 100,000 population.

With higher rates for some chronic conditions, such as diabetes, respiratory and potentially preventable hospitalisations, planning and developing health services that are delivered closer to home, outside the hospital setting and focused on early intervention and prevention are likely to address the health concerns for the residents of Oran Park Town.

To support comprehensive health service planning and development efforts, further investigation of specific health trends related to older people, people with mental health conditions and those experiencing disability are essential in ensuring holistic health service provision now and into the future.

Other factors that need to be considered in the context of current and future service development and delivery include:

- Climate change through increasing heatwaves, storms, floods and drought, leading to cardiovascular diseases, respiratory diseases, infectious diseases (water, food, vectors), allergies, injuries and mental illness (MoH, 2017)
- Disability, defined as physical and mental difficulties encountered by an individual in executing a task or action and problems experienced by an individual in the involvement in life situations (WHO, 2019). For the Camden LGA, 4% of residents have a profound disability (South Western Sydney Primary Health Network (SWSPHN), 2018). More than half of all people with a profound or severe disability reported having a mental or behavioural condition
- Approximately 50% of people with mild mental illness such as anxiety and depression will need or seek treatment. A 9% prevalence was reported for Camden LGA, which is in line with the wider South West Sydney region (SWSPHN, 2018)
- Loneliness has been linked to poorer psychological wellbeing and quality of life. With one in four Australians reported to be experiencing loneliness (APS, 2018), increased levels of social interaction anxiety, suicide and social isolation may result.

The health status, social determinants of health and population of the Oran Park Town are critical factors in determining the short, medium- and long-term health and wellbeing service requirements. It is likely services that minimise hospitalisations related to chronic conditions and enable treatment within the primary care sector are preferred and more likely in the future. Services that provide health promotion, prevention and screening and/or early intervention need to be considered for Oran Park Town.

## 4.3 SERVICES

### 4.3.1 CURRENT AND FUTURE DEMAND

Health service utilisation is dependent on various factors including:

- The health of the community
- Population size and demographics
- Access to and availability of relevant health services.

According to AIHW (2019), health services play a role in the prevention and treatment of diseases and other ill health and injury to treat ill health while also promote health to help people remain as healthy as possible for as long as possible. On average each year, one person will see the GP six times, an allied health professional two times, have 11 prescriptions dispensed and see a specialist once (AIHW, 2018).

Table 9 demonstrates the current and future health service requirements for Oran Park Town utilising current and projected population for Oran Park Town (utilising GDC Development Program assumptions), as well as 3km, 5km and 10km radiuses of Oran Park Town service catchments. This scenario was undertaken to better reflect the potential future population totals and better demonstrate the potential health service supply that may be required over next 20 years. It should be noted that the supply indicated for each projected year and service catchment radius is inclusive of those practitioners within both public and private organisations, working across clinical and non-clinical roles. The purpose of the table is to provide an indicative supply for related clinical professionals across a 20-year period while recognising that service planning is conducted on a broader scale. Appendix 4 provides the maps depicting the location of current health services within the three key service catchments.

	Oran Park Town					3km					5km					10km				
	2019-Actual <sup>α</sup>	2019-calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019-Actual	2019-calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019-Actual	2019-calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>	2019-Actual	2019-calculated <sup>ν</sup>	2021 <sup>ν</sup>	2026 <sup>ν</sup>	2036 <sup>ν</sup>
Total Population	10,233	10,233	14,233	24,233	44,233	17,011	17,011	26,217	37,474	60,398	37,212	37,212	52,510	68,733	118,178	138,248	138,248	160,712	204,636	348,740
Primary Care and Specialist <sup>β</sup>																				
GPs (FSE <sup>δ</sup> )	11	11	15	25	46	20	18	27	39	63	52	39	54	71	122	41	143	166	212	361
Nurses <sup>ε</sup>	6	117	163	277	506	n.d	195	300	429	692	n.d	426	601	787	1,353	n.d	1,583	1,840	2,343	3,993
Medical/Surgical Specialists	0	15	20	35	63	0	24	37	54	86	4	53	75	98	169	13	198	230	293	499
Allied Health <sup>β,ζ</sup>																				
Chiropractors	1	2	2	4	7	1	3	4	6	9	2	6	8	11	18	7	21	25	32	54
Dentists <sup>η,θ</sup>	1	6	8	14	26	2	10	15	22	35	8	21	30	40	68	17	80	93	118	201
Dietetics <sup>ι</sup>	1	5	6	11	20	1	8	12	17	27	5	17	24	31	54	15	63	73	93	159
Occupational Therapists	0	5	6	11	20	0	8	12	17	27	6	17	24	31	53	7	62	72	92	157
Optometrists	1	2	2	4	8	1	3	4	6	10	3	6	9	12	20	12	24	27	35	59
Pharmacy <sup>κ</sup>	1	9	13	21	39	2	15	23	33	54	8	33	47	61	105	22	123	143	182	309
Physiotherapists	3	9	13	22	41	1	16	24	34	56	8	34	48	63	109	21	127	148	188	321
Podiatrists	1	2	2	4	7	1	3	4	6	9	2	5	8	10	17	11	20	24	30	51
Psychologists <sup>λ</sup>	1	9	13	22	39	1	15	23	33	54	5	33	47	61	105	23	123	143	182	310
Speech Pathology <sup>μ</sup>	2	5	6	11	20	3	8	12	17	27	5	17	24	31	54	12	63	73	93	159
Diagnostic Service <sup>β</sup>																				
Pathology (collection centres) <sup>μ</sup>	1	5	7	12	22	2	9	13	19	30	11	19	26	34	59	31	69	80	102	174
Radiology (centre)	1	n.d	n.d	n.d	n.d	1	n.d	n.d	n.d	n.d	7	n.d	n.d	n.d	n.d	17	n.d	n.d	n.d	n.d
Xray (units)	1	2	2	4	8	1	3	5	7	11	n.d	6	9	12	21	n.d	24	28	36	61
Ultrasound (units)	1	4	5	9	17	1	7	10	14	23	n.d	14	20	26	45	n.d	53	62	78	134
CT (units)	1	1	1	2	3	1	1	2	3	4	n.d	3	4	5	9	n.d	10	12	15	25
MRI (units)	1	0	0	0	1	1	0	0	1	1	n.d	1	1	1	2	n.d	2	3	3	6
Public and Private Hospital Activity <sup>ν</sup>																				
Same Day Public Admissions	n.d <sup>ξ</sup>	1,398	1,944	3,310	6,042	n.d	2,324	3,581	5,119	8,250	n.d	5,083	7,173	9,389	16,143	n.d	18,885	21,953	27,953	47,638
Overnight Public Admissions	n.d	1,207	1,679	2,859	5,219	n.d	2,007	3,094	4,422	7,127	n.d	4,391	6,196	8,110	13,945	n.d	16,313	18,964	24,147	41,151
Same Day Private Admissions	n.d	1,226	1,705	2,903	5,299	n.d	2,038	3,141	4,489	7,236	n.d	4,458	6,291	8,234	14,158	n.d	16,562	19,253	24,515	41,779
Overnight Private Admissions	n.d	490	682	1,161	2,119	n.d	815	1,256	1,795	2,893	n.d	1,782	2,515	3,292	5,661	n.d	6,622	7,698	9,802	16,705

**TABLE 9:** Current and Future Health Service (Public and Private) Supply for Oran Park and the Three Key Service Catchment, 2019-2039  
Source: AIHW, 2013; 2016, 2018; 2019; Australian Government, 2018; Australian Medical Association (AMA), 2019; DPIE NSW 2019 Population Projections, 2019; GapMaps, 2019; Google, 2020.

**Notes:**

- <sup>α</sup> The values displayed in 2019-Actual columns represent services due to variability in the identification of individual practitioners/unit numbers (FTE) at the service level.
- <sup>β</sup> Actual and projected values includes practitioners and units providing services within public and private health sectors including within hospitals and community as well as private practices.
- <sup>γ</sup> Projected values, unless stated otherwise, are based on Full-Time Equivalent (FTE) (standard measure based on 38 hours a week).
- <sup>δ</sup> For GPs for 2019 Actuals, is based on practitioner number. While, 2019-Calculated, 2021, 2026 and 2036, values are counted as Full Service Equivalent (FSE) (a measure based on 37.5 hour working week). Source: AMA, 2019.
- <sup>ε</sup> For Nurses for Oran Park Town 2019-Actuals, three are within the primary care service, two providing public child and family nursing services as part of the LHD and one providing Karitane child and family services. This value is based actual practitioners as compared to service in Note <sup>α</sup>.
- <sup>ζ</sup> The data for the allied health professions indicated below are informed from the annual registration process, together with data from a workforce survey that is voluntarily completed at the time of registration to create the National Health Workforce Dataset (NHWDS). Data in the NHWDS includes demographic and employment information for registered health professionals. The health professionals may be an employee or self-employed within a public and/or private organisation. It may include allied health professionals who hold provisional registrations and employed within clinical and/or non-clinical roles such as teaching, research and consultancy.
- <sup>η</sup> For Dentists for Oran Park Town 2019-Actuals, eight dentists were identified to be servicing both an Oran Park clinic and Harrington Park clinic.
- <sup>θ</sup> Excludes dental prosthetists, dental hygienists, oral health therapists and dental therapists.
- <sup>ι</sup> Included modelled estimates based on overall allied health professions rate per 100,000 as indicated by AIHW. (AIHW, 2013; 2018)).
- <sup>κ</sup> includes registered pharmacists only.
- <sup>λ</sup> includes Clinical psychology, counselling psychology, forensic psychology, clinical neuropsychology, organisational psychology, sport and exercise psychology, educational and developmental psychology, health psychology and community psychology.
- <sup>μ</sup> modelled estimate utilised due to rate per 100,000 not determined.
- <sup>ν</sup> Public and Private Hospital activity included public acute, public psychiatric, private free-standing day hospital facilities and those coded as other private hospital including private psychiatric hospitals.
- <sup>ξ</sup> n.d indicates that not determined, given that practitioners and/or services could not be confirmed within data validity parameters for the specific catchment groups.  
This does not include outreach services provided by public and/or private services/operators.

Over the next 20 years, the estimated supply requirements for all health service categories across all service catchments will increase. This is primarily driven by the considerable growth in population within Oran Park Town and the surrounding 3km, 5km and 10km radius catchments. By 2036, the health service supply for Oran Park Town will be 46 FTE GPs, 227 FTE allied health practitioners and personnel (e.g. Chiropractors, Dentists, Dietetics, Occupational Therapists, Optometrists, Pharmacy, Physiotherapists, Podiatrists, Psychologists and Speech Pathology), 22 pathology collection centres, 8 X-rays units, 17 ultrasound units, 3 CT units and 1 MRI unit.

Currently, there is a general practice-led primary care, MyHealth Oran Park service within the Oran Park Podium. This service has 11 individual GPs, 2 nurses, 3 allied health practitioners. This is collocated with SWSLHD IHH, Karitane Early Parenting clinic and a community Pharmacy.

Consultation with MyHealth Oran Park stakeholders indicated long wait times for the existing 11 GPs, as well as overcrowding in waiting rooms and ongoing extended operating hours. This highlights that the supply for GPs for the community is struggling to meet the demand. By 2021, the estimated supply requirement for the projected population is 15 Full Service Equivalent (FSE) GPs.

Karitane services are co-located with the MyHealth Oran Park service. Consultations conveyed that limited capacity to expand within their current infrastructure is impeding on their ability to meet the current and increasing demand they are experiencing.

SWSLHD, operating the OPFH (SWSLHD IHH), have also outlined that due to rapid growth the centre is now operational 7 days a week for extended hours. As the needs of the community continue to evolve, other allied health practitioners have been engaged on a sessional basis.

Further supporting general practice and primary care services, are the twelve allied health services located within Oran Park, such as physiotherapy, dietetics, chiropractor, podiatry, speech pathology and psychology. Other allied health services are predominantly located in the larger centres such as Camden, Campbelltown and Liverpool. There are opportunities for allied health services to increase within the current population as indicated by the supply requirement projected to increase by 2021 (Table 9). Pharmacist, physiotherapist and psychologist supply will increase to 13 FTE each by 2021. In the long term, a combined total of 227 FTE supply across all allied health disciplines will be required to service the emerging Oran Park Town community.

The provision of diagnostic services is essential to the identification, treatment and management of health condition. Currently, there is one pathology collection centre and one medical imaging service, expected to be operational by mid-2020, within Oran Park Town. With demand in public and private hospital activity expected to increase over the long term, there may be a market opportunity for expanded pathology and medical imaging services that supplements these services.

Recent trends have identified that ED presentations for non-urgent conditions can be managed and seen within the primary healthcare setting (Uscher-Pines et al, 2013). Semi-urgent and non-urgent ED presentations to Campbelltown Hospital accounted for 47% of all ED presentations in 2017/18 (Bureau of Health Information (BHI), 2019). This presents an opportunity for primary health care providers to provide services locally to capture this proportion of health service activity.

Medical and surgical specialists commonly practice and conduct assessment and review at rooms outside a public health facility. There are no medical and/or surgical specialists within a 3km radius of Oran Park Town. Opportunities exist here in the future for new consultants looking to establish a service within a contemporary integrated model with health services within Oran Park Town and/or a hub and spoke model with the established public and private services located in Macarthur.

Day surgery and private hospitals support the public health system in their ability to provide care to residents through private health insurance. In most cases, these facilities provide planned high-volume day only and/or short stay surgical services. There are no private health service facilities within a 10km radius of Oran Park Town.

Trends have indicated that delivery of same day private activity have increased while overnight private services are declining (AIHW, 2019). This would indicate the potential for day medical, surgical and procedural services within the medium to long term. The estimated hospital activity indicates the likely number of hospital admissions that would be expected based on average current hospital admission rates. As there are no existing public or private hospitals within Oran Park, this estimate represents the potential additional burden on the surrounding existing public and private health services.

A key driver for the need to expand existing or develop new hospital facilities is understanding the extent to which the existing and future planned capacity (e.g. the redevelopments of the Campbelltown Hospital and Liverpool Hospitals) can meet demand. Additional private hospital demand is likely to be of interest to the market especially regarding the demand across the wider 3km, 5km and 10km catchments beyond Oran Park Town.

Understanding the casemix of this demand, there is potential to judge the feasibility of a new private hospital services for Oran Park Town and the wider region in the future. With Camden LGA rates for procedural and surgical admissions in private hospital higher than the NSW rates (PHIDU, 2019), there is a potential market for private health service delivery. This is supported by higher rates of private health insurance coverage exhibited by Camden LGA residents as compared to NSW. Oran Park Town residents mirror this trend so there may be opportunities for locally based services that provide services to a wider catchment for procedures such as Ear nose and throat, ophthalmology, cardiac catheterisation, knee replacement, Gynaecological, and colonoscopy to the wider Camden catchment.

Currently, there is a retirement village operating within Oran Park Town, with two RACFs being constructed within Oran Park Town in 2020. Anglicare have commenced work on a new RACF, consisting of 80 high level places (Oran Park Town Newsletter, Jun-Jul 2019). This new facility will provide a home for older people in need of support and will employ roles such as nurses, occupational therapists and other care related staff. It will be built alongside the existing Anglicare Oran Park Retirement Village, with current capacity of 77 retirement living villas and an additional 67 villas planned on the site (Oran Park Town Newsletter, Jun-Jul 2019). The second RACF, which will be operated by Thompson Health Care will comprise of 244 beds (Oran Park Town Newsletter, Dec 2019-Jan 2020).

The two RACFs in Oran Park Town will supplying up to 324 beds by 2021, with projected calculations demonstrated that an additional 75 places for people aged over 70 years will be

required by 2036. With current supply expected to be closely matched with expected future requirements, the importance of recognising Oran Park's growth trajectory and developing services accordingly has been realised in this case.

The emergence of wellness services should also be considered. With the increasing trend in maintaining physical and mental wellbeing, as well as the treatment of chronic conditions outside traditionally pharmacological and biomedical models, the demand for these services is increasing. Wellness services range from traditional single purpose gyms to technologically advanced health optimisation centres. Currently, there is one gym or lifestyle services in Oran Park Town.

It is recognised that there are limited locally available services in all categories for the residents of Oran Park Town. With current health service trends moving towards preventative care, providing care closer to the home and the management of chronic and complex care within the primary care setting, demand for community based services offering early intervention and chronic care management are likely. Following the anticipated population growth and increase in visitors to Oran Park Town as commercial and retail developments are completed, future service provision needs to be planned and developed with sound planning methodologies.

Understanding how people use health services and which clinical specialities is important in future service planning. For example, Australians aged 65 and over are more likely to utilise private hospital services and specialist services compared to children aged 0 to 14 who utilised more GP and community based services (AIHW, 2019). It is emphasised that health services will need to continually adapt by identifying and understanding the shifting health needs of diverse groups and communities. Specifically, future services will need to be thoughtfully and carefully integrated to provide comprehensive health care and promote wellness for all ages (Kapadia, 2012).

#### **4.3.2 CURRENT TERTIARY AND QUATERNARY SERVICES**

##### **PUBLIC HEALTH SERVICES**

For Oran Park Town, current public health services are provided by SWSLHD and include quaternary, tertiary specialist hospital-based emergency, inpatient and outpatient, as well as community-based services (SWSLHD, 2018). Liverpool, Campbelltown and Camden Hospital are located approximately 23.4kms, 13.8kms and 9.6kms respectively (Google Maps, 2019).

Stakeholder consultation with public health services indicated that currently there is no demand for new public hospitals, given the redevelopments occurring at Liverpool and Campbelltown. Planning efforts for those have considered the population growth and expected demand from Oran Park Town and the surrounding areas. It was highlighted that given the health status and demography of the current and emerging community, early intervention and prevention services located within the community are more likely to serve the needs of the residents of Oran Park Town.

## PRIVATE HEALTH SERVICES

There are no private hospitals located within a 10km radius of Oran Park Town. The closest private hospitals are located in the Campbelltown-Macarthur and Liverpool centres.

Review of existing development applications for day surgeries and/or private hospital within a 5km radius indicated they have been deferred or abandoned.

With an anticipated population of 1.12 million of this wider catchments, private hospital services may be required to cater for the entire spectrum of generational health needs, such as maternity, orthopaedics, heart and stroke and cancer. This is in the context of the broader Western Parkland City and Western Sydney Aerotropolis developments and the associated health services planning that will need to occur to support these two long term strategies.

Stakeholders from private health services highlighted that development of new private hospitals requires complex review, including the following factors, but not limited to:

- Co-location with tertiary public health services
- Review of private health insurance rates
- Coverages and utilisation
- Hardes data analysis
- Demographic and socioeconomic data
- ABS-related indicators
- Current and projected casemix
- Market competition
- Revenue opportunities.

### 4.3.3 CURRENT PUBLIC COMMUNITY AND POPULATION HEALTH SERVICES

A range of community-based prevention, early intervention services and acute and post-acute health treatments and care is provided by SWSLHD. The health services provided ensure access to multiple health disciplines and specialties, allowing the continual health care management of individuals and communities. These services are provided from dedicated community health centres, early childhood health centres, as well as in preschools, schools, homes, non-government organisations and workplaces. Programs and services available include vision screening, occupational therapy, speech pathology, physiotherapy, social work, psychology, dietetics and nutrition, medical, child protection and out of home care (SWSLHD, 2018).

Population-based health services are also managed by the SWSLHD. The LHD works with local councils, state government agencies, communities and developers to plan and develop built environments. The LHD hopes to promote health through programs that focus on lifestyle-related causes of ill health. This is intended to create physical and social environments that promote health and well-being.

There is a strong existing relationship in South Western Sydney between the LHD and the Primary Health Network (PHN). An Integrated Health Committee supported by a Statement of Intent, oversees improved integration of services and information between primary care

services and the LHD (SWSLHD, 2016, p.6). This includes a strategic partnership between the SWSLHD, SWSPHN and Western Sydney University (WSU) School of Medicine that provide an Integrated Primary Care Centre (IPCC), the IHH, in Oran Park Town. Further detail on this service is outlined in Section 4.1.3 - South Western Sydney LHD Strategic Priorities To 2021 And Care In The Community Clinical Service Plan.

To support the young families that feature prominently in the population profile of Oran Park Town, Karitane provides services through their Oran Park Parenting Centre. This service offers secondary level parenting support for those families identified with complex parenting challenges in early childhood. Nursing and allied health consultations include comprehensive interventions (e.g. counselling, problem solving, child growth and development, social support, parenting skills and child-parent interactions), provision of information resources and linking to other relevant services. Karitane is also the leading provider of digital early parent support services in NSW. Stakeholder engagement with Karitane indicated that there is a need to continue to expand Karitane services within Oran Park Town as the community grows and the number of households with young families increases. Consultations with Karitane recommended a hub and spoke model where specialised services provided by Karitane would be delivered within a central fit for purpose location within Oran Park Town, centred on integration and telehealth.

#### 4.3.4 CURRENT SOCIAL AND COMMUNITY PROGRAMS

From inception of Oran Park Town, GDC has been committed to meeting the needs of their community. To establish best practice initiatives that support social sustainability the Strategic Social Plan (Landcom, 2008) was developed and formed the framework for the implementation of identified social sustainability objectives. As part of this strategy, a Community Development Welcome Program was established which sees each new household welcomed to Oran Park Town with a welcome gift and information pack to help them settle into their new neighbourhood (Heart Foundation, 2018).

Ten key strategies from the Strategic Social Plan included:

- Employment of a Community Planning Manager responsible for implementation of the Social Plan
- Development and implementation of a Town Centre Employment and Local/Home Business Strategy
- Establishment of a Retirement Village (Seniors Living) with Aged Care Facilities
- Provision of an interim Community Meeting Place and development of a Management and Operations Policy for the facility
- Supporting the establishment of a Human Services Network for the South West Growth Center
- Supporting the development of Camden Council's Family Day Care Scheme in Oran Park
- Implementation of a Community Development and Welcome Program
- Development, securing of funding for implementation of a Smart Travel Program
- Supporting the development of public and private schools incorporating opportunities for School Learning Commons

- Supporting community use of a broadband network across the Oran Park Precinct.

While the Camden Council Leisure Centre is being developed within Oran Park Town, an interim community space has been made available for social programs and community activities. This has allowed local service providers to deliver a range of social initiatives, as well as providing a venue for recreational activities and a community meeting point (Heart Foundation, 2018).

Community managed organisations that provide or have provided services to the Oran Park Town community included:

- Afford – Disability supports services, including day programs
- Challenge Community – Group homes for people requiring mental health support and 24-hour support
- Headspace Oran Park – Drug and alcohol counsellor, new access coach, youth access clinician (YAC) and a psychologist (Oran Park Town Newsletter, Aug-Sep 2019)
- Head to Health (H2H) – Physical and mental health information and resources tailored to an individual (Oran Park Town Newsletter, Feb-Mar 2019)
- Disability Macarthur – NDIS approved service provider and a leader in providing support services to people with disabilities. Specific services currently provided include the Child Assessment Referral Clinic (CARC), peer support groups, life skills workshops and those offering specialised and tailored assistance (e.g. transition to school, linking to other services and managing parental stress)
- Northcott – A group home for people with disabilities located within Oran Park Town
- The Benevolent Society – Community playgroup for children aged 0 to 5 years to support and promote community, belonging and connectedness (Oran Park Town Newsletter, Feb-Mar 2019)
- Big Yellow Umbrella's (BYU) – Community programs aimed to strengthen, enrich and empower the community of Camden by providing a wide range of services for people residing in the Camden LGA (Oran Park Town Newsletter, Feb-Mar 2019)
- Myrtle Cottage (registered NDIS provider)– Day activities for people who are frail aged, younger people with disabilities and people with dementia. Activities provide mental stimulation and encourage companionship.

Considering the current services and programs available to the residents of Oran Park Town, there are opportunities for expanding existing and developing new health, social and wellbeing services.

In order to maintain the health and wellbeing of the current and emerging resident population, it is imperative that the supply of social, community and health services is assessed and evaluated regularly as new data and service innovations present themselves. This will result in maintaining the delicate balance between supply and demand while foster best health outcomes now and into the future.

#### 4.3.5 FUTURE CONSIDERATIONS

Moving towards the medium term (Table 1), there will be a shift to an increased requirement for admitted inpatient services, day surgical, and private hospital services as the young adult population, particularly those aged 25–30 years, transition into older adulthood. Primary health and community based services will need to be maintained to meet the demand of the younger and older population on either side of the life span (as indicated by projected age-distribution - Table 5). Imaging and diagnostic services will need to be embedded to support integrated and timely access for community and hospital pathways. Additionally, aged care services and residential facilities will be required to support the increasing older people who may age in place, influenced by the design of Oran Park Town.

In the long term, key infrastructure beyond the Oran Park Town such as the development of the Western Sydney Airport and urbanisation of the Western Parklands City and Western Sydney Aerotropolis, will necessitate the need for additional services. Current trends are indicating that more services will be delivered in the community, closer to or within people's homes. Recognising this will impact the type of services that will be required and additional analysis on specific specialities and models is warranted.

Considering the planning principles and individual indicators utilised by public and private service providers or operators, the following were noted during review and consultations for consideration of establishing new or expanding services:

- Demand requirements in the context of population growth at intervals of 10,000 people. For example, given the current population of Oran Park Town existing services can be considered under pressure currently and within the short term. It should be noted that service providers utilise this as a measure of service viability.
- Enhanced integrated care models with tertiary, specialist, ambulatory and community services collocated and coordinated within hubs are considered when existing services exceed 18,000 unique registered people and the catchment population reaches 100,000. Consultation with SWSLHD indicated that current services will meet the needs of Oran Park Town over the next 10 years.
- Increasing number of ED presentations are from Oran Park Town. This information would be available through the integrated partnership with the MyHealth Oran Park medical centre and SWSLHD. Hospital avoidance is a key strategy for public tertiary health services and an increasing number of ED presentations from a locality can signify reduced access and/or availability to local services.
- Long waiting times in current primary health services resulting in residents seeking care outside of Oran Park Town.
- A key infrastructure driver will be the delivery of the railway link. Once the railway link has been confirmed, initiating discussions with public and private health services could lead to commitment for service provision. This is predicated on the notion that improved transport links signify economic opportunity through ease of access to employment, thus increased worker and visitor population, which contributes to the demand catchment for service provision.

## 4.4 STAKEHOLDER CONSULTATION AND FINDINGS

Thirty-four individuals, representing twenty-four organisations, were identified by GDC as key stakeholders (Appendix 2). Nineteen stakeholders were available for interview. The stakeholders ranged from public, private and the not for profit sectors, representing healthcare, planning and strategy, local government, advocacy and investment.

### 4.4.1 GREENFIELDS DEVELOPMENT COMPANY VISIONING MEETING

To initiate the stakeholder consultations, a visioning interview with the GDC Executive Team was held, on 12<sup>th</sup> August 2019, to articulate GDC's overall strategic direction for Oran Park Town. GDC define their vision for Oran Park Town as:

*'Provision of centralised and integrated health services that continually improve and promote the health and wellbeing of the community of Oran Park, with connectedness of services and community remaining at the forefront.'*

It was noted that centralised health services incorporating both public and private health services will maximise access to comprehensive health services and minimise health gaps for the residents of Oran Park Town. GDC stated that it aims to create a town that is to *"be inclusive of the public system and have a much wider range of services for the community, for all to access"*. This emphasised that ensuring residents, regardless of their socioeconomic situations, can access the health services they require, as key objective for GDC.

GDC expressed the importance of urban design, demonstrating its commitment to promoting healthy lifestyles for its resident through thoughtful master planning, infrastructure design and implementation.

Evidently, cycleways, pedestrian access and a considered masterplan, featuring closely located health, social and other community services, strengthens the design of Oran Park Town Centre and the surrounding areas. This has led to Oran Park Town being developed as a self-sufficient and complete town, known for accessible and responsive service provision.

It was highlighted that a key strength of Oran Park Town is its diversity that will continue into the future, with both residents choosing to move into and visitors coming to Oran Park Town. There was a strong emphasis on social interaction and the affinity that people have with the suburb. This has been centred on creating a place of gathering for social and commercial purposes. Promoting Oran Park Town and its achievements are strengthened due to the high level of political and media interest in Oran Park Town.

Health and education were raised as *'the two biggest priorities'*. The key drivers for these services were noted as the increasing number of families residing in Oran Park Town, growing demand for current schools in the area, with the opening of the Oran Public School in 2020, and the increasing demand for the current number of GPs servicing the community. Furthermore, a strong demand for chronic care services including diabetes, mental health and early childhood services was outlined.

GDC conveyed that their objective is *'not only about keeping people healthy but providing additional jobs closer to home'*. Employment is another demand of the community and it was highlighted that a comprehensive health service will serve the dual purpose of service provision and employment for Oran Park Town. The need for higher education and training opportunities, with universities and TAFE, based in Oran Park Town was highlighted.

It was acknowledged that good public transport connectivity is a vital factor for the community now and into the future. This can be achieved by mass public transport options which include the planned railway station for Oran Park Town and increasing bus services to neighbouring suburbs and towns.

The government process was outlined as a key challenge, including public agencies' lack of understanding and acknowledgement of the (actual) growth and development of Oran Park Town. It was indicated that there has been a planning focus on surrounding suburbs. It was emphasised that Oran Park Town is further along its development journey due to its unique sole landowner and single developer model. It was noted that *'there is a risk that government may lose the opportunity'* to future proof and proactively plan for service provision. This risk was also extended to the private sector.

GDC have maintained an advocacy role within Oran Park Town due to their commitment to supporting their community to be well educated and healthy. With Oran Park Town designed on a vision of a healthy and connected community, from both social and infrastructure design perspectives, GDC has continued to promote the health and wellbeing needs of the Oran Park Town community. Through the utilisation of the Residents Survey reports and Community Partners Meeting, service providers have the opportunity to adapt to the Oran Park demography and align their service provision accordingly based on current data.

Considering that *'everything in Oran Park Town has been design and steeped in principles'*, co-location and strategic design has influenced the social cohesion and connectedness of Oran Park Town. The specific example outlined is the colocation of the Anglicare RACF, place of worship and a school, facilitating intergenerational engagement and creating a *'community feeling'* that is pivotal to the success of Oran Park Town.

GDC is committed to designing, planning and delivering infrastructure that will benefit the community. While, this may be difficult to quantify and market due to the size of the current population, it is at the forefront of key strategic decisions.

#### 4.4.2 STAKEHOLDER INTERVIEWS

Following the GDC Visioning Meeting, key stakeholders were identified and interviewed (Appendix 2). Throughout the consultation process, the following themes emerged and have been detailed below:

- Integration and Partnership
- Infrastructure Requirements
- Built Environment
- Social Determinants of Health
- Cultural Diversity
- Health Literacy and Early Intervention
- Business Models and Operational Sustainability



## INTEGRATION AND PARTNERSHIP

Numerous stakeholders, particularly those from SWSLHD, Karitane and SWSPHN, indicated that integration of services is essential to the provision of comprehensive and contemporary services. The degree of required integration varied among the stakeholders and included, but was not limited to:

- Co-location of health and community services (e.g. LHD and Department of Community and Justice (DCJ) services)
- Information system and data sharing capabilities
- Multidisciplinary clinics with tertiary and primary health service providers.

These stakeholders highlighted the importance of integration in provision of seamless health services throughout the care continuum.

Stakeholder consultation with MyHealth Oran Park indicated strong governance as one of the key enablers for integration of health services. A common corporate and clinical governance framework for all services was recommended to facilitate coordinated and synchronisation of care delivery.

In recognising that integration can also be applied to bringing diverse cultural and community groups together, representatives from the Camden Economic Regional Taskforce (CRET) conveyed that opportunities that support integration and connectedness of diverse groups should be explored, particularly as Oran Park Town exhibits the greatest degree of cultural diversity within the Camden LGA.

Various stakeholders highlighted partnerships as a key enabler to successful implementation of integrated initiatives, engagement of stakeholders across all sectors and improved outcomes for the community. For example, CRET regarded public-private partnership as vital for the attraction of the health workforce to the region. While, Disability Macarthur and First Steps Child and Community Centre identified that partnerships are critical to collaborative service delivery and engagement of the community being served. Government agency stakeholders including the LHDs, NSW Department of Education and the Camden Council regarded partnerships as critical to maintaining the service infrastructure and community development that has been undertaken by GDC. It was acknowledged that while Oran Park Town benefits from a sole landowner currently, partnerships with the Council, as well as other public, private and not for profit agencies, must continue to ensure the best outcomes for current and future residents of Oran Park Town.

## HEALTH SERVICE INFRASTRUCTURE REQUIREMENTS

Future proofing infrastructure to meet the needs of the future community within Oran Park Town was a key objective for GDC. Stakeholders discussed infrastructure in the contexts of the built form and information technology. For example, LHD and private health service providers recognised health service delivery will only be considered once the demand within Oran Park Town is present. However, future proofing infrastructure that is currently being built by GDC would facilitate implementation of relevant services when the service conditions are met. Creating the infrastructure with the specifications required for key components that enables health service provision (e.g. operating theatres or MRI) into the future, while being used for

another purpose to satisfy a short to medium term need is a wise use of resources, while in parallel fostering long term partnerships with health service providers. Stakeholder consultation with Health Infrastructure NSW, the infrastructure division of the NSW public health system, indicated that there is a need to consider the design of the building to accommodate future health service delivery. Another strategy includes partnering with other public and private health provided to encourage the creation of a health precinct

With the rapidly evolving nature of technology and information systems, it was recognised that the interdependencies of the health system and infrastructure that enables health service delivery, such as virtual care or automated health supply chain transportation models, requires investment. Stakeholders including Karitane, the LHDs and NSW Department of Education expressed that provision of respective services to improve access to and delivery of relevant services will be increasingly dependent on the community's access to the information technology. Currently, Karitane consists of a digital hub that delivers its face to face support digitally and the newly built Oran Public High School will increasingly incorporate technology into their learning practices. Stakeholders conveyed the needs of the current, emerging and future residents of Oran Park Town to have access to up-to-date and reliable technological solutions (e.g. 5G) are vital.

## BUILT ENVIRONMENT

Planning and development of Oran Park Town within healthy building principles was recognised among the stakeholders. Oran Park Town was positively remarked as demonstrating the importance of considered master planning and its influence on the health and wellbeing outcomes of the current and future community. As Oran Park Town develops and increases in density, there is a requirement for areas and places where residents can live, work, play, study, pray and age in ways that allow them to be safe, healthy, and reaching their full potential. Creation of safe spaces that allow the community to participate and socialise in the ways that meets their needs was supported and highlighted. There was a strong emphasis on social interaction and the affinity that residents have with the suburb. This was centred on creating a place of gathering for social and commercial purposes, regardless of market forces that influence these.

It was recommended that the built environment will need to support access to health services, regardless of socioeconomic situations. GDC's commitment to promote healthy lifestyles for its residents by thoughtful master planning, was noted.

In particular, stakeholders reflected on the importance of addressing the challenges associated with climate change and the exploration of ways that the design of the built environment (e.g. green spaces -adequate tree canopies lining footpaths and community areas) can mitigate the effects of climate change was emphasised. For example, SWSLHD and Anglicare stakeholders commented on the needs to maintain a healthy built environment by ensuring people have access to green spaces, shelters, seating and drinking water, as well as reduction of reflective surfaces to reduce heat to avoid the heat island effect and manage other extreme weather events.

## SOCIAL DETERMINANTS OF HEALTH

Various stakeholder conveyed the importance of the relationship between the social determinants of health and overall health outcomes. The NSW Council of Social Services (NCOSS) strongly advocated for social infrastructure, including neighbourhood centres, family support services and programs, community transport and in-home support. For Oran Park Town to remain a well and connected community, it was recommended that strategies that foster social inclusion and connectedness is critical. Stakeholders reflected that existing initiatives such as intergenerational programs between aged care services and primary school have contributed to this.

Stakeholders from the education sector emphasised the association between participation in extracurricular activities among school-aged children and young people and better health and wellbeing outcomes. Other strategies include safe walkable places and community development programs created in partnership with Council, local health and social services and the broader community.

Leveraging off the benefits of single land ownership through a coordinated master plan for the town centre and surrounding areas of Oran Park Town was stated. Some stakeholders indicated that as the community grows and GDC's sole land ownership and master planner role diminishes, ongoing engagement with the Council is critical. This will encourage a seamless transition in maintaining existing projects that meet the social needs of Oran Park Town residents, such as the continuation of community events and surveys.

## CULTURAL DIVERSITY

It was highlighted that the emerging cultural diversity is evident and likely to grow into the future, particularly as activation of the Western Parkland City and Western Sydney Aerotropolis occurs. It was emphasised that new cultural communities within Oran Park Town want to create a sense of belonging and social cohesion, which are critical in reducing isolation and its impact on mental health.

It was recommended that more culturally diverse initiatives need to be implemented to encourage participation, engagement and empowerment in the Oran Park Town community.

Stakeholders conveyed that soft entry points, such as the community centre, library, sporting clubs and shopping centre, should be utilised to encourage access to health services, improve health literacy and strengthen the health promotion and disease prevention for emerging culturally diverse communities. Representatives from Camden Council highlighted while the region has only recently been expressing the cultural diversity that is common in other LGAs, such as Liverpool or Canterbury-Bankstown, there is active participation to promote inclusion and foster the sense of belonging for residents from diverse cultural backgrounds.

## HEALTH LITERACY AND EARLY INTERVENTION

Health literacy is key to supporting positive lifestyle habits and needs to be maintained for current and future communities. It was highlighted that key intergenerational tools that can be utilised across the lifespan to influence the health and wellbeing of family units should be

promoted. For example, using the education system to coach children about positive health behaviours so they can communicate to their parents and family members.

With the rise in chronic diseases, health literacy is critical for engagement of individuals in their own health care, leading to disease prevention and/or disease management. Increasing health literacy among the community has population wide benefits and leads to active involvement in and improved access to health care services.

With Oran Park Town being designed on a vision of a healthy and well community from both social and infrastructure design perspectives, there are opportunities to maximise health promotion, prevention and early intervention through population-based initiatives. Western Sydney University stakeholders highlighted that research in this area has demonstrated that good health literacy promotes positive lifestyle habits. Initiatives that support good health literacy need to be supported and implemented for current and future communities.

## **BUSINESS MODELS AND OPERATIONAL SUSTAINABILITY**

Another success factor of Oran Park Town and its healthy and well community is the sustainability and viability of health services for the community. Operational sustainability is important to consider as it allows health services providers, particularly private health service providers, to offer and operate services to the community. If conditions are not right for sustainable and viable business models, access to more specialist services could be restricted. Stakeholders emphasised that demand for services and co-location with tertiary public health services are critical drivers to developing and operating within a region.

Throughout this process, all stakeholders reflected that service development within Oran Park Town will be influenced by the strategic contexts of the Western City Parklands and the Western Sydney Aerotropolis. This also includes the delivery of key infrastructure such as the proposed railway station, the public high school and radiology services as well as the actual resident population and subsequent service catchments at any given time.

While the Western Sydney Aerotropolis and broader Western Parklands City are in an infancy stage, the proposed health services and associated models have an impact on the planning and delivery of health services within Oran Park Town. Stakeholders from the Western City and Aerotropolis Authority (WCAA) highlighted that with no intention to build another tertiary public hospital in the region, health service provision will be community based upon collaborative and integrated models among the public, primary health and private sectors. This is in line with current health service delivery trends exhibited and expressed by stakeholders such as the SWSLHD, SWSPHN, Karitane, Health Infrastructure NSW, WCAA and Parliament, whom indicated that services of the future will be locally and community based and enabled by technology and infrastructure that reduce the requirement for hospitalisation with early intervention and prevention at the centre of health service delivery.

While private operator stakeholders noted and agreed with the principles of preventative care and early intervention models, they acknowledged that revenue and demand are key drivers for health service delivery in the sector. At this time, business models are centred on the delivery of acute services and interventions. However, integration with public health services was regarded key for these stakeholders.

For public sector stakeholders, the following were identified as central to the development of health services and keeping the community healthy and well:

- Determining the demand for services provision
- Addressing the needs of the emerging cultural diversity
- Supporting and improving health literacy
- Engaging the community to foster safety, connectedness and social cohesion
- Providing coordinated and integrated care among government and private service providers across health, welfare and community services sectors
- Ensuring that principles of healthy built environments continue to inform future infrastructure.

From the perspective of private sector stakeholders, the following were noted to encourage service development:

- Ensuring the demand for services is present
- Understanding the market of current and proposed operators
- Presence of a range of specialist
- Complimenting existing public services through colocation or within a short distance.

## 4.5 RAPID LITERATURE REVIEW

For communities to thrive and have best health and well-being outcomes, enablers such as health promotion, access to health services, collaboration and partnerships, as well as comprehensive health literacy, are imperative. The health and well-being of established and emerging communities, within developing towns such as Oran Park Town, have been identified as priorities for local government, urban developers, and healthcare providers.

This high-level rapid literature review assessed a range of academic articles related to the promotion of health and well-being in established and emerging communities and revealed three common themes relevant to healthcare and well-being in new communities. These themes included:

- Patient engagement
- Developing a healthy built environment
- Overall health service planning

It was identified that strategies that integrate all three themes will lead to better health outcomes for established and new communities.

### COMMUNITY ENGAGEMENT

Engaging communities to participate in the planning and development of health services is critical to support positive health outcomes for communities. Emerging communities must provide a range of diverse programs to strengthen the population, including those targeting culturally diverse residents. Residents of the community that are involved in the development of such programs play an influential role, possessing expertise that can be utilised to improve health service development and delivery. Bombard et al. (2018) suggested that integrating

community engagement in health service planning improves quality of life, reduces hospital admissions and enhances the overall accountability of health services. High level community partnerships personify shared leadership within primary care settings of providers and consumers of those health services (Bombard et al. 2018).

By encouraging community members with a diverse range of backgrounds and skills, to be partners in the planning of health services will lead to enhanced collaboration, cooperation and co-production of services that meets the needs and expectations of the community. For example, involvement of community members in patient and family advisory committees offers opportunities to co-design health services and identify issues and concerns (Majid & Gagliardi, 2019). Other opportunities include engagement in the development of policy, models and process that underpin health service delivery in their respective community. These alliances encourage knowledge sharing across the healthcare system to reduce poor outcomes to community members' overall health and well-being (Majid & Gagliardi, 2019). Encouraging active engagement and participation in strategic health service development, planning and where possible implementation, through collaboration, can expand access to better health care and promote well-being within the community.

## HEALTHY BUILT ENVIRONMENT

Jackson, Dannenberg and Frumkin (2013) identified that the extent to which the built environment can enable positive health outcomes is not fully realised in existing research. Specifically, the ways in which the built environment can propel positive health benefits requires further exploration. It was recommended that by identifying, implementing and evaluating what is currently known about healthy place making needs to inform the design, development, and operation of infrastructure within neighbourhoods, and urban centres (Jackson, Dannenberg & Frumkin, 2013).

Attention to specific cohorts, such as children, the elderly and at-risk groups, such as marginalised people, within a community is imperative. The needs of these groups must remain at the core of the built environment in order to promote health and well-being and enable timely and appropriate delivery of services (Jackson, Dannenberg & Frumkin, 2013). Utilising health impact assessments into the decision-making process related to the built environment has become increasingly common and recommended (Jackson, Dannenberg & Frumkin, 2013). Health impact assessments allow for the identification of issues in in policy, plans and projects that need to be addressed with the aim of actively promoting health and wellbeing.

Strategic and market transformation is required to enable the incorporation of health and wellbeing principles in the planning, design and commercialisation of new towns. It is anticipated that future positive commercial outcomes will be linked to health outcomes, such as increased equitable access and demonstrated health improvements for specific health conditions (Kent & Thompson, 2012). This is supported by analysis and evaluation of information and data, collaborative and integrated service planning and accountability models that identify and inform community and commercial strategies (Kent and Thompson, 2012).

Governance structures are imperative to the development, operation and sustainability of health-related initiatives within new towns. The involvement of a range of significant stakeholders including schools, local government staff, health service providers, residents, development and

engineering experts, and community advocates is critical to ensuring that all components critical to enabling healthy built environments are met (Kent & Thompson 2012). Mitigating for potential risks, such as rapid population growth, community attitudes to climate and environmental factors, increasing social isolation and risk-taking behaviours, will require a collaborative approach that can be achieved through the design and implementation of healthy built environments.

## HEALTH SERVICE PLANNING

Health service planning is a critical function in developing and implementing health services for a community. It is enabled through the analysis of qualitative and quantitative data, research in demographic, market, health and social trends, as well as engagement of key stakeholders. Traditional methodologies coupled with the evolving technologies, such as big data, social media and artificial intelligence, are allowing the development and operation of tailored disease surveillance, behaviour monitoring, public health communication and education and health care delivery services. For example, social network analysis can assist in the evaluation of topics relating to patterns of disease transmission, emergency preparedness, health interventions and governance models of health service providers (McCullough, Eisen-Cohen & Salas 2016).

Central to health service planning is stakeholder engagement. By encouraging connectivity and collaboration among health, social, community, education and commercial providers, services can be developed that promote healthcare and overall wellbeing, while empowering communities to manage their own health and wellbeing. Social determinants, such as education, employment, housing and income status, are known to determine negative or positive health outcomes in communities (Powers 2018). Addressing these by establishing partnerships between public and private stakeholders can lead to better health outcomes for the community (Powers 2018).

Multilevel evaluation of the implementation of health and wellbeing strategies is required in the long term to foster and enhance the health and wellbeing within current and emerging communities. Stakeholders must integrate top-down and bottom-up strategies over a long implementation timeframe, ensuring that strategies and services are developed for and by the community to address their specific health and wellbeing needs (Bolton et al. 2017). For example, Bolton et al. (2017) suggested that primary schools are best prepared and responsive to health prevention and promotion programs due to promoting healthy behaviours from a young age and driving consistently positive health messages across the lifespan.

Literature pertaining to health service planning and development in newly emerging and established urban centres is continually evolving. Opportunities exist for further research to be undertaken to correlate the health outcomes of residents to the implementation of preventative and early intervention models, enhanced access to primary health services or strengthened community engagement and resilience. Review of specific interventions, as well as combination of models, will contribute to the body of work that is supporting the need for communities to invest in health services that are locally based within the community and primary healthcare sectors.

## 4.5.1 DESIGNING HEALTHY COMMUNITIES

To be regarded as an international centre that has the best interests of its residents at heart, place-based strategies that enable the design, development and operation of healthy communities are crucial.

To design healthy communities, it is important to consider the major contributors to good health and wellbeing. These contributors include lifestyle and behaviours, such as how much physical activity is engaged in and the type of food consumed, the social determinants of health (i.e. income, housing, education), as well as good access to health and social care.

Increasingly recognised across the world is the importance of where people live and work. Individuals who have a strong social network and regular interactions with individuals are more likely to feel happier and healthier (Buck et al, 2018). The design of the neighbourhood and access to transport and green space can influence people's health and wellbeing. Neighbourhoods and cities that provide fit-for-purpose facilities and outdoor spaces for communities to socialise in and housing which is designed to promote positive social interactions between neighbours contribute to better health. Conversely, stressful living conditions can negatively impact on physical and mental health (Buck et al, 2018).

The built and natural environment can shape health in various ways:

- Good air quality can reduce the risk of cancer and respiratory conditions
- Neighbourhoods that provide open green spaces and cycle and walking tracks to promote physical activity improve physical health and mental wellbeing
- Housing that prevents dampness and is light reduces respiratory conditions and promotes wellbeing
- Access to fresh nutritious food is important for preventing/reducing obesity and general health and wellbeing
- The design of neighbourhoods which promote social interactions with residents promote good social and mental wellbeing
- Tree canopies along streets and in parks reduce the hot temperatures during the summer months and lower the impact on the vulnerable young and older people.

Considered planning of neighbourhoods and towns by applying best practice healthy built environment principles help people to lead healthier lives. These principles include ensuring streets and housing are well laid out so that the frail elderly and people with disabilities can easily access shops, schools, services, workplaces and areas for entertainment and recreation. Oran Park Town exhibits these principles with its considered allocation of pathways and proximity of various amenities within the town centre.

With a growing prevalence of Australians feeling lonely (Swinburne University, 2018) good urban design that promotes social interactions is critical because individuals who experience loneliness for significant periods of time have an increased risk of cardiac disease, cognitive decline and a 26% risk of premature death (Holt et al., 2015). These individuals are more likely to need primary health care, emergency care and hospital care.

There is a plethora of evidence that indicates giving children the best start to life is key to a good health and wellbeing trajectory. For example, in *The First 2000 days Framework* (MoH, 2019) referenced *The Australian Centre for Community Child Health, Murdoch Children's Research Institute*, which reviewed the evidence on the first 1000 days of a child's life which identified the social and environmental factors in which families are conceiving and raising children have a direct and significant impact on child development. The First 2000 Days Framework (MoH, 2019) suggests good access to antenatal care is critical, along with the emotional and physical care of pregnant women throughout their pregnancy, for good outcomes for the mother and her baby. As such timely access to primary health care and maternity services are important for Oran Park Town's current and future residents.

A place-based strategy focuses on building strong, healthy vibrant communities where residents have the knowledge, motivation and resources to look after many aspects of their health and wellbeing and care, especially when they have chronic diseases. Oran Park Town must continue to be designed in a way that delivers the services and community supports needed for people to care for their health close to their home so they can remain as independent for as long as possible. The needs and experiences of the community must be at the centre of strategy, planning, design and delivery of all services.

Identifying the community's strengths and assets and investing in communities, with a focus on wellness results in cost effective improvement in health and social outcomes. Creating happy, healthy communities, early intervention and supporting all aspects of a person's life is more cost effective than treating people for illness, mental health and social challenges.

The implementation of these strategies will see Oran Park Town, now and into the future, to be known as a place that has:

- Comprehensive and accessible health and social care to address the community's needs and aspirations
- High amenity urban and natural environments, with an emphasis on promoting physical health and social and mental wellbeing through its high-quality green spaces and green canopy streets, high quality air, sporting, fitness and cultural facilities and sustainable buildings, community centres and recreation facilities
- Strong relationships and connections to major economic centres such as the Airport and health, research and education precincts
- Seamless connectivity between health, education and other government and non-government services and nearby Town Centres
- Fine grain connections, with a focus on walking, cycling and public transport that makes it a desirable place for people to work and live
- Accommodation through hotels, serviced apartments etc. to attract a range visitors and foster opportunities for development and innovation
- A healthy, connected and resilient locality with a commitment to mitigating climate change risks through sustainable transport, developments, water, energy, air quality and waste and through community, sports and cultural facilities and activities.

## 5.0 RECOMMENDATIONS

It is acknowledged that there has been considerable effort and work undertaken by GDC and its stakeholders during the last 10 years to create a vibrant, sustainable and healthy community. To support the health and wellbeing of current and future Oran Park Town residents, investment in health services, infrastructure and research will enable tangible outcomes to be realised. This includes:

- Better health outcomes for children and families and older people
- Better social connectedness and reduced risk of isolation and loneliness
- Enhancing community pride and fostering caring and nurturing environments
- Transforming Oran Park Town into an economic and innovative hub.

The interconnectedness of health, society and economy will result in longstanding benefits for resident, visitors and workers of Oran Park Town, offering opportunities to develop and prototype innovation and change, inform and influence policy and strategic decision making as well as transform the way people live, work and play.

As per the scope, the following high-level recommendations have been made and are detailed below:

- |                                    |  |
|------------------------------------|--|
| ▪ Service Needs                    | ▪ Co-design of service                               |
| ▪ Keeping the community well       | ▪ Provision of services supporting healthy lifestyle |
| ▪ Healthy Built Town               | ▪ Access to transport                                |
| ▪ Research                         | ▪ Digital city                                       |
| ▪ Continual Stakeholder Engagement |  |

### SERVICE NEEDS

Table 10 provides a high-level summary of service supply requirements for Oran Park Town based on the desktop review, data analysis and findings (Tables 5-8) and stakeholder interviews.

STRATEGIC TIMEFRAME	HEALTH SERVICE SUPPLY REQUIREMENTS
SHORT 2019-2024 2-5 YEARS	<ul style="list-style-type: none"> <li>• <b>ADDITIONAL GENERAL PRACTICE SERVICE/S</b> <ul style="list-style-type: none"> <li>- By 2021, Oran Park Town's GP supply requirements will be 15 FSE. <ul style="list-style-type: none"> <li>▪ The broader catchment of 5km will require a supply of 54 FSE GPs.</li> </ul> </li> <li>- To respond to the predominately lifestyle-related conditions of the wider Camden community that can be managed within the primary care and community setting: <ul style="list-style-type: none"> <li>▪ Increased obesity hospitalisations of 8%</li> <li>▪ Increased potential preventable hospitalisations for all conditions of 18%</li> <li>▪ Increased diabetes-related hospitalisation including gestational and diabetes in pregnancy of 84%</li> <li>▪ Increased chronic obstructive pulmonary diseases hospitalisation of 10% over the past five years.</li> </ul> </li> <li>- Current Primary Care and Community based services are experiencing increasing demand</li> </ul> </li> </ul>

STRATEGIC TIMEFRAME	HEALTH SERVICE SUPPLY REQUIREMENTS
<p>SHORT 2019-2024 2-5 YEARS</p>	<ul style="list-style-type: none"> <li>- Due to rapid growth the integrated service delivered in partnership with SWSLHD, Oran Park Town Family Health (OPFH), is now operational 7 days a week for extended hours. As the needs of the community continue to evolve, other allied health practitioners have been engaged on a sessional basis.</li> <li>- Supporting public health services by providing alternatives to ED, an opportunity exists for primary health care providers to capture this proportion of public health service activity</li> <li>- The establishment of 364 residential aged care places expected by 2021 will necessitate the additional supply of GPs.</li> <li>• <b>ALLIED HEALTH SERVICES</b> <ul style="list-style-type: none"> <li>- By 2021, Oran Park Town's supply requirements for allied health professionals (public and private sector) is a total of 71 FTE</li> <li>- Pharmacist, physiotherapist and psychologist supply will increase to 13 FTE each by 2021</li> <li>- Currently there are 12 allied health services located within Oran Park Town, such as physiotherapy, dietetics, chiropractor, podiatry, speech pathology and psychology. Other allied health services are predominantly located in the larger centres such as Camden, Campbelltown and Liverpool. There are opportunities for allied health services to increase within the current population as indicated by the supply requirement projected to increase by 2021.</li> <li>- The higher than NSW average rates of private health insurance for Oran Park Town and the wider Camden region further supports private health service provision.</li> </ul> </li> <li>• <b>DIAGNOSTIC SERVICES INCLUDING IMAGING AND EXPANSION OF PATHOLOGY SERVICES</b> <ul style="list-style-type: none"> <li>- By 2021, Oran Park Town will have a supply requirement of 7 pathology collection centres, Radiological supply of 2 X-rays, 5 ultrasounds and 1 CT</li> <li>- The Camden falls-related hospitalisations have increased by 5% over the past five years, indicating an increase in diagnostic services.</li> <li>- The establishment of 364 residential aged care places expected by 2021 will necessitate the additional supply of diagnostic services.</li> </ul> </li> <li>• <b>OBSTETRICS CONSULTING SERVICES</b> <ul style="list-style-type: none"> <li>- Oran Park Town has a predominately young family profile.</li> <li>- Current public obstetric services are located at Camden, Campbelltown and Liverpool Hospitals.</li> <li>- To maximise the best outcomes for women and their babies, currently 82% of women attend their first antenatal visit by 14 weeks. There are opportunities to support antenatal and postnatal clinic services within Oran Park Town.</li> </ul> </li> <li>• <b>CHILD AND FAMILY SERVICES</b> <ul style="list-style-type: none"> <li>- Karitane's Early Parenting Clinic is experiencing increased waiting times and referrals shortfalls in meeting demand.</li> <li>- By 2021, the growth rate of the 0-14 age cohort will be 37%.</li> <li>- By 2021, family households will make up 62% of the total households in Oran Park Town</li> </ul> </li> </ul>

MEDIUM  
2024-2029  
5-10 YEARS

- All services as outlined in Short Term Strategic Timeframe and their respective supply requirement increases for this timeframe.
  - The SWSLHD Oran Park Town IHH will be a large service incorporating a broad range of ambulatory specialist services provided on a stand-alone site in Oran Park Town Centre. When provide management of low acuity and ambulatory care conditions as well as chronic disease management, preventative health and hospital avoidance initiatives and complements the care provided by Camden and Campbelltown Hospitals. This provides primary care providers, including Allied Health services, an opportunity to partner with SWSLHD to deliver this integrated service model.
- **DAY PROCEDURE CENTRE**
  - Nationally, the delivery of same day private activity has increased while overnight private services are declining.
  - Camden LGA private health insurance rates are above the NSW state average.
  - For a number of procedural and surgical admissions in private hospitals the Camden LGA rates are higher than the NSW rates. With opportunities for locally based services to provide procedures such as ear nose and throat, ophthalmology, cardiac catheterisation, knee replacement, Gynaecological, and colonoscopy to the wider Camden catchment.
  - With the anticipated young adult and working family population of Oran Park Town, the requirement for flexible, efficient and accessible health services that minimise disruption to their lives and maximise convenience will be expected.
- **SPECIALIST MEDICAL AND SURGICAL CONSULTING SERVICES**
  - By 2026, there will be a total supply requirement of 35 FTE medical and surgical specialists supply requirement for Oran Park Town.
    - The 5km service catchment will have a supply requirement of 98 FTE.
  - With approximately 50% of people with mild mental illness requiring treatment, the need for mental health services is likely.
  - Higher rates of private health insurance together with higher socio-economic factors, such as income and education. This is supports Oran Park Town residents accessing private health services.
  - Higher rates of hospitalisations for circulatory disease and obesity-related conditions.
  - For a number of procedural and surgical admissions in private hospitals the Camden LGA rates are higher than the NSW rates. With opportunities for locally based services to provide procedures such as Ear nose and throat, ophthalmology, cardiac catheterisation, knee replacement, gynaecological, and colonoscopy procedures to the wider Camden catchment.
- **SPECIALIST GERIATRIC AND RELATED AGED CARE SERVICES**
  - By 2026, the proportion of people aged over 65 years in Oran Park will increase by 175%
  - There will be two RACFs in Oran Park Town with 324 beds by 2021. Projected calculations demonstrated that an additional 75 places for people aged over 70 years will be required by 2036.
  - Falls related and dementia hospitalisations for Camden have already increased by 5%, with these rates higher than the NSW average.
  - With higher likelihood of loneliness and aged-related mental health illnesses affecting older people, age specific services for Oran Park Town and wider service catchment will be required.
- **COMMUNITY BASED DRUG AND ALCOHOL SERVICE, INCLUDING SOCIAL AND NOT-FOR-PROFIT SERVICES**
  - As the Oran Park Town's considerable young person population matures, the requirement for early intervention and preventative services should be considered.
  - Access to psychological support with the expected supply requirement of psychologist for Oran Park town will be 22 FTE.

STRATEGIC TIMEFRAME	HEALTH SERVICE SUPPLY REQUIREMENTS
<p>LONG 2029-2039 10-20 YEARS</p>	<ul style="list-style-type: none"> <li>• All services as outlined in Medium Term Strategic Timeframe and their respective supply requirement increases for this timeframe.</li> <li>• <b>COMPREHENSIVE INTEGRATED HEALTH CENTRE</b> <ul style="list-style-type: none"> <li>– Medical and surgical services supporting day and overnight admissions (high volume short stay) within inhouse and/or co-located clinical support services. <ul style="list-style-type: none"> <li>▪ By 2036, Oran Park Town will have a supply requirement of the following public and private health services: <ul style="list-style-type: none"> <li>• 63 FTW medical and surgical specialists</li> <li>• For the wider 5km service catchment, a supply requirement of 169 FTE medical and surgical specialists</li> </ul> </li> </ul> </li> <li>– GP and Allied Health Services <ul style="list-style-type: none"> <li>▪ By 2036, Oran Park Town will have a supply requirement of the following public and private health services: <ul style="list-style-type: none"> <li>• 46 FSE GPs</li> <li>• 227 FTE allied health practitioners, public and private, including but not limited to pharmacy, dentistry, optometry, physiotherapy, psychology and speech pathology</li> <li>• For the wider 5km service catchment, a supply requirement of 122 FSE GPs, and 603 FTE allied health professionals, public and private, will be needed to service that population</li> </ul> </li> </ul> </li> <li>– With demand in public and private hospital activity expected to increase over the long term, there may be a market opportunity for expanded pathology and medical imaging services that supplements these services.</li> <li>– Consultation with public health services indicated that early intervention and prevention services located within the community are more likely to serve the needs of the residents of Oran Park Town.</li> <li>– Increased public and private hospital activity expected over the next twenty years.</li> <li>– With no existing public hospital within a 5km and no private hospitals within a 10km radius of Oran Park Town, representing a potential additional burden on the surrounding existing public and private health services. Additional private hospital demand is likely to be of interest to the market especially regarding the demand across the wider 3km, 5km and 10km catchments beyond Oran Park Town.</li> </ul> </li> <li>• <b>RESIDENTIAL AGED CARE FACILITIES</b> <ul style="list-style-type: none"> <li>– When completed the two RACFs in Oran Park Town will supplying up to 324 beds by 2021, with projected calculations demonstrated that an approximate additional 75 places for people aged over 70 years will be required by 2036.</li> </ul> </li> </ul>

**TABLE 10:** High Level Summary of Service Requirements for Oran Park Town.

Note: This has been based on the information and data available at the time of this report. As new information and data becomes available the information in this table will have to be updated in line with the new information and data.

As the population of Oran Park Town is expected to grow linearly due to GDC Residential Development Program, it was identified that the supply of health services will need to be increased.

Currently, long waiting times for GP and allied health services in the community, as well as no locally private hospital services have placed added pressure on existing services. Increasing access to locally provided services to minimise unplanned hospital attendances or receiving care outside of catchment areas can be expressed as key drivers for expanding services.

Long term strategies across government have identified that more care and treatment options will be developed within the community and closer to residents' homes, including enhancing integrated models involving the public, private and primary care sectors to manage increasing demand overall. This is further highlighted the need to develop and enhance locally provided services.

Given the current population profile skewed towards young families, child and family and obstetrics services are indicated. Consultation with Karitane conveyed that there are opportunities to expand and enhance the service provision of prevention and early intervention parenting support services in an integrated model care that is facilitated by physical and technological infrastructure. The current demand for child and family service has also been expressed among other public health and primary health stakeholders.

Over the medium to long terms, comprehensive specialist medical and surgical services may feature within Oran Park to cater to the growing population who are likely to be educated, employed and have private health insurance.

Specifically, services for chronic conditions such as diabetes, respiratory diseases and stroke will be required as the population ages. Secondary and primary mental health services across the lifespan will be necessitated to manage the growing demand in mild to moderate psychological distress as evidenced by the demography of Oran Park Town.

In promoting an aging in place philosophy, the requirement for aged care and specialist geriatric services will be required over the medium to long terms. Integrated health services among the public health, primary care and aged care partners should be explored and enabled to support best outcomes across the care continuum.

As per consultation with SWSLHD (outlined in section 4), Stage 3 of the IHH will become viable once the service population exceeds 18,000 registered patients and the population reaches 100,000. The current SWSLHD Oran Park Town IPCC services are projected to meet the needs of the current and projected population for approximately 10 years. However, SWSLHD will be assessing needs and demands and tailoring services to population growth and the needs of the community. Regular consultation and engagement with SWSLHD are recommended for the planning of the IHH Stage 3.

It is recognised that a high-level analysis of multiple and broad concepts related to health services demand and requirements can provide an overarching view of the health service requirements for a community. However, to better understand specific and controllable aspects of health service delivery, the demand for private health services and determining the private hospital and service requirements needs to be analysed and critiqued. To detail speciality-specific service information, an analysis of private demand and supply activity utilising the Hardes datasets is recommended.

## KEEPING THE COMMUNITY WELL

Literature has indicated that new urban developments “maintain their prosperity when environmental and social objectives are fully integrated with economic goals” (Ygitcanlar, Dur and Dizdaroglu, 2015). This is in line with the vision of GDC for Oran Park Town.

As Oran Park Town continues to be designed and developed, the following areas need to be considered and maintained to promote the health and wellbeing of current and future residents:

- Connectivity to ensure there are a range of transport options to meet the immediate and future needs of the residents and promote accessibility within and beyond Oran Park Town.
  - Continue to support an integrated transport strategy that includes considerations for sustainable and innovative transport modalities.
- Liveability to deliver housing and accommodation that meets the needs of residents, workers and visitors to the area.
  - Ensure a mix of housing is developed including affordable housing and short-term accommodation
  - Continue to design Oran Park Town as a family and dementia friendly locality, that promotes social inclusion and connectedness
  - Ensure that culture and night-time economy flourishes within the area
  - Utilise the retail precinct to incorporate health and social care services and places for residents to meet
  - Optimise community safety.
- Sustainability to mitigate the impacts of climate change, promoting and enhancing the natural environment and prioritise sustainable developments.
  - Continue to create scenic landscapes, parks and promote opportunities for biodiversity in backyards and streets
  - Work with government to achieve net-zero emissions by 2050
  - Continue to create adequate green open spaces.
- Partnerships and integrations to address the health and social care needs of residents now and in the future
  - Maintain strong partnerships and integration (including digitally enabled) between government and non-government organisations
  - Continue to provide access to health and social care and wellbeing services along the life course and stay positively connected to their community.

Stakeholders including SWSLHD, NSW Department of Education, CRET, Camden Council, Anglicare and NCOSS expressed community inclusion, connectedness and resilience are vital to keeping a community well. Fostering a sense of belonging has been a key feature of Oran Park Town with GDC demonstrating commitment to this through its vision of the town and creating opportunities to bring service partners together through community events and the Community Partners Meeting. This needs to be maintained now and into future as well as when GDC’s master planner role changes due to the shifts in majority landownership.

Further enhancement of the existing Governance that has enable the place-based strategy for Oran Park Town, bringing together the efforts of the community, industry, government and non-

government organisations and local businesses to improve the economic, physical health, social and mental wellbeing of residents, is recommended. These include:

- Maintaining the regular stakeholder and community engagement and consultations that are in place to meet and identify emerging needs and issues
- Strategies to respond to emerging needs and expectations of the community.

Consultation with Camden Council indicated that once land ownership shifts from a sole landowner, the continuation of community development and engagement programs will be the responsibility of Camden Council.

By leveraging existing and establishing new alliances with community partners, healthcare service design can be integrated into urban planning and those benefits can permeate into the fabric of the society and economy of Oran Park Town.

## HEALTHY BUILT TOWN

Continue the implementation of place-based strategies that support residents of Oran Park Town lead healthier lives. GDC has implemented healthy design principles into the master plan for Oran Park Town, as evidenced by a tightly designed town centre supporting co-location within a condensed area to promote integration and minimise travel between key health, social and community services. This approach is to be continued as the town develops and grows.

As indicated previously, aging in place is enabled with the design of their community beyond their home. This is particularly encouraged by accessibility to required destinations, such as health services (e.g. GPs), retail (e.g. grocers) and other places of leisure and recreation (e.g. library, gym). Consultations from Anglicare and SWSLHD highlighted that in addition to the proximity of services and places for older people to visit and utilise, features such as large tree canopies, seating and access to water along footpaths, that mitigate risk of falling and weather-related conditions, as well as encourage physical activity (e.g. support walking to their desired location) is recommended. It was emphasised that when supportive features are prominent in places where older people live, they can remain active and independent.

Several stakeholders highlighted the importance of factoring the impacts climate change into the development of Oran Park Town. As the built environment is an important contributor to climate change and health outcomes, mitigation strategies and changes in practice will positively influence health and reduce climate change.

From the health service perspective, the built environment should continue to promote health and minimise ill health and conditions exacerbated by environmental factors such as morbidity and mortality related to heat, extreme weather events, mental stress, food and water shortages, respiratory diseases and air pollution.

## RESEARCH

Oran Park Town is best placed to leverage its position as the future incubator and hub for research and innovation to expand the body of knowledge related to health, engineering, economics and social sciences.

The existing literature concerning planning health services in emerging urban communities has broadened the scope for future research. However, the research is limited, particularly within the Australian context. Further research and analysis will contribute to international knowledge and support better understanding of the impact and influence of the built environment on positive health outcomes and how this may influence the commercial and economic viability of emerging towns and cities.

The uniqueness of Oran Park Town and the opportunity that GDC has to make a positive impact on the health and wellbeing of the community needs to be further explored. The ability to understand and evaluate the influence of the of health and social service strategies, healthy built environments/urban design, and the impact of these on commercial and economic contexts are present within Oran Park Town.

Research opportunities include:

- Impact of health services, models of care and other health promoting initiatives
- Understanding the impact of healthy behaviours from a young age and impact of the built environment and services on encouraging healthy behaviours
- Developing spatial planning principles and how they interact with health service planning methodologies/strategies
- Impact of healthy urban design a on community and their health and social outcomes
- Determining health and economic benefits of primary health and integrated care services including prevention, health promotion and early intervention.

GDC may want to consider the opportunities to evaluate the strategies implemented in Oran Park Town by:

1. Collaborate with university and research institutes to undertaken research and/or
2. Engage a private organisation to conduct research on behalf of GDC.

The partnership between SWSLHD, SWSPHN and University of Western Sydney School of Medicine, presents a significant opportunity for GDC to utilise this partnership to undertake research in Oran Park Town.

As an exemplar town, Oran Park Town has the opportunity to attract national and international researchers. This can foster development of innovative, contemporary and evidence-based service models, whilst potentially attracting complimentary and supplementary service partners.

Ongoing engagement and collaboration with stakeholders to advance the interests of Oran Park Town is critical to promoting, maintaining and advancing the health and wellbeing outcomes for current and future Oran Park Town community. Leveraging its overarching position within the town with the specialised expertise of its stakeholders, GDC can achieve unprecedented

research results. This could lead to Oran Park Town becoming an exemplar site/town for best practice health, commercial and social models, becoming an international leader.

## CONTINUAL STAKEHOLDER ENGAGEMENT

Ongoing engagement of stakeholder is critical to the successes of Oran Park Town. Through the stakeholder consultations, all participants highlighted that ongoing communication with stakeholders is a key ingredient to developing a healthy town.

From the perspective of health service delivery, stakeholder engagement with key partners can lead to sustainable and adaptable health services being developed for Oran Park.

During the stakeholder engagement process, numerous stakeholders indicated the importance of their existing collaboration with GDC and the translation to positive outcomes, such as delivery of services. Continuation of this level of engagement with existing and new stakeholders is vital to the achievement of GDC's vision.

Ongoing engagement and partnership with the Council is vital to ensure that the current integrated approach is maintained following the eventual changes in landownership within Oran Park Town.

Ongoing long-term communication and collaboration was encouraged by the stakeholders, with interest in the progress of Oran Park Town as it continues to grow and evolve in the broader strategic contexts of the Western Sydney Airport and Western Parkland City.

## EXPERIENCE-BASED CO-DESIGN OF SERVICE

It is recommended that health and social services are designed utilising the experience-based co-design methodologies.

Engagement of community and its residents in the planning, development and implementation of health and community services is essential to creating genuine partnerships that will lead to better health and community service experiences.

Stakeholder consultations revealed that the effectiveness of programs and service are positively correlated to the level of co-design undertaken to create services and solutions to the challenges faced by the community.

As the Oran Park Town community becomes more diverse, the perspectives of different cultural groups need to be represented. Health services being planned and delivered within Oran Park Town need to engage and consult with community to ensure the needs and expectations of all its residents are met.

It is recommended that health and social services provided in Oran Park Town have the opportunity to undertake experience-based co-design of services in partnership with the community.

## PROVISION OF SERVICES SUPPORTING HEALTHY LIFESTYLE

Consistent with incorporating healthy principles into the design of Oran Park Town, stakeholder indicated that while delivery of traditional health services is critical to better health outcomes of residents, support and encouragement to live healthy lifestyles is imperative for the health and wellbeing of the community.

While the residents of Oran Park Town are below the NSW average for some unhealthy lifestyle factors, such as adult obesity and smoking rates, there is still a need to develop environments and create services that reduces this prevalence further and minimise the uptake of these risks as the community grows.

Stakeholders involved in the provision of early intervention and prevention, such as Karitane and the SWSLHD, expressed that access to community facilities that promote physical activity is critical. This was supported by consultation with NSW Department of Education who highlighted that establishing healthy behaviours within the children and young people, with a subsequent uptake by their immediate family members, can initiate a generational change. This will lead to healthier lives across the lifespan.

Similarly, minimising access to services that encourage unhealthy and risk-taking behaviours needs to be considered in creating a healthy and well Oran Park Town. Reducing access to fast-food and unhealthy food options while promoting community-centred activities, such as farmers' markets and healthy cooking class, were highlighted as potential strategies.

As the primary landowner and master planner of Oran Park Town, GDC can take a lead on advocacy for the residents of the Oran Park Town to encourage decision-making that promotes their health and wellbeing.

## ACCESS TO TRANSPORT

As highlighted in Section 4.1, the delivery of a railway station to Oran Park Town will change how people access the town. Stakeholder consultations revealed that accessibility and access to public transport options are considering in the planning and development of future health services.

While bus networks to and from Oran Park Town exists, a railways station will better connect Oran Park Town to established centres and need to be factored into the health service delivery models for Oran Park Town. Demand for services are likely to change as the accessibility to Oran Park Town increases. Accessibility can influence demand which is a key driver for establishing health services within a locality.

GDC should continue to advocate for the delivery of the railway station for the short to medium term.

## DIGITAL CITY

As technology continues to evolve and deliver the conveniences that people expect from all aspects of their lives, the concept of the digital city is more likely than ever.

GDC has created a digitally enabled town, with high speed fibre internet to enable delivery of virtual health and social services, as well as research.

Given the already master planned approach to the development of Oran Park Town and coordination of stakeholders to deliver health and community services in a seamless approach, Oran Park Town is well positioned to exploit the advantages that are presented by being a digitally enabled town. For example, use of video and drone technology to enable access to health services for residents who may not be able to physically reach the service.

Consultations with health service partners highlighted that moving towards virtual healthcare is possible anywhere there is a connection and that technology enabled services are likely to permeate throughout the system. SWSLHD and Karitane have emphasised the enhancement and expansion of their virtual services as a key strategic direction to 2025 and beyond.

To ensure Oran Park Town remains at the forefront of technology, continual investment and implementation of latest technologies and infrastructure that enable delivery of virtual care in community facilities is recommended.

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## 7.0 APPENDICES

### APPENDIX 1: DOCUMENTS INCLUDED IN DESKTOP REVIEW

TITLE	ORGANISATION
Western Sydney City Deal	Smart Cities Plan (Various)
Implementation_Western Sydney City Deal_December 2018	Smart Cities Plan (Various)
Connectivity_Western Sydney City Deal	Smart Cities Plan (Various)
Implementation And Governance_Western Sydney City Deal	Smart Cities Plan (Various)
Planning And Housing_Western Sydney City Deal	Smart Cities Plan (Various)
Jobs For The Future_Western Sydney City Deal	Smart Cities Plan (Various)
Liveability And Environment_Western Sydney City Deal	Smart Cities Plan (Various)
Skills And Education_Western Sydney City Deal	Smart Cities Plan (Various)
Western City District Plan-Connecting Communities	Greater Sydney Commission
Oran Park Town	Landcom
Precinct Planning Report_Oran Park Precinct (Part 1)	NSW Department Of Planning, Industry and Environment
Precinct Planning Report_Oran Park Precinct (Part 2)	NSW Department Of Planning, Industry and Environment
Strategic Plan 2018-2021	South Western Sydney Local Health District
Oran Park Town Centre Development Plan_January 2019	Greenfields Development Company
Oran Park Existing Structure And Land Use Plan_December 2018	Greenfields Development Company
Oran Park Pedestrian And Cycle Activation Plan_December 2018	Greenfields Development Company
District Pedestrian & Cycle Plan_December 2018	Greenfields Development Company

TITLE	ORGANISATION
Western Sydney Aerotropolis_Land Use And Infrastructure Implementation plan	Department Of Planning, Industry and Environment
Oran Park Town	Landcom
Draft Local Strategic Planning Statement	Camden council
Transport_And_Wellbeing_In_A_Greenfield_Estate	University of Sydney
FY18_Sustainability_Report	Landcom
Resident Snapshot Report_May 2017	Greenfields Development Company
Resident Snapshot Report_November 2017	Greenfields Development Company
Resident Snapshot Report_May 2018	Greenfields Development Company
Resident Snapshot Report_November 2018	Greenfields Development Company
Resident Snapshot Report_May 2019	Greenfields Development Company
Resident Snapshot Data_June 2017 to May 2019	Greenfields Development Company
Camden Council Community Strategic Plan_June 2017	Camden Council
Healthy Urban Development Checklist	NSW Department Of Health
Blueprint For Integrated Healthcare-Models In South Western Sydney	South Western Sydney Primary Health Network; South Western Sydney Local Health District
Oran Park Market Outlook_Urbis Report	Urbis
General Community Profile_Oran Park Suburb	Australia Bureau of Statistics
SEIFA_Oran Park_State Suburb Classification	Australia Bureau of Statistics
General Community Profile_Cobbitty-Leppington SA2	Australia Bureau of Statistics
Aboriginal and Torres Strait Islander Peoples Profile_Cobbitty-Leppington	Australia Bureau of Statistics
SEIFA_Cobbitty-Leppington_Sa2	Australia Bureau of Statistics
Time Series Profile_Cobbitty-Leppington SA2	Australia Bureau of Statistics
Workforce Profile_Cobbitty-Leppington Sa2	Australia Bureau of Statistics
General Community Profile_Camden LGA	Australia Bureau of Statistics

TITLE	ORGANISATION
Aboriginal and Torres Strait Islander Peoples Profile_Camden LGA	Australia Bureau of Statistics
SEIFA_Camden_LGA	Australia Bureau of Statistics
Time Series Profile_Camden LGA	Australia Bureau of Statistics
Workforce Profile_Camden LGA	Australia Bureau of Statistics
PHIDU_PHN and LGA Demography And Health Use Data	Public Health Information Development Unit, Torrens University
South West Sydney - Our Health	South Western Sydney Local Health District
South Western Sydney Local Health District Service Level Agreement_2019/20	South Western Sydney Local Health District
Year In Review_ South Western Sydney Local Health District _2017/18	South Western Sydney Local Health District
Camden Council_Still Growing	Camden Council
Oran_Park_Stage1_Strategic_Social_Plan_Final_Report	Landcom
Oran_Park_Stage1_Strategic_Social_Plan_Summary	Landcom
Appendix 1_Implementation Strategy	Landcom
Appendix 2_Key Programs	Landcom
appendix 3_Implementation Strategy-Longer Term Actions	Landcom
Appendix 4_Best Practice Evidence Case Studies	Landcom
Appendix 5_S94 Contribution Plan	Landcom
Appendix 6_HIA	Landcom
Hotel Management Opportunity_Information Document_Oran Park	AHS Advisory for Greenfields Development Company
Western_Sydney_Visitor_Economy_Strategy_2017-2020	Destination NSW
How_Australian_Can_Invest_In_Children_And_Return_More	Telethon Kids Institute
The_First_2000_Days_Framework	NSW Ministry Of Health
National_Working_Families_Report_2019	Karitane
Integrated_Primary_And_Community_Care_Development_Plans	Sydney South West GP Link; South Western Sydney Local Health District
Oran_Park_Riphcc_Business_Case	Capital Insight for South West Sydney Medicare Local

TITLE	ORGANISATION
Partnership_For_The_Development_Of_Greater_Western_Sydney_Health	Alliance of South Western Sydney, Nepean Blue Mountains and Western Sydney Local Health Districts.
NBMLHD_Business_Plan_2019_2020	Nepean Blue Mountains Local Health District
NBMLHD_Strategic_Plan_2018_2023	Nepean Blue Mountains Local Health District
Mapping_Economic_Disadvantage_In_New_South_Wales	NSW Council of Social Services
Oran_Park_Precinct_Development_Control_Plan	NSW Department of Planning, Industry and Environment
Oran_Park_Parenting_Centre-Futue_Directions	Karitane
CSP_SWSLHD_Care_In_The_Community	South Western Sydney Local Health District
Oran_Park_Notes_Care_In_The_Community	South Western Sydney Local Health District
Oran Park - Integrated Primary Health Care Centre	South Western Sydney Local Health District
Child_Assesment_Referral_Clinic	Disability Macarthur
Family_And_Kids_Connect	Disability Macarthur
Family_Care_And_Support	Disability Macarthur
Life_Skills	Disability Macarthur
My_time_Minto	Disability Macarthur
Peer_support_junior	Disability Macarthur
Peer_support_ages15-65	Disability Macarthur
PIC (Place-based Infrastructure Compact) Model Summary	Greater Sydney Commission

## APPENDIX 2: LIST OF STAKEHOLDERS INTERVIEWED

SECTOR	ORGANISATION	PEOPLE	NO OF MEETINGS	DATE
PUBLIC	Camden Council	Ron Moore, General Manager Nicole Magurren, Director Planning and Environment	1	28 November 2019
	Greater Sydney Commission	Liz Dibbs, Western City District Commissioner Greg Woodhams, Executive Director, City Planning Projects	1	2 December 2019
	Karitane	Grainne O'Loughlin, Chief Executive Officer Angela Wood, Director of Clinical Services	1	1 November 2019
	Nepean Blue Mountains Local Health District	Kay Hyman, Chief Executive Rasha Kisswani, Director of Planning	1	25 November 2019
	NSW Department of Education, Oran Park High School	Bradley Mitchell, Principal	1	5 February 2020
	NSW Health Infrastructure	Michael Brooks, Director Projects	1	28 October 2019
	NSW Parliament	Mark Latham, Member of the New South Wales Legislative Council	1	13 November 2019
	South Western Sydney Local Health District	Amanda Larkin, Chief Executive Simone Proft, Manager, Planning David Ryan, Director, Capital Works and Infrastructure Prof David Simmons, Head Endocrinology, Campbelltown Hospital and extended team	3	4 November 2019 28 November 2019 10 December 2019
	South Western Sydney Primary Health Network	Keith McDonald, Chief Executive Officer	2	22 November 2019 7 January 2020
PRIVATE	Western City and Aerotropolis Authority	Troy Harvey, Executive Director, Planning and Development	2	20 November 2019 14 January 2020
	Barwon Investment Partners	Tom Patrick, Partner	1	19 November 2019
	Camden Region Economic Taskforce	Debbie Roberts, Executive Officer Adriana Care, Chair	1	13 December 2019

SECTOR	ORGANISATION	PEOPLE	NO OF MEETINGS	DATE
	Healius	Kaye Swallow, Operations Manager, Healthcare Imaging	1	31 October 2019
	Iemma Patterson Premier Advisory NSW	Morris Iemma,	1	29 October 2019
	My Health Oran Park Medical Centre	Dr Dimuthusam (Sam) Aranayake, Principal GP Practice Manager	2	6 December 2019 13 December 2019
PRIVATE – AGED CARE	Anglicare	Peter Paltoo, General Manager, Property	1	10 December 2019
	Calvary Healthcare	Matthew Hanrahan, Deputy National CEO and Director of Strategy and Service Development Angus Bradley, National Manager, Strategy and Development	1	21 November 2019
NON-GOVERNMENT	Disability Macarthur	Hermiena Moss, Family Care	1	14 January 2020
	First Steps Community Centre, Taree	Rosemary Sinclair, Manager	1	6 December 2019
	NSW Council of Social Service	Joanna Quilty, Chief Executive Officer Susie Saba, Business Development Manager	1	26 November 2019
OTHER	Western Sydney University	Dr Kate McBride, Lecturer, School of Medicine	1	8 November 2019

## APPENDIX 3: MAPPING HEALTH SERVICES ACROSS 3KM, 5KM AND 10KM SERVICE CATCHMENT RADIUS OF ORAN PARK TOWN

The radiuses represented across Figures A-E are:

- green circle for 3kms
- blue circle for 5kms
- red circle for 10kms.



Figure A: Nearest Public and Private Hospitals Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019. Source: GapMaps, 2019. Yellow pins denote public hospital. Green pin denotes a private health facility

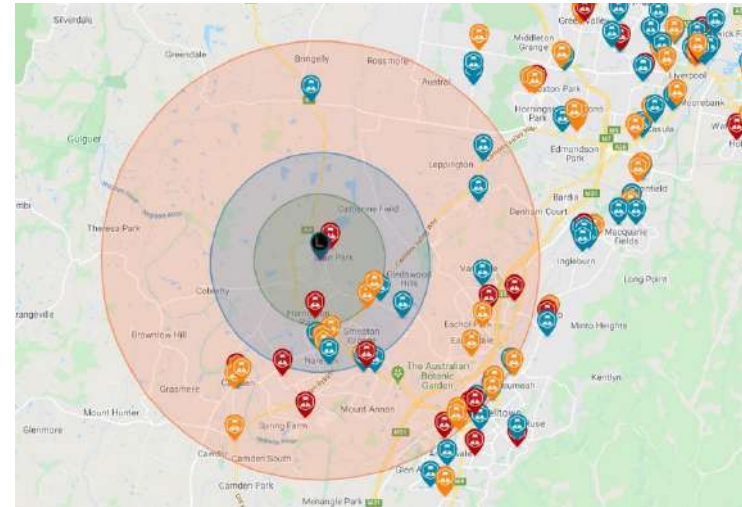


Figure B: General Practitioners and General Practices Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019. Source: GapMaps. Teal label denotes medical centre and single practitioner. Orange label denotes between two to five GPs. Red label is a primary healthcare centre with over six GPs

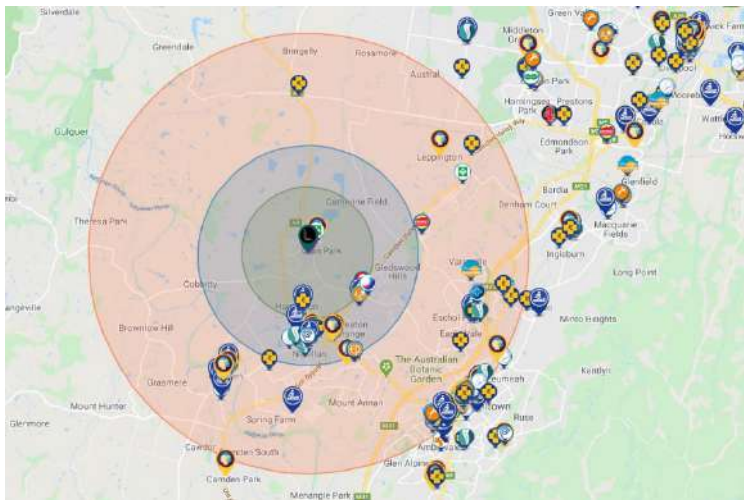


Figure C: Allied Health Services Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019. Source: GapMaps. This map includes audiologists, chiropractors, dietitians, physiotherapists, optometrists, podiatrists, psychologists, speech pathologists and pharmacies.

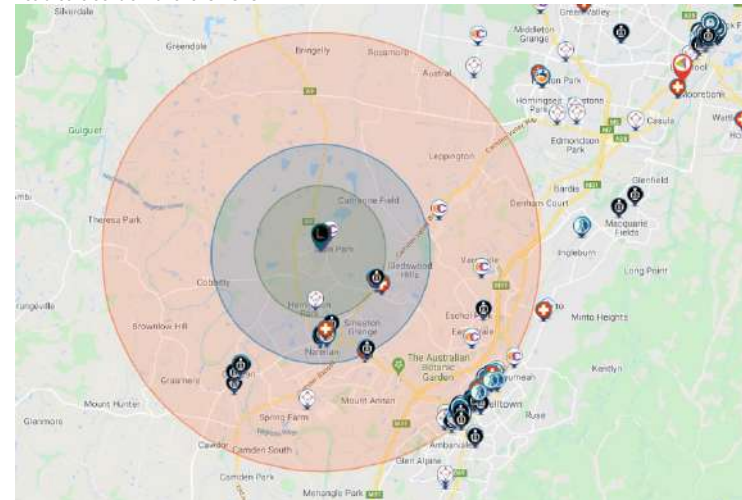


Figure D: Medical Imaging and Pathology Centres Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019. Source: GapMaps. Pins denote radiology and pathology collection services

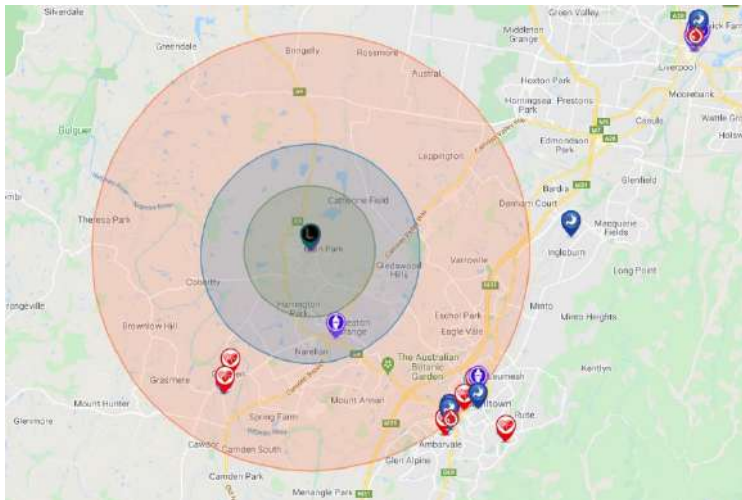


Figure D: Medical and Surgical Specialists Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019.  
Source: GapMaps. The pins include cardiologists, gastroenterologists, general surgeons, geriatricians, haematologists, psychiatrists, respiratory physicians, rheumatologists, urologists.

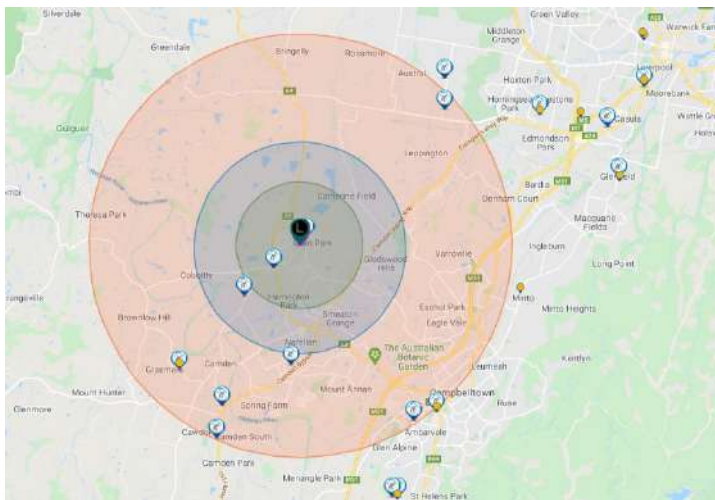


Figure E: Residential Aged Care Centres and Retirement Villages Within the Three Key Service Catchment Radiuses of Oran Park Town, 2019.  
Source: GapMaps. Orange pin denotes a residential aged care facility

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