INQUIRY INTO CURRENT AND FUTURE PROVISION OF HEALTH SERVICES IN THE SOUTH-WEST SYDNEY GROWTH REGION

Organisation:

Wollondilly Shire Council

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Our Reference: TRIM1288#330

The Hon. Gregory John Donnelly, BEc MIR MLC Chair - NSW Legislative Council Portfolio Committee NO. 2 – HEALTH Parliament House 6 Macquarie Street SYDNEY NSW 2000

17 April 2020

The Hon. Gregory John Donnelly and Committee Members,

INQUIRY INTO THE CURRENT AND FUTURE PROVISION OF HEALTH SERVICES IN THE SOUTH-WEST SYDNEY GROWTH REGION - WOLLONDILLY SHIRE COUNCIL SUBMISSION

Thank you for providing Wollondilly Shire Council with the opportunity to make a submission to the Legislative Council Inquiry into the current and future provision of health services in the South-West Sydney Growth Region. Council welcomes and applauds the initiative of the Inquiry by the Legislative Council.

Council is concerned about the current provision of health services for the Wollondilly community and the future provision of health services to address the needs of our growing community. These concerns need to be understood and addressed by the NSW State Government.

Wollondilly Shire Council is advocating for more accessible local health care services as the population grows across the Shire, including a hospital at Wilton, an increase in mental health services and aged care facilities. Council would also welcome the opportunity to present our evidence to the NSW Legislative Council Inquiry to ensure the voices of our community are heard.

Context

The Wollondilly Shire is located on the south western outskirts of Sydney, at the foothills of the Southern Highlands and covering a vast area of 2,560 square kilometres. The Wollondilly Shire Estimated Resident Population for 2018 is 52,230, with a population density of 0.20 persons per hectare. Wollondilly is one of seven local government areas that comprise the South Western Sydney Local Health District. Wollondilly is the only Local Government Area in this Health District that does not have a public hospital located within its boundaries.

Wollondilly Shire Council is one of a network of peri-urban councils that define themselves as the interface between urban and rural areas. This area typically comprises a mix of urban and rural residential areas with productive agricultural lands, biodiversity areas and diverse topographies.

The access of residents living in the Wollondilly Shire to health services is a major concern for Council along with the relative undersupply of healthcare providers and related support services, with poor access to scarce providers exacerbated for small, scattered and isolated peri-urban communities.

As a result of this concern in 2014 Wollondilly Shire Council, South West Sydney Primary Health Network and the South West Sydney Local Health District agreed to establish the Wollondilly Health Alliance to further investigate and improve access to health care in Wollondilly.

Following are the key issues that have been identified through the work of the Alliance which provides key information to assist the Portfolio Committee No.2 terms of reference for the inquiry into the current and future provision of health services in the South-West Sydney Growth Region.

These key issues are:

- Wollondilly residents' main health issues of both now and taking account of population growth forecasts.
- The availability and utilisation of health services in Wollondilly Shire
- Major gaps in health and related services
- Major barriers to accessing health care services
- Specific sub-groups of the Wollondilly population and geographic communities who are experiencing greater barriers (and identification of what those specific barriers are)
- Priorities for service development and delivery.
- Equity of service delivery within the SWS Primary Health Network
- Equity of service delivery between Primary Health Networks
- Limited access to tertiary health services These are services that provide highly specialized medical care over an extended period of time involving advanced and complex procedures and treatments performed by medical specialists in state-of-the-art facilities.

This submission also provides feedback from extensive consultation processes with residents and service providers that have explored the "felt" dimensions of need – that is, community perceptions and experiences of the health care system in Wollondilly. This has enabled a deeper understanding of health needs and issues and allowed data results to be tested against the issues identified by consumers and service providers.

The Top 5 health issues for Wollondilly are Obesity, Lung Cancer, Diabetes, Asthma, Musculoskeletal System Disease.

The Community has told us local health care services are important and as the population grows, residents want more health care services in the Shire, including a hospital at Wilton and more aged care facilities.

What are we seeking from the Inquiry?

- Fair and equitable service provision.
- Health planning for sustainable well-managed growth
- Locally based health services, programs and facilities that are in place early, adaptable to the growing population and focused on preventative health.
- Recommendation to plan for a Public Hospital in the Wilton Growth Area.

Purpose of the submission:

The purpose of the submission is to inform the NSW LEGISLATIVE COUNCIL PORTFOLIO COMMITTEE NO. 2 – HEALTH Inquiry of Council and Community views and concerns over the provision of health services with the impending growth and population projections that are currently being used to plan for Health services in South West Sydney.

Planned housing growth in Wollondilly

There are two State Government declared growth areas in Wollondilly.

The NSW Government's Western City District Plan sets a target for 15,000 new homes in the Wilton Growth Area, representing a new town for Wollondilly. In addition, the NSW Government's Macarthur Strategy identified land at West Appin for a further 18,000 dwellings. This indicates that the Wollondilly Shire will undergo significant growth over the next 20 to 30 years potentially accommodating an additional 35,000 dwellings in these two growth areas alone. This has the potential of an additional 87,500 people moving into these two growth areas for Wollondilly.

This presents challenges for Council and State agencies, given the need to plan for, fund and build infrastructure across a geographically dispersed area. Council is determined to create a great new town at Wilton through a holistic master planned approach to development. Part of this holistic master plan includes a health precinct suitable in size to facility tertiary services long term to support the community; however through the Department of Planning a 10ha site was identified in the draft State Infrastructure Contributions to cater for the forecast Wollondilly population over the next 20-30 years. This has now been removed and it is a proposed to provide co-located health clinic to service the population of Wollondilly. A preferred location has not been determined but it is suggested to be located within the proposed public K-12 facility.

The vision for the Wilton Health Precinct is to bring together a range of patient centered health facilities and professionals such as doctors, physiotherapists, psychologists, dieticians, dentists, pharmacists, and pathologists. The Wilton Health Precinct would also service the wider Wollondilly community across all stages of life and Wilton is an opportunity for the Wollondilly community to gain great new facilities and services, locally. Longer term planning for all 3 levels of health care is critical to ensure equitable access to health care.

Beyond Wilton, planning for new housing must be aligned with broader policies for sustainable, wellmanaged growth, so that the right mix of new homes are built in the right places and at the right time. With this in mind Council continues to advocate that Greater Macarthur should not be developed before appropriate infrastructure is in place.

Wollondilly Shire Council implements the whole concept of Social and Health impact assessment in our planning assessment processes to make sure we don't get simple cookie-cutter developments particularly for parts of the community that are more vulnerable health wise. We want better outcomes for our community, particularly when our communities are less connected and have more challenging access to services.

Getting the Population Projections right...

The current population projections for planning Health services are derived by the Department of Planning, Industry and Environment (DPIE) projections – see below for Wollondilly and Campbelltown.

These projections only include part of the growth expected for the Wollondilly Local Government Area. There is differing opinion in regards to the current projections and concern there is a significant underestimation of what is expected on the ground.

The Wollondilly Draft Local Strategic Planning Statement estimates the Wollondilly LGA population in 2036 to be 92,102. It should also be noted that this projection only includes existing gazeted growth areas. Future areas identified in the Greater Macarthur Priority Growth Area (including 18,000 homes at Appin) have not been included.

Neighbourhood Description	Pop. 2016	Pop. 2026	Pop. 2031	Pop. 2036	Pop. 2041	20 year projection
Wollondilly	47,313	58,500	66,400	73,500	82,500	projection
Increase in population per 5yrs:		11,187	7,900	7,100	9,000	35,187
Campbelltown	161,550	194,050	212,350	227,950	249,250	
Increase in population per 5yrs:		32,500	18,300	15,600	21,300	87,700
Camden	80,250	153,300	180,050	236,250	307,750	
Increase in population per 5 yrs:		73,050	26,750	56,200	71,500	227,500
Total Increase in population in Macarthur Area per 5yrs :		116,737	52,950	78,900	101,800	350,387

The case for investment in health care services

The Wollondilly Health Needs Assessment (HNA)(2014) found that Wollondilly residents have slightly better health than the NSW average, with lower mortality rates. However, the Shire has higher rates of smoking and being overweight or obese, and lower rates of adequate physical activity. Wollondilly needs more local health services, programs and facilities to counteract this. With the population of the Shire more than doubling over this timeframe there will be a significant increase in the need for local health care access across the primary, secondary and tertiary care spectrum.

The consensus amongst planners and medical professionals is urban sprawl increases in the incidence of chronic diseases by encouraging sedentary lifestyle behaviours that contribute to poor health.

A growing body of research suggests there is a clear association between the physical activity and the built environment. This is particularly relevant with the Wilton Priority Growth Area. Without access to public transport and local employment, Wilton will become an automobile dependent satellite suburb which will have significant implications for the physical and emotional health and wellbeing of its future residents. This in turn will impose significant financial costs to local and state

government over time as health services struggle to cope as the growing population experiences higher incidences of sedentary lifestyle related illness.

Features of urban areas which are conducive to greater physical activity include:

- Closer proximity to public transport
- Compact, pedestrian friendly neighbourhoods
- Multiple destinations within walking or cycling distance, such as transport nodes, shops and recreational facilities
- Greater diversity in land use.

Good urban design is therefore critical in ensuring the health and well-being of the future residents because it is preventative in nature. Healthy urban design can improve some of the social determinants of health and therefore reduce the financial costs associated with treating poor health amongst the population.

Furthermore, demographic factors typical of new growth areas place additional pressure on existing health services compared to established urban areas. These include:

- Higher birth rates
- Greater cultural diversity
- Higher youth populations
- Higher household occupancy rates

As a result, new growth areas increase demand for a range of services including maternity, midwifery, early childhood, youth related services and mental health and wellbeing services. These are currently not adequately provided for within the region, specifically the Wollondilly Shire which will double in population over the next 20 years.

The early provision of public transport and health services in the new priority growth areas will have a large influence on the health and wellbeing of our citizens and good design is preventative in nature and will reduce pressure on the health system.

Stream	Service		
Primary	General practices / clinics		
	Community nursing services		
	Community health and wellness centres		
Secondary	Specialist services e.g. radiology		
	Allied health services		
	Drug and alcohol services		
Tertiary	Hospitals		

There are three streams of health care as identified on the following table:

The Wilton Priority Growth Area will need to be serviced across all three streams of health care at full development (approx. 50,000 people) particularly given the additional planned growth for West Appin, seeing the Shire population potentially reach 150,000 people.

The nearest public hospitals are located at Campbelltown and Camden which are both about 25 kilometres north of the Wilton Priority Growth Area and West Appin. The next closest public hospitals are located at Coledale and Bulli in the Illawarra approximately 30 kilometres to the east while the public hospital at Bowral to the south is 36 kilometres away. Liverpool Hospital to the north is 47.4 km away via Hume Motorway/M31.

A significant health care inequity will be created if 100,000 more people move into the Wollondilly Shire and expected to travel more than 25 kilometres or more to access public hospital services.

Understanding the significant health related challenges that a new town at Wilton would present, Council in partnership with South Western Sydney Local Health District and the University of NSW, undertook a Health Impact Assessment (HIA). This was completed in December 2014.

The HIA contained a number of relevant recommendations aimed at ensuring good health outcomes for the community including the following:

- Ensure the early introduction of facilities and infrastructure that are planned in consultation with the community and stakeholder groups
- Develop a Social Planning Strategy (Nov 2016) to ensure the delivery of a healthy and active community that aligns with the principles of the Masterplan and addresses the emerging needs of the community as it develops
- Engage the community in the design, development and activation of public domain and space
- Engage with the community regarding land use mix and density to mitigate potential conflict
- Promote Wilton New Town as a healthy, active community
- Ensure that public spaces, facilities and activities are both safe and suitable for elderly people, children, people with disabilities and different population groups within the community.

Following this earlier Health Impact Assessment, Council in partnership with the Wollondilly Health Alliance developed a Wilton Health and Wellbeing Strategy that:

- Identifies game changers needed for Wilton to become a healthy and liveable place
- Creates an implementation plan for Council and our partners to deliver critical outcomes
- Provides an evidence base for decision-making on key planning issues.

The Wilton Health and Wellbeing Strategy identifies that health is not just the absence of disease or illness. It is "a complete state of physical, mental and social wellbeing"ⁱ

The Wilton Health and Wellbeing Strategy also provides evidence in regards to the need for investment in critical key health care infrastructure across the Shire including health facilities, particularly the integrated Community Health Facility as well as long term planning for provision of Tertiary services. Council and the Wollondilly Health Alliance are committed to an integrated care approach, reflecting the whole of a person's health needs, from prevention through to end of life, encompassing physical and mental health, and working in partnership with the individual, their carers and family.

What needs to happen?

Although the full extent of planned growth will not occur within the immediate next 20 years, a range of health care services need to be delivered to meet the changing needs of the community over time.

It is critical to identify a suitable site at Wilton to be reserved for health care services across all three streams with the intention of delivering services over time as the community grows.

Delivering truly integrated care is one of three strategic directions in the NSW State Health Plan: Towards 2021. The ageing population and growing number of people living with chronic conditions means that health needs are changing. The need for closer integration of community health services with hospital and primary care services is driving evolving models of care. Council is committed to greater integration to improve patient experiences and outcomes of care while also delivering efficient care for the broader health system.

While effective for all health service users, integrated care is especially advantageous to those with chronic disease, the frail elderly, people with disability, people impacted by mental illness, substance use and dual diagnoses, and those at the end of life. This means that, in terms of infrastructure development, a traditional community health centre model will no longer meet contemporary policy and service expectations.

Through the Wollondilly Health Alliance the Integrated Health Neighbourhood (IHN) model is a system of healthcare Council is supporting and partnering in to implement at Wilton. The model will operate as an integrated system, delivering more care closer to where people live. In addition to new and updated infrastructure, patient enablement and technology will play important roles in creating a truly Integrated Health Neighbourhood. The Health Neighbourhood provides comprehensive services across primary, community, hospital and other health related services, linked along the continuum to provide seamless patient care.

In the short term, a combination of primary and secondary health care services including a hospital at Wilton and integrated health care should be provided.

It is recommended a Business Case be prepared by the NSW Government in partnership with Council and the Wollondilly Health Alliance to support the early delivery of health services with the long term plan for delivery of tertiary services. The Business case should include adequate provision for a suitable site of up to 10 hectares to be identified in the Land Use and Infrastructure Implementation Plan being prepared by the NSW Department of Planning and Environment.

Not only is the provision of health care services essential given the clear case established, but it is also important that jobs are provided locally. This would also further promote the use of public transport and reduce automobile dependency which is a contributor to chronic health issues facing our communities.

Current Status - Health Servicing

The current Public Health servicing model is Liverpool centric and the classification of Campbelltown Public Hospital as a category B Hospital limits access to resourcing that will meet the current needs of our communities. If current needs are not being adequately met how is our growing communities need going to be met. This is reflected in the limited resourcing an inequitable allocation of services at Campbelltown Public hospital such as:

- pathology services,
- Nuclear medical services,
- neurosurgery
- vascular surgery
- midwifes and other post maternity services
- low rehabilitation FTE services
- decrease in specialist services
- elective surgery no public neurology or ENT surgeon in Macarthur Region unless you are admitted through emergency

The inequitable allocation and funding of these services and opportunities at Campbelltown Public Hospital, and having to travel to Liverpool Public Hospital is creating a competition for limited resources based upon the categorisation of public hospital. This also plays out in community health, home care and social support programs. In the competition for limited resources, Wollondilly has not been a high needs area, in terms of both population numbers and indicators of disadvantage. Wollondilly also suffers by being "the poor cousin" in the Macarthur sub-region where program resources are allocated to Macarthur and are often based in Campbelltown and do not make it "over the hill" to Wollondilly, or are under threat of withdrawal to sustain the parent service.

As Wollondilly (and also Camden) grow to a similar size as Campbelltown, consideration will need to be given to their standing alone as units for resource allocation in their own right. The transition to this stage will need to be managed equitably so are residents are not seen as less deserving in comparison to other well-resourced areas such as Central and Eastern Sydney. Our area has a significantly lower number of medical and health services and our citizens are travelling long distances and experiencing long waiting times that results in cost shifting practices in to the private sector, that is often unaffordable and out of reach of many, again in turn exacerbating chronic medical conditions.

The population is not large enough nor sufficiently concentrated to support much in the way of private / commercial services (medical specialists, allied health, diagnostic services). There is a tendency for such services to cluster around hospitals, presenting challenges for Wollondilly even as its population grows. A high need has been expressed for better access to these types of services within the Shire, and ways of supporting their viability until population thresholds are reached will need to be considered.

There is currently no Nuclear medicine servicing at Campbelltown Public Hospital – the only publically available PET scan is available at Liverpool hospital. People in our community that have thyroid issues, bone cancer, Chronic lung issues such as blood clots are reliant on Nuclear medicine-there is an inequitable coverage of Nuclear medicine services across the SWS Health service and poor access to public transport facilities exacerbate this.

The current level of resourcing and servicing at the Emergency departments at Campbelltown Hospital and in particular Camden Public Hospital Emergency department has been reported by our residents as dangerous. The wait times, lack of specialist doctors, and inadequate medical equipment have been cited as major concerns. The closure of the after-hours doctor service has also placed a greater demand upon the emergency services department at the hospital.

Population growth, ageing patients, and an increase in chronic diseases have all been identified as contributing factors to an overburdened hospital system. The demand is higher in South Western Sydney due to less privately funded patients, poor health literacy and education, non-adherence to

treatment, lack of money to access treatment and the social issues that surround this area. Our population has grown and services have not grown with it.

There is a lack of funding from private patients in the public system as the South West Sydney Area has the lowest rates of private hospital beds and private health insurance hospital cover compared to other regions in Greater Sydney, placing further strain on the public hospital system.

With the impending growth there will be an increase demand for a range of services including maternity, midwifery, early childhood, youth related services and mental health and wellbeing services therefore it is recommended a review of pediatric servicing be undertaken.

Wollondilly residents use a wide range of hospitals, with greatest use of Campbelltown and Bowral Hospitals and a variety of private hospitals. There are current redevelopment projects of Campbelltown, Liverpool and Bowral and District hospitals in response to the Department of Planning and Environment's (DPE) growth projections for Macarthur, the South West Growth Centre and the Southern Highlands. The current refurbishment of Campbelltown Public Hospital will only meet the current identified gap in servicing needs of the current population and there is concern there will remain a gap of service provision for the growth over the coming 20 -30 years.

The assumption of growth numbers across the Campbelltown, Camden and Wollondilly areas is grossly underestimated to what is expected on the ground. The projections only include part of the growth expected for the Wollondilly and Campbelltown Local Government Areas.

A larger population for Wollondilly will create greater demand for health services generally. In 2014, hospitalisations for Wollondilly residents due to high body mass index, coronary heart disease and respiratory diseases were higher than the NSW average.

The ratio of patients to General Practioners and specialists has historically been low in the Wollondilly Area. While there is no nationally recognised 'ideal' medical workforce to population ratio the medical workforce remains unevenly distributed.

The Health Needs Assessment for South West Sydney (SWSML 2013a) reported that, with 15 fulltime equivalent GP's, Wollondilly had a ratio of 1GP: 2,960 people. This compared with a ratio of 1GP per 953 people across SWS, and a national rate of 1 GP: 1,101 people. Wollondilly had the lowest ratio of GPs to population amongst the local government areas in SWS. Since that study, the number of GPs working in Wollondilly has increased, with the opening of a new practice in Appin in February 2014 and additional doctors at Picton and Tahmoor practices.

There are currently 22 GPs working in the Shire; however, many are part-time and one is understood to be close to retirement. Based upon 17 FTE GPs and an estimated population in 2014 of 46,295 (Forecast.id on Council's website), the ratio is now estimated at 1 GP: 2,723 residents. Despite the small improvement, Wollondilly still has the lowest provision of GPs within the SWS Health District, and a level that is considerably below the national benchmark.

With a growth projection of aprox 350,000 over the next 20 years, the Macarthur Region alone will need and extra 350 new General Practitioners, just for the growth. The current shortfall need is also not considered in this projection. Of equal concern is the ageing general practitioner workforce.

Wollondilly is classified a metropolitan area and the current policy of not being able to recruit overseas doctors in metropolitan areas, sourcing the general practitioner projected need will continue to be a challenge and more than likely will continue to remain low for Wollondilly. This outcome will impact upon Wollondilly residents' access to GP practices, who also provide limited to nil after hours services, in turn creating a greater demand upon the emergency department services of Campbelltown, Camden, Bowral and Liverpool Public Hospitals.

Wollondilly Shire needs better local health infrastructure, more GPs and more allied health services. The much lower number of non-specialist (general practitioners) and specialist medical practitioners in the South West Sydney region compared to rates for other Greater Sydney regions and NSW leads to the following implications:

- Reported long wait times and travel times to see a GP
- Tendency for residents to put off seeing a GP until really necessary
- Particular shortage of female GPs, disadvantaging women and girls
- Limited choice of GPs and lack of continuity of care
- Lack of local after hours services, with consequent impacts on hospital emergency departments
- Lack of GPs providing home visits, with implications especially for housebound people
- Challenges in recruiting GPs to work in Wollondilly.

In addition to the shortage of GPs, the most commonly identified gaps in the service system include medical specialists, allied health practitioners, mental health services, services for children and young people, diagnostic services and preventative health services. The limited range of services available in Wollondilly creates a reliance on health services in adjoining local government areas, especially Campbelltown. Travel is far greater to Liverpool hospital and and beyond for tertiary services. There are many tertiary services that are provided at Campbelltown, Bowral and Camden Hospitals.

Long travel distances within Wollondilly and from Wollondilly to health services in Campbelltown, Camden, Bowral and further afield have implications both for residents and service providers. For residents, the key issues are the time and cost required to access distant services, and associated disincentive to use services. For service providers, the need to travel over large distances is a disincentive for servicing the area and means that fewer patients can be seen. Travel time and costs cut heavily into patient packages of care and can mean that an insufficient level of service is provided, or the packages are simply not made available to Wollondilly residents. Consumers are seeking different models of care, where the service comes to them rather than having to travel to the service, but this presents resourcing challenges for service providers.

Wollondilly residents travel the furthest and expend the greatest amount of time travelling of any residents in the Greater Metropolitan Sydney Region, and also have a significant reliance on private vehicles. Travel distances are exacerbated by the poor public transport available in the Shire. Groups particularly disadvantaged by this include older people, young people, those on low incomes and those who are ill or disabled without a carer to drive them. There is a very high demand for community transport for medical-related trips.

The key challenge is how to 'grow' the health service system across a spectrum of services to better meet the needs and expectations of an expanding population.

In terms of community mental health, Wollondilly is part of the Macarthur sub-district. The Macarthur mental health team is based in Campbelltown, but has two mental health workers working from the community health centre in Tahmoor. Services for adults and young people are based in Campbelltown and include community emergency care, case management, rehabilitation / recovery, Aboriginal mental health, early intervention and health promotion. Only adult support services are provided from Tahmoor.

Preventative health strategies and other related matters.

Wollondilly Shire Council is committed to best practice initiatives and partnerships that contribute to positive health and wellbeing outcomes. This is driven by our current context and future opportunities as follows:

- As a large peri-urban shire with dispersed towns and villages and a relatively low population, our community face a particular set of health challenges and issues related to limited local services and outreach, access and distance impediments, and other social, economic and environmental factors.
- The population of Wollondilly Shire is approximately 51,000 and this number could head towards 100,000 or beyond over the next 20 to 30 years. Council therefore has a responsibility to pursue best practice approaches so that our future communities are healthy and happy. As a Western Sydney City Deal Council we have signed an MOU to partner on a regional level with the Western Sydney Health Alliance to jointly plan, fund and share innovative place based solutions that have the potential to scale service provision in the Wollondilly area.
- Wilton New Town, as a planned town with an eventual population of up to 50,000, is an opportunity to deliver an exemplar built environment that achieves positive health outcomes and liveability.
- The Wollondilly Health Alliance (WHA) was formed in 2014 and is a partnership between Wollondilly Shire Council, South Western Sydney Primary Health Network and the South Western Sydney Local Health District. The objective of the WHA is "to proactively address the ongoing health issues facing the Wollondilly community and work towards creating a better serviced and healthier Wollondilly community"
- Wollondilly Shire Council, in partnership with the Wollondilly Health Alliance, produced a Wollondilly Social Planning Strategy (November 2016) which identifies the Shire's key social issues and opportunities and prioritises actions to achieve positive social outcomes. The Social Planning Strategy's approach recognises the importance of the social determinants of health.
- Wollondilly Shire Council has also been working in partnership with SWS Local Health District (Population Health) and the University of New South Wales' Centre for Health Equity Training Research and Evaluation (CHETRE) on how Council can better integrate social and health considerations into planning processes, particularly land use planning.

What we want to achieve?

1. Healthy built environments and liveable places

These are environments and places that:

- Support and encourage physical activity.
- Provide transport choice and accessibility.
- Support access to employment and education opportunities.
- Connect and integrate social services and physical infrastructure systems.
- Provide diverse and affordable housing options.
- Support social cohesion and equity.
- Create desirable and attractive places with community identity and a sense of place.
- Enable access to healthy food.

- Provide a high quality and safe public domain.
- Provide opportunities for recreation, culture and entertainment.
- Integrate the natural environment through green spaces and networks.

2. Better access to health care services and programs

Wollondilly needs more locally based health services, programs and facilities. They need to be in place early, adaptable to the growing population and focused on preventative health.

What we will do:

- Incorporate social and health considerations as an integral part of the planning processes for new and existing communities.
- Continue to work to achieve positive community health outcomes through the Wollondilly Health Alliance.
- Advocate for more locally based health services, programs and facilities.

References :

- Wollondilly Health Needs Assessment (2014) found at <u>https://www.swslhd.health.nsw.gov.au/pdfs/wollondillyHN.pdf</u>
- Wollondilly Social Planning Strategy (2016) found at <u>https://www.wollondilly.nsw.gov.au/council/council-forms/?fid=2990</u>
- Wilton Health and Wellbeing Strategy (2019) found at <u>https://agendasandminutes.wollondilly.nsw.gov.au/Open/2019/12/CO20191216AGN2232</u> <u>EXTRA_files/CO20191216AGN2232_EXTRA_Attachment_9685_1.PDF</u>
- Wollondilly Local Strategic Planning Statement 2040 (2020) found at <u>https://www.wollondilly.nsw.gov.au/assets/Documents-NEW/Planning-and-</u> <u>Development/Guidelines-and-Controls/March-2020-Wollondilly-2040-Local-Strategic-</u> <u>Planning-Statement-Made-Version.pdf</u>

We thank you for your consideration and Council would welcome the opportunity to provide more information. Please do not hesitate to contact me on or at at any time.

Yours faithfully

Ally Dench Executive Director COMMUNITY & CORPORATE

ⁱ World Health Organisation (1946), Constitution of the World Health Organisation