

DRAFT REGIONAL PUBLIC HEALTH PLAN REVIEW

District Council of Ceduna, District Council of Streaky Bay, District
Council of Elliston and Wudinna District Council



Draft revised plan pursuant to section 51(19) of the SA Public Health Act 2011 following a 5 yearly review undertaken by the partner Councils of the initial Regional Public Health Plan issued 10 March 2015.

Date: 30 March 2020

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1. Western Upper Eyre – Planning for a Healthy Region

Good health and positive wellbeing are essential for any thriving community. Everyday life is improved by public health systems and services that support a clean, safe and healthy environment. In order to develop a sustainable health system for the future, we need to reduce the burden of disease and associated costs to our community by focusing on protecting and promoting health and wellbeing and preventing illness.¹

The District Council of Ceduna, District Council of Streaky Bay, District Council of Elliston and Wudinna District Council with Healthy Environs Pty Ltd issued their first Regional Public Health Plan 10th of March 2015 and continued to work collaboratively to perform its first 5 yearly review.

The public health of the community of the Western Upper Eyre and West Coast Region² is supported through the efforts of a range of government sectors, non-government organisation, schools and local community groups. This plan also recognises where Council has a support, advocacy or promotion role for initiatives primarily managed by other sectors within the community.

2. Plan Scope – Council functions and Impacts to Public Health

2.1. Planning for a healthy population

A healthy, liveable and connected community for all South Australians³

The plan seeks to uphold and align strategies within the councils` sphere of influence to accomplish the vision of the State Public Health Plan (2019-2024) for our region². The scope of our Regional Public Health Plan remains to promote health and well-being through the physical and social environment within the realm of Councils` sphere of influence.

This revised plan has regard to strategic priorities outlined by the State Public Health Plan (2019-2024) to embrace the vision of “a healthy, liveable and connected community for all South Australians”.

- Promote- Build stronger communities and healthier environments
- Protect – Protect against public and environmental health risks and respond to climate change
- Prevent – Prevent chronic disease, communicable disease and injury
- Progress – Strengthen the systems that support public health and well-being

2.2. Strengthening the Role of Councils

Referencing the State Public Health Plan (2019-2024); Councils as part of their first Regional Public Health Plan consistently focus on key determinants of health including built and natural environments, social cohesion and inclusion, social protection, climate change, food and water safety and security, economic development and local employment, education and learning, crime and safety and the cultural determinants of health.¹

¹ State Public health Plan (2019-2024)

² Region indicate the District Councils of Ceduna, Elliston, Streaky Bay and Wudinna District Council

³ Vision – State Public health Plan (2019-2024)

A continued focussed effort across all government sectors, non-government agencies and community groups is key for ongoing support of our community well-being in the region.

3. Planning Principles

In its pursuit to promote and to provide for the protection of the health of the public of South Australia and to reduce the incidence of preventable illness, injury and disability; the *South Australian Public Health Act 2011* (the Act) recognises principles further its objectives.

Table 1 – Principles to be recognised pursuant to SA Public Health Act 2011

Principle	Our Approach
Precautionary	We will adopt a precautionary approach to managing public health risks.
Proportionate regulation	Our regulatory measures take into account impacts on business and members of the community whilst ensuring requirements to protect and promote public health are met.
Sustainability	Our focus is on the promotion of regional social, economic and environmental sustainability to support good health.
Prevention	We will support pro-active intervention to prevent health conditions in the community.
Population focus	The focus of this plan is on the broader public health of the population, with a consideration of vulnerable groups in the region.
Participation	Communities will be encouraged to take responsibility for their own health and engage with the different government and non-government agencies.
Partnership	We recognise that addressing health priorities for the region requires involvement across a range of sectors and stakeholders.
Equity	We will consider the health disparities between groups within our community. Our focus will be to support equitable benefits and services across the regional population.

4. Review of the Plan

Pursuant to section 51(19) of the Act, a 5 yearly review is required following the issue of our Regional Public Health Plan in 2015. A review framework⁴ was developed during September 2019 in accordance with the SA Health and LGA Guidelines. The Guidelines provide the framework for the required review process and outlined the following:

- Provide a summary;
- Affirm council representation;
- Outline review deliverables; and
- Review process

In summary the review process considered the following areas (Figure 1).

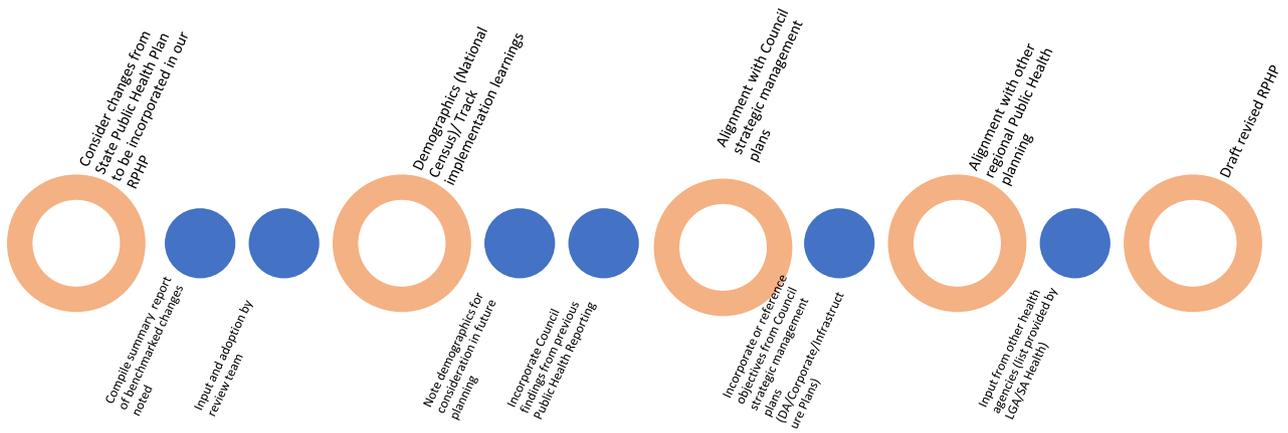
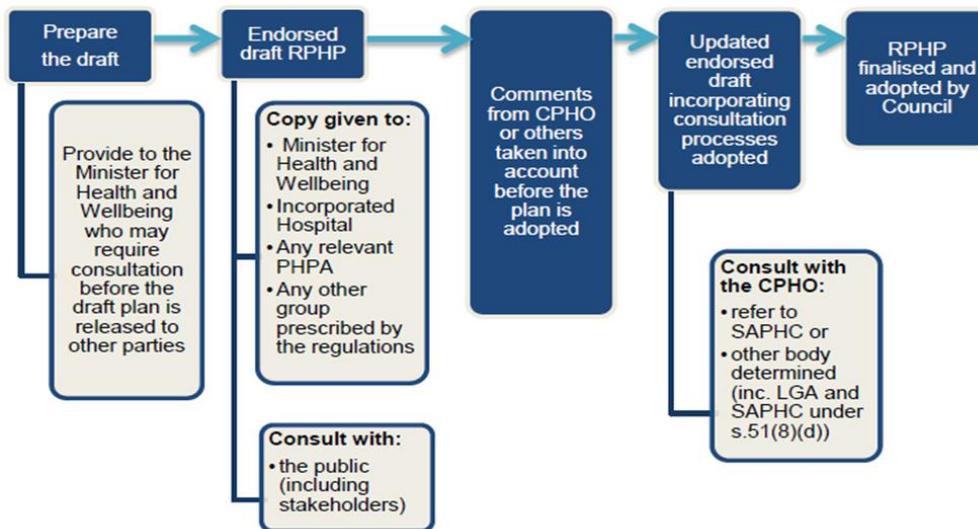


Figure 1 Review Framework

Consultation on a revised plan

Amendments to the plan requires consultation steps prescribed by the Act in addition to any relevant Council policies on consultation. The review process itself is not required to be submitted to external parties as per SA Health/LGA guidelines. The flowchart below (Figure 2) depicts the formal requirements to consult providing an opportunity for communication about strategic alignments and policy directions relevant to the renewed RPHP.

Steps in preparing a draft RPHP for consultation



Source: SA Health Factsheet (Figure 2)

5. The Regional State of Health

Referencing our State Public Health Plan (2019-2024); many South Australians enjoy a high standard of living, live in safe neighbourhoods, have stable employment, secure housing, are well educated and have easy access to services; like schools, transport, health and social services. These social determinants of health contribute to improved health and wellbeing, however ⁴:

- on every measure of social determinants, Indigenous people have lower levels of health. Additionally, they have higher rates of the risk factors that contribute to chronic diseases like type 2 diabetes, heart disease and some cancers, as well as poorer access to health services. Overall, Indigenous people have higher rates of disease and shorter life expectancy ⁵;
- South Australians living in rural and remote areas, have higher rates of chronic conditions and have poorer physical and mental health status than those who live in metropolitan areas. Rates of risk factors for disease are higher and access to services poorer ⁶;
- people living in areas with the highest socioeconomic disadvantage are more than twice as likely to die from avoidable causes⁷.



Source: State Public Health Plan (2019-2024) for South Australia (Figure 3)

⁴ Summary State Public Health Plan (2019-2024)

⁵ Commonwealth of Australia. Australian Early Childhood Development Census National Report 2015. 2016; Available from: <https://www.aedc.gov.au/resources/detail/2015-aedc-national-report>.

⁶ Australian Bureau of Statistics. 6227.0 – Education and Work, Australia, May 2017.2017; Available from: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/6227.0Main+Features1May%202017?OpenDocument>

⁷ Australian Institute of health and Welfare. Deaths in Australia.2018; Available from: <https://www.aihw.gov.au/reports/life-expectancy-death/deaths-in-australia/contents/life-expectancy>

***Population Health Profiles by the Public Health Information Development Unit (PHIDU),
Torrens University for Local Government Association of South Australia***

In partnership with SA Health, the LGA has commissioned updates to the Population Health Profiles to support a council or group of councils to prepare their Regional Public Health Plans (RPHPs) under Section 51 of the Act.

The data contained in population health profiles provide information about a broad range of social, economic and environmental issues that are important to the work of local government as well as local communities.

These profiles aim to provide a basis for informed and integrated council planning and policy making and to be a useful tool for local government policy and planning staff, including senior management, elected members and non-government organisations that operate in the relevant regions as well as the local community.

6. The Region

6.1. Regional Profile

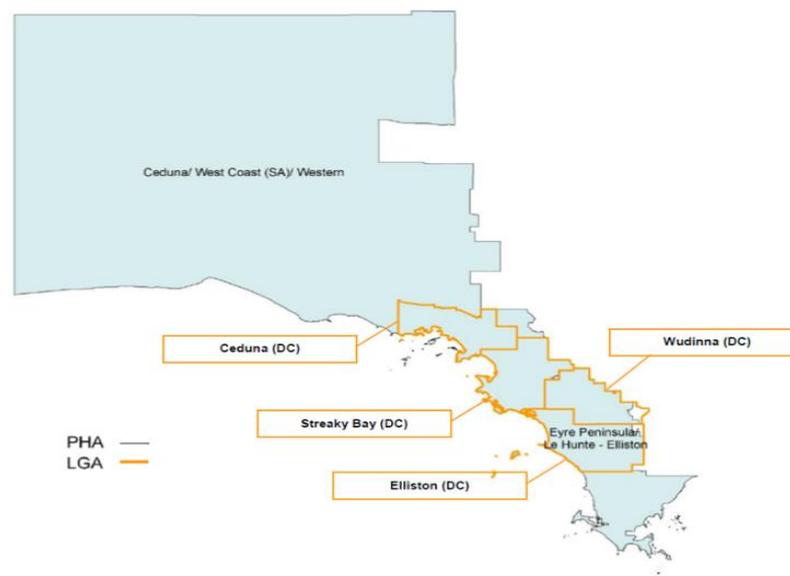
The District Councils of Ceduna, Elliston, Streaky Bay and Wudinna are in the Upper and Far Western region of the Eyre Peninsula. The combined regional area of the four District Councils covers approximately 23739 square kilometres.

Most of the region is considered to be remote or very remote. Distances from Adelaide range from 580 kilometres for Wudinna through to 780 kilometres for Ceduna on the West Coast. Planning needs to recognise the overall disadvantage associated with the region's remoteness.

Population Health Areas (PHA) are geographical areas based on suburbs (in larger cities and larger towns) and localities (in regional and remote areas) as published by the Australian Bureau of Statistics. Figure 4 illustrates a map of the Western Upper Eyre and West Coast, its Local Government Areas (LGA) and Population Health Areas (PHA).

Data (Western Upper Eyre and West Coast comprising Ceduna, Elliston, Streaky Bay and Wudinna)

The data for most of the indicators published in the Population Health Profile report were provided to PHIDU at the Statistical Areas Level 2 (SA2) or Population Health Area (PHA) level. In many instances the boundaries of these areas do not coincide with the boundaries of LGAs. In order to produce data for LGAs from the SA2 or PHA data, PHIDU has used correspondence files from the Australian Bureau of Statistics (ABS) to allocate whole or part SA2s and PHAs to LGAs. As these correspondences are based on the total population in each SA2 or PHA part which falls within an LGA, their application to other data (e.g., immunisations, income support payments, women smoking during pregnancy) does not necessarily provide an accurate result for the LGA. Some indicators relating to personal health and well-being are based on modelled estimates and unfortunately in the case of the areas that comprise Western Upper Eyre and West Coast they were not available as the ABS does not produce modelled estimates for areas classed as Very Remote areas, Indigenous communities or where the population was less than 1000 persons.



Source: Population Health Profile – PHIDU (Public Health Information Development Unit, Torrens University) (Figure 4)

Catchment area details for the District Councils are presented in Table 2.

Table 2 – Catchment Areas for the District Councils

Council	Council Staff	Area Km ²	Distance form Adelaide-Kms	Townships	Settlements	Roads – Kms (Approx.)	Rateable Properties
Ceduna	33	5420	780	Ceduna, Smoky Bay, Thevenard, Denial Bay	Koonibba	1715	2733
Elliston	22	6693	670	Elliston, Lock, Port Kenny, Venus Bay	Sheringa	1000	1320
Streaky Bay	31 FTE	6232	700	Streaky Bay	Wirrulla, Poochera, Haslam, Sceale Bay, Baird Bay, Eba Anchorage, Perlubie Landing	1,764km	2,368
Wudinna	21	5394	580s	Wudinna, Minnipa	Pygery, Yaninee, Warramboob, Kyancutta	1,702km	1110

6.2. The Population



Source: ABS Census 2016

Each of the LGAs in Western Upper Eyre & West Coast displays differences in their age profile from that of the Regional SA age profile (Figure 5). Of the four LGAs that comprise Western Upper Eyre & West Coast Ceduna has the most similar population profile however with slightly more 5-14 year old and less people aged 20-24, as well as in the 35-44 age group. In the older age groups, there were more people aged 50-74 age and slightly less in those aged 75 and over.

The age profile for Streaky Bay was also similar to that of Regional SA however there were more children and young people, as well as females aged 10-14. There were less males aged 15-29 and more persons aged 30-70, most notably in males 55-64, however numbers were lower in the 70 and over age groups when compared to Regional SA overall.

The age profiles of Elliston and Wudinna were almost identical and were the most dissimilar when compared to the Regional SA age profile with the following differences, there were more children aged 0-9 and less people in the 15-24 age group, as well as less males aged 25-29. There were slightly more females aged 30-44 and more males aged 50-54 (with slightly less females in the same age group). In the older age groups, there were more persons aged 55-64, especially males, with more males aged 65-69 (with slightly less females of the same age group). Overall, there were less persons aged 70 years and over.

Figure 5 - Age profile comparisons of LGAs in Western Upper Eyre and West Coast and Regional SA, 2016



Source: Population Health Profile by PHIDU, Torrens University

Table 3 – Demographic Summary (ABS Census2016)

	Total Population (ABS Census 2011- LGA)	Total Population (ABS Census 2016-LGA)	Indigenous and Torres Strait Islander	% Indigenous and Torres Strait Islander	IRSD ¹
Ceduna	3480	3408	741	21.7%	957
Elliston	1046	1045	30	2.9%	980
Streaky Bay	2102	2074	32	1.5%	999
Wudinna	1253	1250	25	2.0%	1004
Region	7881	7777	828		979

¹Population Health Profile- PHIDU Torrens University. IRSD index has a base of 1000 for Australia where scores above 1000 indicate relative lack of disadvantage and scores below indicate relatively greater disadvantage. The IRSD score for Western Upper Eyre & West Coast (979) was above the Regional SA score of 945, indicating that it was relatively advantaged under this measure. There was little variation between the LGAs; the highest score was in Wudinna (1004), followed by Streaky Bay (999), and Elliston (980) the lowest score was in Ceduna (957). The PHA of Ceduna/ West Coast/ Western had an IRSD score of 959, just above the score in Regional SA overall.

There were 828 people who reported in the 2016 Census that they were of Indigenous and/or Torres Strait Islander descent. Following the Census, the Australian Bureau of Statistics (ABS) has estimated that there were 1,067 people of Indigenous and/or Torres Strait Islander descent resident in Western Upper Eyre & West Coast, accounting for 13.2% of the total population; this was over two and half times the level in Regional SA overall (5.0%). There was considerable variation between the LGAs, from Ceduna, where Indigenous people comprised over one quarter of the population (26.5%, and over five times the level in Regional SA overall), to much lower proportions in the other LGAs. There was also a very high proportion in the PHA of Ceduna/ West Coast/ Western (21.6%).

Regional Profile – Summary Considerations for Population Health

Managing public health requirements within limited resources. Focus on integrating public health priorities within Council functions.

Challenges in providing accessible community development programs and services, due to the small and dispersed population and overall remoteness.

Decreases in funding and increased cost shifting for the maintenance of infrastructure, including rural roads funding, is placing financial pressure on Councils.

Plan culturally appropriate services for Indigenous people primarily within the District Council of Ceduna.

Consider the physical and social infrastructure needs of an ageing population.

Acknowledge areas of socio-economic disadvantage within the region, particularly within the District Council of Ceduna

7. Population Health Status

This section considers profiled data and information related to the health status and health risks linked to the population of our region. The framework indicators and profiling were sourced from the Population Health Profile produced by the Public Health Information Development Unit (PHIDUH), Torrens University, for the Local Government of South Australia.

7.1. Personal Health and Well-being

Indicators	Western Upper Eyre & West Coast	Ceduna (DC)	Ceduna/ West Coast/ Western*	Elliston (DC)	Eyre Peninsula/ Le Hurte - Elliston*	Streaky Bay (DC)	Ceduna/ West Coast/ Western*	Wudinna (DC)	Eyre Peninsula/ Le Hurte - Elliston*	Metro Adelaide	Regional SA	South Australia	Australia
Early life and childhood (Per cent, Rate)													
Total fertility rate, 2013-15	2.45	2.27	2.25	2.24	2.51	2.10	2.25	3.45	2.51	1.79	2.19	1.85	1.88
Women smoking during their pregnancy, 2012-14	23.9	25.2	24.4	0.0	10.7	21.0	24.4	0.0	10.7	12.3	21.1	14.1	10.8
Immunisation at 1 yr of age, 2017	93.5	95.2	95.3	..	94.4	95.6	95.3	..	94.4	94.0	94.9	94.3	94.0
Immunisation at 5 yrs of age, 2017	92.8	91.9	92.8	..	92.5	94.1	92.0	..	92.5	93.0	94.5	93.9	94.0
Obesity: males aged 2-17, 2014-15	n.a.	..	..	..	..	..	..	..	..	6.8	7.0	6.7	6.7
Obesity: females aged 2-17, 2014-15	n.a.	..	..	..	..	..	..	..	..	6.7	7.2	6.8	8.4
Fruit consumption: children aged 4 to 17 years, 2014-05	n.a.	..	..	..	..	..	..	..	..	65.3	66.4	65.6	66.3
Infant death rate, 2011-15	..	0.0	..	0.0	..	0.0	..	..	..	2.6	3.9	2.9	3.5
Children and young people who are clients of CAMHS, 2015/16-2017/18	1,988.4	2,406.3	2,011.4	1,171.1	1,591.3	1,538.7	2,011.4	1,011.6	1,591.3	1,303.9	2,380.9	1,553.1	n.a.
AEDC: Children developmentally vulnerable on one or more domains, 2015	n.a.	25.5	28.1	..	24.1	20.0	28.1	26.9	24.1	23.0	25.3	23.5	22.0
Personal health and wellbeing (Per cent, Rate)													
Self-assessed health as fair, or poor, 2014-15	n.a.	..	..	..	..	..	..	..	..	15.8	17.0	15.9	14.8
High/ Very high levels of psychological distress, 2014-15	n.a.	..	..	..	..	..	..	..	..	13.9	13.0	13.7	11.7
Type 2 diabetes, 2014-15	n.a.	..	..	..	..	..	..	..	..	4.3	4.7	4.4	4.4
Mental health problems: males, 2014-15	n.a.	..	..	..	..	..	..	..	..	16.8	19.3	17.3	15.8
Mental health problems: females, 2014-15	n.a.	..	..	..	..	..	..	..	..	19.0	21.2	19.4	19.2
Smoking, 2014-15	n.a.	..	..	..	..	..	..	..	..	14.2	18.0	15.0	16.1
Obese males, 2014-15	n.a.	..	..	..	..	..	..	..	..	26.6	34.2	28.2	28.4
Obese females, 2014-15	n.a.	..	..	..	..	..	..	..	..	29.9	38.1	31.6	27.5
Physical inactivity, 2014-15	n.a.	..	..	..	..	..	..	..	..	67.0	73.2	69.2	66.3
Fruit consumption: adults, 2014-15	n.a.	..	..	..	..	..	..	..	..	49.0	46.2	49.5	49.8
Median age at death: males, 2010-14 ¹	75.0	75.0	80.5	80.5	79.0	68.0	69.5	80.5	79.0	80.0	78.0	79.0	75.0
Median age at death: females, 2010-14 ¹	83.4	82.0	83.5	85.0	85.0	84.0	83.5	85.0	85.0	84.0	85.0	85.0	84.0
Premature mortality: males, 2011-15	407.8	478.7	444.6	194.4	272.9	383.0	444.6	242.6	272.9	288.0	332.3	301.1	293.9
Premature mortality: females, 2011-15	235.0	285.9	243.3	..	148.3	186.6	243.3	..	148.3	181.4	197.9	186.3	182.2
Premature mortality: 15 to 24 yrs, 2011-15	n.a.	..	132.1	0.0	..	..	..	..	..	29.4	56.2	34.6	37.4
Premature mortality from suicides, 2011-15	22.2	..	22.7	0.0	..	..	..	..	..	12.5	14.0	12.9	11.5
Admissions to hospital: total, 2016/17	34,735.7	36,060.9	36,001.4	31,840.5	30,968.0	34,206.0	36,001.4	34,289.5	30,968.0	36,465.0	34,457.8	35,977.6	36,628.3
Admissions to hospital: potentially avoidable conditions, 2016/17	4,193.8	4,613.1	4,658.3	2,908.7	2,749.8	4,408.9	4,655.3	3,010.4	2,749.8	2,861.6	3,190.9	2,665.0	2,685.4
Difficulty accessing healthcare, 2014	n.a.	..	..	..	..	..	..	..	..	1.2	1.2	1.2	2.0
HACC clients living alone, 2014/15	30.4	27.1	27.1	38.2	38.2	27.1	27.1	38.1	38.2	37.4	31.3	35.8	37.1
HACC: Non-English speaking clients, 2014/15	28.4	31.6	31.6	21.2	21.2	31.6	31.6	20.8	21.2	19.4	11.4	17.4	14.7
Clients of community mental health services, 2015/16-2017/18	5,460.4	6,650.2	4,784.3	1,318.6	1,593.4	2,559.1	4,784.3	1,333.6	1,593.4	1,892.9	3,104.6	2,178.7	n.a.
Residential aged care places per 1,000 population aged 70 yrs & over, June 2016	119.0	102.4	111.6	205.1	58.8	54.8	111.6	69.9	58.8	95.4	81.5	91.7	82.6
Community connectedness (Per cent, Rate)													
Unable to get support in times of crisis, 2014	n.a.	..	..	..	..	..	..	..	..	93.9	94.1	93.9	94.3
Disagree/strongly disagree with acceptance of other cultures, 2014	n.a.	..	..	..	..	..	..	..	..	4.8	6.6	5.0	4.5
Government support as main source of income in last 2 years, 2014	n.a.	..	..	..	..	..	..	..	..	31.0	36.8	32.3	27.1
Accessed the internet at home in the past 12 months, 2016	73.7	70.4	72.6	76.9	75.5	77.6	72.6	73.2	75.5	62.3	75.9	69.6	63.2
Personal and community safety, 2014 (Rate)													
Feel very safe/safe walking alone in local area after dark	n.a.	..	..	..	..	..	..	..	..	49.7	57.6	51.3	52.4

Details of abbreviations, calculations etc. are included in the Notes on the data.
 Note: Shading for the IRSD has been reversed, with low scores (greater disadvantage) in darker shades.
 The indicators for 'Born overseas in predominantly non-English speaking countries', 'Aboriginal and Torres Strait Islander people' and 'Total Fertility Rate' have not been highlighted in this table.

Good outcome	50% or more above metropolitan average	30-49% above metropolitan average	10-29% above metropolitan average	within +/- 10% of metropolitan average	10% or more below metropolitan average
Poor outcome	50% or more above metropolitan average	30-49% above metropolitan average	10-29% above metropolitan average	within +/- 10% of metropolitan average	10% or more below metropolitan average

With respect to people who provide unpaid assistance to others with a disability, a long-term illness or problems related to old age; the following observations were made. One in ten people (9.6%) in Western Upper Eyre & West Coast spent time providing unpaid care, help or assistance to family members or others because of a disability, a long-term illness or problems related to old age; this was markedly below the level in Regional SA (12.2%).

There were markedly (42%) fewer people in Western Upper Eyre & West Coast with a profound or severe disability and living in the community than in Regional SA, comprising 3.3% and 5.6% of the of the population, respectively.

The total fertility rate in Western Upper Eyre & West Coast (a rate of 2.45) was notably (12%) above the level in Regional SA overall (2.19).

There were women in Western Upper Eyre & West Coast who smoked during their pregnancy in this three-year period, accounting for 23.9% of all pregnancies, above the level in Regional SA overall (21.1%).

Smoking rates varied between the LGAs; the highest rate was in Ceduna (25.2%), being almost a fifth higher than in Regional SA overall, with a similar rate in the PHA of Ceduna/ West Coast/ Western (24.4%). The rate of women in Streaky Bay smoking during pregnancy (21.0%) was lower and was consistent with the level in Regional SA; the numbers of women in Elliston, and Wudinna who smoked during pregnancy were very low and were suppressed to preserve confidentiality.

Some 93.5% of children in Western Upper Eyre & West Coast were fully immunised at one year of age, a level consistent with that in Regional SA (94.9%). Immunisation rates in Ceduna (95.2%), Streaky Bay (95.6%) and the PHA of Ceduna/ West Coast/ Western (95.3%) were all consistent with the rate in Regional SA overall. The numbers of children in Elliston and Wudinna who were fully immunised at one year of age were very low and were suppressed to preserve confidentiality.

As with full immunisation at one year of age, the rate of full immunisation at five years was generally consistent with the Regional SA rate (92.8%, and 94.5% respectively). The highest coverage was in Streaky Bay (94.1%), with slightly lower levels in Ceduna (91.9%) and the PHA of Ceduna/ West Coast/ Western (92.6%). The numbers of children in Elliston and Wudinna who were fully immunised at five years of age were very low and were suppressed to preserve confidentiality.

There were children and young people in Western Upper Eyre & West Coast who were clients of the Child and Adolescent Mental Health Service over the three years 2015/16 to 2017/18, an annual rate of 1,988.4 clients per 100,000 population aged 0 to 19 years; this was a notably lower rate than in Regional SA overall. Rates varied between the LGAs; with the highest rate, in Ceduna (2,406.3 clients per 100,000 population aged 0 to 19 years), consistent with the Regional SA rate. Lower rates were found in Streak Bay, Elliston, and Wudinna, with the latter two areas having rates substantially below the level in Regional SA

The highest rate of children assessed under the AEDC to be 'developmentally vulnerable' on one or more domains in their first year of school was found in Wudinna (26.9%) being just above the level in Regional SA overall (25.3%). The LGA of Ceduna (25.5%) and the PHA of Ceduna/ West Coast/ Western (26.1%) had proportions consistent with the level in Regional SA. The lowest proportion was in Streaky Bay (20.0%), some 21% below the level in Regional SA overall.

The premature mortality rate for males in Western Upper Eyre & West Coast (407.8 deaths per 100,000 males) was 23% above the level in Regional SA for males, of 332.3 deaths per 100,000 males.

The rate of female premature mortality in Western Upper Eyre & West Coast was markedly (42%) below the male rate. At 235.0 deaths per 100,000 females, it was 19% above the Regional SA rate of 197.9 deaths per 100,000 females.

As the number of premature deaths among people aged 15 to 24 years in Western Upper Eyre & West Coast and its corresponding LGAs for the five-year period 2011 to 2015 was very low, the data have been suppressed to preserve confidentiality

In Western Upper Eyre & West Coast the rate of premature mortality due to suicide (22.2 deaths per 100,000 population aged 0 to 74 years) was over one and a half times the Regional SA rate of 14.0 deaths per 100,000 population aged 0 to 74 years; the rate in the PHA of Ceduna/ West Coast/ Western (22.7 deaths per 100,000 population aged 0 to 74 years) was similarly above the level in Regional SA

The rate of admission to hospital of people living in Western Upper Eyre & West Coast (34,735.7 per 100,000 population) was consistent with the rate in Regional SA overall. There was little variation in rates between the LGAs.

There were 342 potentially preventable hospitalisations of people living in Western Upper Eyre & West Coast, a rate of 4,193.8 per 100,000 population, almost a third (31%) above the level in Regional SA overall (3,190.9 per 100,000 population).

In Western Upper Eyre & West Coast, 30.4% of all Home and Community Care Program clients lived alone, slightly below the proportion in Regional SA (31.3%).

The number of clients of community mental health services living in Western Upper Eyre & West Coast (5,406.4 rate per 100,000 population) was substantially (76%) above the level in Regional SA overall (3104.6 rate per 100,000 population).

There were 101 residential aged care places in Western Upper Eyre & West Coast, a rate of 119.0 places per 1,000 population aged 70 years and over, which is markedly (46%) above the rate in Regional SA, of 81.5 places.

7.2. Stakeholder Priorities for Personal Health and Well-being

Addressing Health Risk Behaviours such as smoking, alcohol consumption, inadequate diet and physical inactivity

Access to mental health services

Promoting physical activity

Promoting social health and well-being

Closing the gap in Indigenous health status

Oral Health

Ageing Community

Addressing lack of access to GPs and other Health and Allied Health professionals across the regions.

Continued funding for SAAS Community Paramedic as the integral early intervention process for indigenous health

8. Socio-economic and Environmental Determinants of Health

This section considers profiled data and information related to the health status and health risks linked to the population of our region. The framework indicators and profiling were sourced

from the Population Health Profile produced by the Public Health Information Development Unit (PHIDUH), Torrens University, for the Local Government of South Australia.

The IRSD score for Western Upper Eyre & West Coast (979) was above the Regional SA score of 945, indicating that it was relatively advantaged under this measure. There was little variation between the LGAs; the highest score was in Wudinna (1004), followed by Streaky Bay (999), and Elliston (980) the lowest score was in Ceduna (957). The PHA of Ceduna/ West Coast/ Western had an IRSD score of 959, just above the score in Regional SA overall.

Employment

There were people in Western Upper Eyre & West Coast who were in receipt of an unemployment benefit, comprising 7.5% of the population aged 16 to 64 years; this proportion was notably (13%) below the level in Regional SA, of 8.8%. The highest proportions were recorded in Ceduna and the PHA of Ceduna/ West Coast/ Western.

Two thirds of those in receipt of an unemployment benefit in Western Upper Eyre & West Coast had been receiving the benefit for six months or more; this group comprised 4.9% of the population aged 16 to 64 years, markedly below the level in Regional SA (7.5%). As with total unemployment beneficiaries, the highest proportion was in Ceduna and the PHA of Ceduna/ West Coast/ Western. The total for youth unemployment for Ceduna (persons aged 16 to 24, 7.1% of that age group) and the PHA of Ceduna/ West Coast/ Western (7.4%). are just over one fifth and one quarter, respectively above the level in Regional SA overall.

Education

There were people in Western Upper Eyre & West Coast aged 16 years who were recorded in the 2016 Census as not being in full time education, comprising just over a fifth (21.5%) of that age group; this was markedly above the level in Regional SA overall (17.1%).

Notably (19%) more school leavers in Western Upper Eyre & West Coast with a Year 12 qualification were admitted to university in 2018 than in Regional SA overall (21.6% and 18.1%, respectively).

The majority (80.6%) of young people aged 15 to 24 years in Western Upper Eyre & West Coast were engaged in earning or learning, consistent with the level in Regional SA (80.3%).

Health implications for particularly high school children leaving the area for boarding school away from home are not considered. The potential impact with regards to additional financial strain and anxiety on families are therefore not known.

Income and Wealth

There were children aged less than 16 years living in low income, welfare-dependent families in Western Upper Eyre & West Coast, comprising nearly a fifth (19.6%) of that age group; this was markedly below the level in Regional SA overall (27.6%).

There were people in Western Upper Eyre & West Coast receiving the Age Pension, just over two thirds (67.7%) of the population aged 65 years and over and slightly below the level in Regional SA, of 69.6%.

The level of Disability Support Pension recipients in Western Upper Eyre & West Coast (5.1%) was markedly below the level in Regional SA (8.6%).

There were 1,426 Pensioner Concession Card holders in Western Upper Eyre & West Coast, comprising 22.4% of the population, markedly (26%) below the level in Regional SA overall (30.3%). The highest proportion was found in Elliston (23.7%) and the lowest was in Wudinna (20.0%, some two thirds of the level in Regional SA overall).

There were fewer Health Care Card holders in Western Upper Eyre & West Coast (8.1%) when compared with Regional SA (9.0%). At the LGA and PHA level, the highest proportion was in Ceduna; both were above the level in Regional SA overall.

There were 64 dwellings in Western Upper Eyre & West Coast that were assessed as requiring extra bedrooms, notably more than in Regional SA overall (2.2% and 1.9%, respectively). There was some variation between the LGAs with the highest proportion found in Wudinna (2.7%, approaching one and a half times the level in Regional SA), and the lowest in Elliston (1.7%, which was notably below the level in Regional SA overall). The PHA of Ceduna/ West Coast/ Western (3.6%) had a substantially higher proportion than in Regional SA overall.

There were low-income households in Western Upper Eyre & West Coast that experienced mortgage stress; at 8.8% of these households this was just below the level in Regional SA (9.4%).

Although more low-income households in Western Upper Eyre & West Coast were experiencing rental stress than were experiencing mortgage stress, they represented a substantially (51%) lower proportion than in Regional SA (13.2% and 26.7%, respectively). There was wide variation between the LGAs; the highest proportion was found in Streaky Bay (18.9%) followed by Elliston (12.7%), and Ceduna (12.3%) with a similar proportion in the PHA of Ceduna/ West Coast/ Western (11.8%). The lowest proportion was in Wudinna (9.6%) being almost two thirds of the level in Regional SA overall.

The proportion of households rented from Housing SA, a housing co-operative, community or church group (8.1%) in Western Upper Eyre & West Coast was over a third (35%) above the level in Regional SA overall (6.1%). There was substantial variation between the LGAs; Ceduna (13.9%) had the highest proportion, with over twice the level in Regional SA, with a similarly high proportion in the PHA of Ceduna/ West Coast/ Western (11.8%). Lower proportions were found in Streaky Bay (4.5%) and Wudinna (4.0%), with the lowest in Elliston (2.4%, and substantially (60%) below the level in Regional SA overall). There is a notion for the consideration of the effect on housing affordability with a shift from SA Housing to private providers.

Just over a tenth (10.9%) of all households in Western Upper Eyre & West Coast were in receipt of rent relief from Centrelink, markedly (30%) below the level in Regional SA overall (15.6%). Of

the LGAs, Ceduna had the highest proportion (13.5%) and Wudinna the lowest (6.9%, and substantially below the level in Regional SA overall).

There were 144 households in Western Upper Eyre & West Coast that did not have access to a motor vehicle at the time of the Census in 2016, representing 4.9% of all households, 14% fewer than in Regional SA overall (5.7%). Ceduna (7.4%), and the PHA of Ceduna/ West Coast/ Western (6.5%) had the highest proportions, both being above the level in Regional SA. Lower proportions were found in Wudinna (3.8%), and Elliston (3.4%), with the lowest in Streaky Bay (2.6%, and substantially below the level in Regional SA overall).

Community Connectedness

Nearly three quarters (73.7%) of households in Western Upper Eyre & West Coast reported that someone had accessed the Internet at the time of the Census, generally consistent with the level in Regional SA overall (75.0%); there were similar rates of access reported for households in the LGAs and in the PHA of Ceduna/ West Coast/ Western.

Environmental Determinants

2015 RPH Plan, Councils and other agencies planning in respect to:

- Built environment, Housing and Transport
Population centres on the Eyre Peninsula are largely located around the coast with inland settlements supporting local agricultural, aquaculture, fishing and mineral processing activities. The urban centres present the hub of community life in the region, centred around schools, services and sporting groups.

Council`s strategic plans encompass goals for improved town entrances, streetscapes and public spaces, as well as preservation of local built heritage.

Built infrastructure projects underway in the region:

CEDUNA

Ceduna CBD upgrade

Port of Thevenard upgrade

Thevenard Marine Offloading facility

ELLISTON

Coast Trail Development

STREAKY BAY

Streaky Bay Foreshore Tourist Caravan Park Upgrade

Moores Boat Ramp Upgrade

Baird Bay Coastal Adaptation Works

Town Master Plan Review and Update

WUDINNA

Wudinna Streetscape Development

Housing stress (% of private renter households paying more than 25% of their weekly gross household income on housing) is 19% in Ceduna, 15.5% in Elliston, 33.3% in Streaky Bay and 8.8% in Wudinna. There is a need to plan for affordable and suitable housing for the ageing population in the region.

The Eyre Peninsula experiences a high degree of isolation in relation to local and interstate public transport options. Mid-west Community Health Services and the Australian Red Cross provide a community passenger transport network for people in the Mid-west region who have no access to other means of transport for medical appointments. A bus service operates between Ceduna and Adelaide stopping in Streaky Bay and Wudinna. Regular passenger transport services are available from Ceduna and Port Lincoln Airports to Adelaide.

➤ **Natural Environment**

The Eyre Peninsula is rich in environmental assets. Its unique mix of urban and rural environments includes desert, Mallee and Red Gum woodlands, grassy She Oak communities, productive agriculture and grazing lands, as well as a long and relatively undisturbed coastline with important adjacent marine habitats and productive fisheries.

Significant areas of native vegetation incorporate important Mallee habitat, several woodland communities and a high number of endemic species. The region features fresh and saline wetlands, mangroves and estuaries.

Groundwater plays a vital role in the region with only limited surface water resources. The major groundwater basins are within the Southern Basins Prescribed Wells areas (PWA) and the Musgrave PWA. Other localised groundwater lenses (fresh layers) supply limited volumes of water of varying quality.

The soils in the region generally have poor nutritional qualities due to their high degree of weathering or their sandy or calcareous nature. Despite their relative infertility, the soils of Eyre Peninsula, combined with improvements in farm management systems, provide significant economic returns through dryland cereal cropping and grazing. Our area is prone for draught periods and could become even more prominent considering year on year below average rainfall recordings.

The marine and coastal waters of the Eyre Peninsula are vital natural resources supporting the production and sustainability of our aquaculture, fishing and tourism industries in the region. Natural resources management and conservation is a key element in ensuring a sustainable livelihood for the region.

Bushfires are one of the many factors impacting on the natural environment and are essential for the survival of some native plant and animal species. The challenge facing land managers is determining and implementing fire management that is appropriate for conserving biodiversity whilst also protecting life and property.

➤ Climate Change

The Eyre Peninsula has a mild climate with the average temperatures being a few degrees above Adelaide's temperature in both Summer and Winter.

There has been extensive research into the impacts of climate change on the Eyre Peninsula region and planning to address and adapt to these impacts. It should be noted however that the region already experiences the effects of significant local climate variations, particularly drought and heatwaves and adapts to the impacts.

However, Eyre Peninsula communities can expect to experience longer periods of much higher temperatures, increasing variability in rainfall patterns and rising sea levels. Changes to ocean currents, falling pH and higher storm surges are also likely.

It can be expected that the frequency and intensity of heatwaves will increase in the future. In contrast, the number of days experiencing frost should generally decline.

Climate change research for the region highlights various impacts of relevance to the community health and well-being in the region, including:

- impacts to natural resources including reduced local water availability, native habitat fragmentation and isolation.
- the potential impacts to the productivity and sustainability of the agriculture, fishing and aquaculture industries.
- the physical and mental health impact of drought conditions on the farming community.
- wellbeing, physical and mental health issues are likely to amplify as a result of increased external pressure of climate change on indigenous peoples, infrastructure and access to resources; and
- Indigenous community members are concerned about the changes they are already seeing in the local environment and weather patterns, how these changes are affecting the local plants and animals and the potential impacts on the health and well-being of their communities, cultural practises and economic viability.

Adaption planning for climate change in the Eyre Peninsula region focuses on eight issues and areas of decision making:

- Agriculture;
- Conservation Management;
- Fisheries;
- Maintenance of road infrastructure;
- Management of coastal development;
- Peri-urban expansion;
- Port and Wharf facilities; and
- Water Resource Management

➤ Water Security

The region's future economic and environmental sustainability will rely on water security. The Eyre Peninsula demand and supply statement identifies that the demand for potable water is expected to exceed supply in 2020-21 and the demand for non-potable water is secure to about 2050. There is an over-reliance on water drawn from the River Murray to supply towns as far away as Ceduna. Declining rainfall and reduction in annual groundwater recharge is also a likely impact from climate change in the region.

Water resource monitoring, planning and management is being pursued by the Eyre Peninsula Water Taskforce. Consideration to be given to align strategies in support of investigations to assess the technical viability and economic feasibility of augmenting the Eyre Peninsula's water supplies.

➤ Waste Management

The Ceduna, Elliston, Streaky Bay and Wudinna District Councils provide kerbside waste collection services in townships and manage landfills and transfer stations throughout the region. Recycling of materials are offered at resource recovery centres. Kerbside recycling services are provided in the townships of Elliston and Wudinna Council. The District Council of Ceduna encourages recycling through public place recycling bins, the resource recovery centre and private operators. The District Council of Streaky Bay offer recycling options through their transfer station and the Council owned CDL facility. All council areas participate in DrumMuster, a national program for the collection and recycling of cleaned farm chemical containers.

Councils also manage waste oil recovery and public place waste management infrastructure, including facilities for waste at recreational jetties and boat ramps. Caravan waste dump points are provided in some townships for travellers.

➤ Environmental Health

Across the region, environmental health surveillance is undertaken to monitor compliance with the Act and the *Food Act 2001*. Environmental Health surveillance and compliance activities relate to specific activities presenting public health hazards, wastewater works approvals, food premise assessments and auditing of food premises serving vulnerable populations (e.g. Aged care centres). A regional environmental health service arrangement is in place for the Wudinna, Streaky Bay, Elliston and Ceduna Councils.

➤ Environmental Health and Indigenous Communities

Indigenous communities within the region and adjacent outback areas have concerns about the Commonwealth Government's decision to withdraw Municipal and Essential Services funding from communities.

Inadequate funding would adversely impact on the provision of municipal services to homelands, which may result in public health risks such as poor sanitation and inadequate waste management.

8.1. Stakeholder Priorities for Socio-economic and Environmental Determinants of Health

*(Reference all four Councils Strategic Plans as well as other agencies
DAWEP/NRM/SAROC/EPLGA/PIRSA)*

<ul style="list-style-type: none"> • <i>Promoting liveable urban environments</i> There is a need to promote the liveability of the region to retain families, young people and skilled workforce. This is particularly relevant for planning for workforce requirements associated with economic development in the region (mining, tourism). Access to suitable housing and services will be fundamental to supporting the local population.
<ul style="list-style-type: none"> • <i>Creative job creation and economic growth</i> There is a need for creative job creation and economic growth to support employment across age groups. Current business, government services and tourism need to be sustained. Initiatives to support accessible education in the region and life-long learning initiatives need to continue.
<ul style="list-style-type: none"> • <i>Childcare services</i> Difficulty in accessing childcare services was noted as an employer barrier in the region. Advocating for policies, which support childcare accessibility was highlighted.
<ul style="list-style-type: none"> • <i>Supporting youth</i> Mentoring and support for younger people was highlighted before. Young people to be supported through access to activities, education and employment. Education and support are needed to address health risk behaviours amongst youth and to assist in their “transition to work”.
<ul style="list-style-type: none"> • <i>Community leadership and volunteering</i> Volunteers play a key role providing community support programs and services in the region. Barriers to volunteering such as time taken and cost of volunteer checks, access to volunteer training and support were highlighted before.
<ul style="list-style-type: none"> • <i>Culture and events</i> Need was identified to foster social engagement across a range of groups. Cultural events strengthen cultural bonds, keep youth engaged and provide positive outlet for community members. Emphasis on promoting an inclusive community of both Indigenous and non-Indigenous people.
<ul style="list-style-type: none"> • <i>Transport and accessibility to services</i> Previously coordinated community and public transport services was highlighted addressing the transport needs of students, older people, people with disability and those who do not have access to a vehicle.
<ul style="list-style-type: none"> • <i>Service collaboration</i> There was recognition of the opportunity to partner together to broaden services and reduce duplication between community groups and organisations. Opportunities to share information, undertake joint planning and develop corporate funding bids were highlighted.
<ul style="list-style-type: none"> • <i>Adequately resourcing environmental health</i> Need for continued environmental health resourcing.
<ul style="list-style-type: none"> • <i>Emergency management</i> Need for coordinated emergency management planning involving councils, emergency management organisations and indigenous communities is a community safety priority.

9. Strategic Plan for Public Health

This section outlines strategic directions within council’s sphere of influence for promoting public health and well-being within our communities in the region. The identified priorities are aligned with strategic priorities outlined in the State Public health Plan (2019-2024).

A Commitment Implementation Guide has been used to reference council’s role against each priority to:

- Build stronger communities and healthier environments
- Protect against public health and environmental health risks and respond to climate change
- Prevent chronic disease, communicable disease and injury
- Strengthen the systems that support public health and well-beings

<p>A. <i>Strengthening existing Council functions</i></p>	<p>This priority may be addressed through current resourced functions of the councils in the region. There is opportunity for further public health awareness and consideration of public health impacts through Council decision-making. It is recommended that the Public Health Plan Implementation Team promotes public health awareness and monitors progress against these priorities in consultation with the relevant staff, management and Elected Members.</p>
<p>B. <i>Support, partner or advocate for our community</i></p>	<p>Council does not have a lead role, yet can support, partner with or advocate for actions by relevant stakeholders. The plan acknowledges the contribution of various stakeholders for supporting public health in the region.</p>
<p>C. <i>New program for consideration subject to resourcing</i></p>	<p>This is a new initiative/project, which will require Council or stakeholder resourcing. It is recommended that the Implementation Team seek to identify opportunities for Council funding (internal/external)</p>

Strategy	Priorities	Council	Stakeholders	Status Category
Build stronger communities and healthier environments				
Urban planning and health	Incorporate opportunities for promoting healthy, safe and active communities through infrastructure projects and sustainable development (town upgrades, foreshore developments, community land management plans, Development Plan amendments)	All	DPTI Government funding partners EPLGA SA Health	A. Strengthen existing Council functions
	Support training on health planning and development assessment for council planners.	All	DPTI SA Health EPLGA	A. Strengthen existing Council functions
	Consider the needs of an ageing population in development planning (engagement opportunities, infrastructure, services and suitable housing).	All	Country Health SA SA Health	A. Strengthen existing Council functions
	Advocate for opportunities to alleviate the impacts of remoteness and socio-economic disadvantages in planning and decision-making.	All	Telstra RDAWEP EPLGA	B. Support, partner or advocate for our community
Road Safety	Maintain rural roads through a prioritised infrastructure maintenance system.	All	DPTI	A. Strengthen existing Council functions
	Advocate for adequate rural local roads funding and for the sealing of priority roads in the region.	All	Wudinna DC and DC Elliston partnership Wudinna DC and DC Elliston partnership DPTI EPLGA	B. Support, partner or advocate for our community
	Maintain and extend the pedestrian walkway between Ceduna and the Town Camp/18 Tank.	DC Ceduna	Funding partners DC Ceduna	C. New program for consideration subject to resourcing
Volunteering	Promote volunteering, civic engagement and leadership opportunities within the region for various groups: youth, baby boomer age group.	All	Community groups	A. Strengthen existing Council functions
	Recognise volunteer groups through awards and local council grants.	All	Community groups	A. Strengthen existing Council functions
	Advocate for streamlined approval processes and accessible mandatory training for community volunteers.	All	Community groups	B. Support, partner or advocate for our community
Culture	Participate in the RDAWEP cultural audit.	All	RDAWEP	B. Support, partner or advocate for our community
	Continue support for an Arts and Cultural Development Officer in the Far West Region through the Creative Community Partnership Program	DC Streaky Bay	Country Arts SA	B. Support, partner or advocate for our community
Housing	Advocate for suitable systems and management strategies for the supply and maintenance of adequate and appropriate housing and associated	All	Housing SA DPTI	B. Support, partner or advocate for our community

Strategy	Priorities	Council	Stakeholders	Status Category
	infrastructure in regional Aboriginal communities			
	Consider housing supply, affordability and diversity within Council Development Planning.	All	Housing SA DPTI	A. Strengthen existing Council functions
	Enforce safe healthy housing conditions, in collaboration with relevant agencies in accordance with the: Development Act 1993, SA Public Health Act 2011, Housing Improvement Act 1940, Local Government Act 1999, Fire and Emergency Services Act 2005.	All	Housing SA	A. Strengthen existing Council functions
Economy	Maintain Council Strategic Plan commitments to the following economic development priorities for the region: Expanding tourism Residential development associated with projected population. Local Entrepreneurism.	All	EPLGA RDAWEP DPTI Tourism SA	A. Strengthen existing Council functions
	Maintain support for educational and research facilities, including: The Minnipa Agriculture Centre Lincoln Marine Science Centre The University of SA TAFE SA Regional	All	TAFE RDAWEP DECS	B. Support, partner or advocate for our community
	Advocate for the roll out of NBN/improved digital infrastructure in the region.	All	RDAWEP	B. Support, partner or advocate for our community
Transport	Undertake a community transport review amongst relevant stakeholders: Health, Councils, other agencies, to review utilisation, volunteerism and to promote an integrated transport service approach.	All	RDAWEP	C. New program for consideration
	Advocate for accessible transport services and funding for the region	All	EPLGA RDAWEP	B. Support, partner or advocate for our community
	Advocate for sustainable transport services between and Ceduna and outlying communities.	DC Ceduna	RDAWEP	B. Support, partner or advocate for our community
Protect against public and environmental health risks and respond to climate change				
Maintain health promotion services	Liaise with Country Health SA, THE Country North Medicare Local and RDAWEP Community Services Target Team to advocate for the maintenance of health promotion and support services.	All	SA Health Country Health SA	B. Support, partner or advocate for our community
	Maintain a pro-active role in attracting priority health professionals to the region through liveable environments and subsidised housing	All	SA Health Country Health SA	A. Strengthen existing Council functions
	Liaise with SA Health and the LGA to implement annual environmental health monitoring and reporting	All	SA Health LGA	A. Strengthen existing Council functions
Water Security	41. Maintain the following regional water security initiatives: Community wastewater management schemes and effluent re-use.	All	SA Water NRM RDAWEP	A. Strengthen existing Council functions
	42. Provide safe and suitable water to the Koonibba community through the Ceduna, Koonibba Water Scheme	DC Ceduna		A. Strengthen existing Council functions

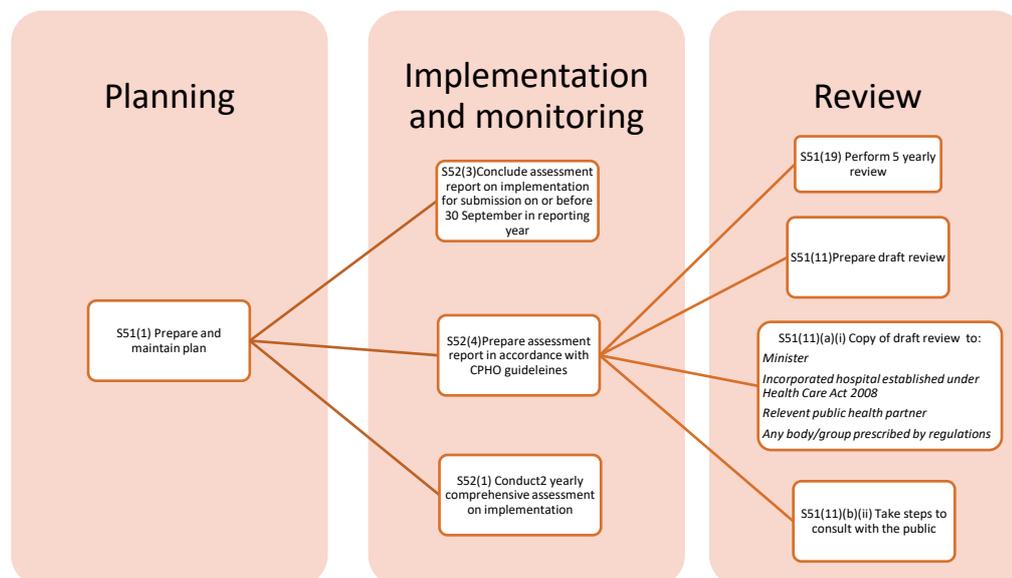
Strategy	Priorities	Council	Stakeholders	Status Category
Waste Management	Support waste reduction, recycling and responsible waste management through: Kerbside services, landfill and transfer station management, recycling services, township / public bin services.	All	EPA LGA	A. Strengthen existing Council functions
Climate Conditions and Emergency Management	Participate as required in the implementation of the Eyre Peninsula Climate Change Management Plan key recommendations for local government.	All	SES CFS	A. Strengthen existing Council functions
	Advise on public health and safety risks to be considered in regional Zone Emergency Management Planning.	All	SES CFS	A. Strengthen existing Council functions
	Advocate for cross-agency planning for suitable places of refuge for emergency conditions in the region.	All	SES CFS	C. New program for consideration subject to resourcing
Prevent chronic disease, communicable disease and injury				
Physical activity and healthy eating	Provide pedestrian and cycle infrastructure in townships.	All	DPTI	A. Strengthen existing Council functions
	Maintain extend the pedestrian walkway between Ceduna and the Town Camp/18 Tank	DC Ceduna		A. Strengthen existing Council functions
	Support community group initiatives which promote healthy lifestyles through: Information/ promotion of community programs Provision of facilities/venues Community grants programs Community Awards	All	Community groups Men shed Mentally Fit EP	A. Strengthen existing Council functions
	Advocate for increased funding to maintain community sports infrastructure and consider the rationalisation of sports infrastructure where necessary.	All	RDAWEP EPLGA DPTI	B. Support, partner or advocate for our community
	Support nutritional education and access to fresh food through community garden projects	All	Community groups	B. Support, partner or advocate for our community
Smoking and Alcohol and Substance Misuse	Implement a range of measures to promote Ceduna as a dry community and enforce dry zone declarations	DC Ceduna	SAPOL	A. Strengthen existing Council functions
	Encourage the adoption of initiatives to discourage smoking and alcohol consumption at junior/ family sport events.	All	SA Health	B. Support, partner or advocate for our community
	Promote alcohol-free and smoke-free community events.	All	SAPOL	B. Support, partner or advocate for our community
	Support regional collaboration to address alcohol and substance misuse through initiatives to support: demand reduction, supply reduction, harm education and leadership and service coordination.	All	SAPOL	B. Support, partner or advocate for our community
Infectious/Communicable disease control	Promote available immunisation services in the region.	All	SA Health	B. Support, partner or advocate for our community
	Promote available immunisation education and service promotion for the Aboriginal Community in Ceduna	DC Ceduna	SA Health	B. Support, partner or advocate for our community

Strategy	Priorities	Council	Stakeholders	Status Category
Strengthen the systems that support public health and well-being				
Targeted Social and Health Support	Support facilities for men's sheds where required.	All	Community groups	B. Support, partner or advocate for our community
	Promote life skills development and mentoring for youth in the region.	All	EPLGA RDAWEP DECS Mentally Fit EP	B. Support, partner or advocate for our community
	Promote available services for family and parenting support, including consideration of FIFO workers and their families.	DC Ceduna	Ceduna Healthcare Centre	B. Support, partner or advocate for our community
	Promote culturally appropriate health and social support services for Aboriginal people in the region.	DC Ceduna	DCIS SA Health	B. Support, partner or advocate for our community
	Maintain a regional shared services approach for environmental health	All	LGA	A. Strengthen existing Council functions
	Liaise with SA Health and the LGA to implement annual environmental health reporting	All	LGA SA Health	A. Strengthen existing Council functions

10. Governance and Implementation

Detail and outline implementation, monitoring and reporting pursuant to the SA Public Health Act 2011 protocols.

The four regional District Councils have maintained a partnership to oversee the implementation and maintenance of the plan with representatives for each of the councils. Each representative has a direct reporting line to their respective chief executive officers of their councils. The South Australian Public Health Act 2011 provides the legal framework for the development of the Regional Public Health Plan, its implementation, 2 yearly assessment reporting and a 5-yearly review.



11. References

State Public Health Plan 2019-2024
Regional Public Health Plan (District Council of Ceduna, District Council of Elliston, District Council of Streaky Bay and Wudinna District Council - March 2015)
Southern Eyre Peninsula (Regional Public Health Plan 2015 – 2020)
Population Health Profile (Western Upper Eyre and West Coast comprising of Ceduna (DC), Elliston (DC), Streaky Bay (DC) and Wudinna (DC) – Prepared by PHIDU September 2019
South Australian Public Health Act 2011
District Council of Ceduna - Annual Report 2018/19
District Council of Elliston – Annual Report 2018/19
District Council of Streaky Bay – Annual Report 2018/19
Wudinna District Council – Annual Report 2018/19
District Council of Ceduna – Annual Business Plan 2019/20
District Council of Elliston – Strategic Plan 2016/17-2020/21
District Council of Streaky Bay – Strategic Management Plan 2016-2026
Wudinna District Council - Annual Business Plan and Budget 2019/20
District Council of Elliston - Annual Business Plan and Budget 2019/20
Wudinna District Council – Corporate Plan 2018-2022
Wudinna District Council – Community Plan 2018-2023
District Council of Streaky Bay – Annual Business Plan 2019/20
RDAWEP Annual Report 2018/19
RDSA Regional Infrastructure Projects Prioritisation Report 2018
RDAWEP Regional Plan 2014 – 2018
EPLGA Annual Business Plan 2018/19
EPLGA Corporate Plan 2016/19
EPLGA Transport Plan - 2015 Regional Transport Strategy
NRM EP – Strategic Plan 2017-2027
SAROC Strategy Plan 2019 – 2023
SAROC Annual Business Plan 2019/20

12. Abbreviations and acronyms

LGA – Local Government Association
LGAs – Local Government Areas
DPTI – Department of Planning, Transport and Infrastructure
EPLGA – Eyre Peninsula Local Government Association
EPA – Environment Protection Authority
NRM EP – Natural Resource Management Eyre Peninsula
SA Health – Government of South Australia (Department of Health)
ABS – Australian Bureau of Statistics
PHIDU – Public Health Information Development Unit (Torrens University)
RPHP – Regional Public Health Plan
PHA – Population Health Area

DC - District Council

SA - South Australia

AEDC - Australian Early Development Census

GDP - Gross Domestic Product

PWA – Prescribed Wells Areas

RDWEP – Regional Development Australia Whyalla & Eyre Peninsula

SAROC – South Australia Regional Organisation of Councils

PIRSA – Primary Industries and Regions South Australia