



Public Health Plan

2022–2026





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1. Executive Summary

The Town of Bassendean Public Health Plan (PHP) is a four-year strategic document which provides a framework for improving the health and wellbeing of the community. The purpose of the PHP is to promote, protect and improve the health and wellbeing of all residents in the Town of Bassendean (Town) and to support the community to enable good health and wellbeing through various stages of life and across a range of identified health issues.

> The development of this PHP included the collation and examination of local health data, and the identification of the public health and wellbeing needs of the community. It involved consultation across service areas of the Town, the community and other key external stakeholders.

Through this process, health risk areas in the community were identified which have been grouped into five key priority areas, and include:

- Active and Healthy Lifestyles;
- Social Wellbeing and Community Connections;
- Health Promotion and Advocacy;
- Built and Physical Environment; and
- Regulation and Protection.

Strategies and actions for each of the five priority areas have been determined and are included in the Action Plan within the PHP. The Town will evaluate its work in relation to the identified priority areas and expected outcomes. The PHP will be reviewed annually in accordance with the *Public Health Act 2016* (the Act). The annual review and report will be prepared and submitted by the Town to the Chief Health Officer when required by the Department of Health WA (DoH).

This PHP meets the Town's obligations for the development of a local PHP under section 45 of the Act, which is to:

- Identify the public health needs of the local government district;
- Include an examination of data relating to health status and health determinants in the local government district;
- Establish objectives and policy priorities for the promotion, improvement, and protection of public health in the local government district;
- Describe the development and delivery of public health services in the local government district;
- Include a strategic framework for the identification, evaluation, and management of public health needs in the community; and
- Include a reporting mechanism to evaluate the implementation of the PHP.

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2. Introduction

Public Health Plans identify actions to prevent or minimise public health risks and enable people living in the community to achieve maximum health and wellbeing.

The Town recognises that good health and wellbeing is essential to creating a healthy and vibrant community, acknowledging its role in the promotion of community health and wellbeing as a part of core business.

This is achieved through the development of social and physical infrastructure, urban planning, health protection initiatives and community programs.

> The vision for the Town's Public Health Plan is for a "healthy, liveable and socially connected community for all residents". This vision recognises the Town's desire to continue to create environments that encourage and support community participation and assist with making healthy lifestyles choices.

The Public Health Act 2016 defines public health as:

- (i) The wider health and wellbeing of the community; and
- (ii) The combination of safeguards, policies and programs designed to protect, maintain, promote and improve the health of individuals and their communities and to prevent and reduce the incidence of illness and disability.



Source: State Public Health Plan for Western Australia, Department of Health WA, 2019.



The aim of the Town's PHP is to create a physical, social, economic and cultural environment that supports and promotes health and wellbeing for all members of the community in line with the 'social determinants of health' approach.

The 'social determinants of health' are described as the non-medical factors that affect a person's health, functioning, and quality of life outcomes. They are the conditions in which people are born, live, learn, work, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies, social policies, political systems and social norms. The aim of the Town's PHP is to create a physical, social, economic and cultural environment that supports and promotes health and wellbeing for all members of the community.

The PHP is informed by important local health and social data collated by the East Metropolitan Health Service, through the *Town of Bassendean Community Health Profile 2019*, which incorporates data from a variety of databases including the WA Health and Wellbeing Surveillance System (HWSS); Australian Bureau of Statistics (ABS), and Registry of Births, Deaths and Marriages. It examines population data relating to lifestyle and biomedical risk factors, social and economic determinants of health and, gives an overall picture of the health of the population of the district. In addition, it looks at current health conditions, deaths, immunisation and early childhood development.

The Town's Community Health Profile is critical to the development of the PHP along with consultation, which has helped to inform the framework of the PHP, comprising objectives, strategies and actions for the next four years. In addition, consideration of the *State Public Health Plan for Western Australia: Objectives and Policy Priorities for 2019–2024*, and the Town's Community Strategic Plan 2020–2030 have also informed the development of this PHP.



2.1 Objectives

The objectives of the PHP are as follows:

- Create opportunities that encourage people to be active and healthy.
- Support priority populations to achieve better social and health outcomes.
- Support the community to make the best choices to live healthy, be healthy and active.
- Promote mental health and wellbeing through collaborative partnerships.
- Provide and support a range of quality facilities and services that have a positive impact on health and wellbeing.
- Support the creation of environments that encourage healthy living.
- Support strategies to promote a safer community.
- Protect, promote and enhance environmental factors which impact on community public health.

2.2 The Role of the Town of Bassendean in Public Health and Wellbeing

The DoH is the primary body for the development and management of policy areas of health service delivery in Western Australia. The Town has a key role in advocating and facilitating partnerships to deliver and support key actions to promote health and wellbeing and minimise disease and health risk burden.

The responsibility for the delivery of community health and wellbeing outcomes does not solely rest with the Town but is reliant on partnerships with other government agencies, service providers, local organisations, non-government agencies and the community.

A whole of community approach to health and wellbeing is required to ensure these partnerships work towards the same objectives. Whilst factors affecting health are beyond the role of local government, the Town considers it can contribute towards the health and wellbeing of the local community in a number of ways, including:

- Environmental health services to prevent and control environmental health hazards, emissions, and communicable diseases (i.e. water and food safety, noise, asbestos, mosquito control);
- Monitoring the health and quality of water in the Swan River and in urban waterways;
- Providing public open space and shaded communities;
- The provision of local roads, footpaths, drainage, waste collection;
- Planning and development approvals;
- Building services, including inspections, licensing, certification and enforcement;
- Ranger and emergency services including animal control and fire management;
- Providing and promoting opportunities for social connection through events, volunteering and recreational participation; and
- Disaster planning, response recovery and pandemic planning.

Public Health Plan | 2022–2026

Flooding at The Point Reserve in 2017.

3. Strategic and Legislative Alignment

3.1 Public Health Act 2016

The key features of the Act include:

- Promoting and improving public health and wellbeing to prevent disease, injury, disability and premature death;
- Protect individuals from diseases and other public health risks and to provide a healthy environment for all Western Australians;
- Inform individuals and communities about public health risks;
- Encourage individuals and their communities to plan for, create and maintain a healthy environment;
- Support programs and campaigns intended to improve public health;
- Collect information about the incidence and prevalence of diseases and other public health risks for research purposes; and
- Reduce the health inequalities in public health of disadvantaged communities.

Part 5 of the Act has embedded the requirement for public health planning at both a State and Local Government level. Establishing the legal requirement for public health planning is an important step in elevating the importance of and commitment to public health across both tiers of government and creates the opportunity to establish stronger partnerships that aim to influence the determinants of health.

3.2 State Public Health Plan for Western Australia

The Town's PHP has been guided by the DoH State Public Health Plan for Western Australia: Objectives and Policy Priorities for 2019–2024 (State PHP).

The objectives of the State PHP are:

- Empowering and enabling people to live healthy lives;
- 2. Providing health protection for the community; and
- 3. Improving Aboriginal health and wellbeing.



Objective 1: Empowering and enabling people to live healthy lives

Policy Priorities	Priority Activities
1.1 Healthy eating	 Foster environments that promote and support healthy eating patterns.
	 Increase availability and accessibility of quality, affordable, nutritious food.
	 Increase the knowledge and skills necessary to choose a healthy diet.
1.2 A more active WA	 Promote environments that support physical activity and reduced sedentary behaviour.
	Reduce barriers and increase opportunities for physical activity across all populations.
	Increase understanding of the benefits of physical activity and encourage increased activity at all stages of life.
	4. Motivate lifestyle changes to reduce sedentary behaviour.
1.3 Curbing the rise in overweight and obesity	 Promote environments that support people to achieve and maintain a healthy weight.
	2. Prevent and reverse childhood overweight and obesity.
	3. Motivate behaviour to achieve and maintain a healthy weight among adults.
1.4 Making smoking history	1. Continue efforts to lower smoking rates.
	Eliminate exposure to second hand smoke in places where the health of others can be affected.
	3. Reduce smoking in groups with higher smoking rates.
	4. Improve regulation of contents, product disclosure and supply.
	5. Monitor emerging products and trends.
1.5 Reducing harmful	1. Change community attitudes towards alcohol use.
alcohol use	2. Influence the supply of alcohol in accordance with the <i>Liquor Control Act 1998</i> .
	3. Reduce demand for alcohol.
	 Promote environments that support people not to drink or to drink at low-risk levels.

		<u> </u>
Poli	icy Priorities	Priority Activities
1.6	Reduce use of illicit drugs, misuse of pharmaceuticals and other drugs of concern	 Increase help-seeking behaviour and reduce stigma around illicit drugs and emerging drugs of concern. Support State-wide evidence-based strategies to prevent and reduce illicit drug use and related harms. Increase awareness of the harms associated with illicit drug use, while not being stigmatising. Continue to mobilise communities and other stakeholders to work in partnership on evidence-based prevention activities addressing drug use and related harm. Develop personal skills, targeted public awareness and engagement regarding misuse of pharmaceuticals and other drugs of concern.
1.7	Optimise mental health and wellbeing	 Increase public awareness about mental health and wellbeing, and suicide prevention. Build community capacity to reduce stigma, increase awareness of where to go for help, and promote strategies to optimise mental health and wellbeing. Create and maintain supportive environments that increase social connectedness and inclusion, community participation and network.
1.8	Preventing injuries and promoting safer communities	 Protect children from injury. Prevent falls in older people. Reduce road crashes and road trauma. Improve safety in, on and around water. Reduce interpersonal violence. Develop the injury prevention and safe communities sector. Monitor emerging issues in injury prevention. Promote sun protection in the community. Prevent and reduce alcohol intoxication.

Increase understanding of the benefits of physical activity and encourage increased activity at all stages of life...

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Objective 2: Providing health protection for the community

Poli		
	cy Priorities	Priority Activities
2.1	Reduce exposure to environmental health risks	 Maintain safe food and water. Maintain healthy built environments. Manage environmental hazards to protect community health. Improve the environmental health conditions in remote Aboriginal communities.
2.2	Administer public health legislation	 Continue to administer, enhance and provide policy support for public health legislative instruments, including: (a) Public Health Act 2016 (b) Health (Miscellaneous Provisions) Act 1911 and subsidiary legislation (c) Food Act 2008 (d) Medicines and Poisons Act 2014 (e) Tobacco Products Control Act 2006 (f) Liquor Control Act 1988.
2.3	Mitigate the impacts of public health emergencies	 Ensure public health emergencies are included in emergency and disaster planning. Maintain continuous improvement in the response to public health emergencies. Strengthen the preparedness and resilience of communities against extreme weather events, with a focus on the most vulnerable in the community. Establish a climate change adaptation plan to protect public health from the harmful health impacts of climate change.
2.4	Support immunisation	 Continue efforts to increase vaccination coverage for young children, adolescents, and adults. Improve immunisation education and consent processes. Sustain mechanisms for the surveillance and follow-up of suspected adverse events following immunisation.
2.5	Prevention and control of communicable diseases	 Coordinate State-wide surveillance of notifiable communicable diseases. Conduct and coordinate outbreak investigations of communicable diseases. Continue to support and enhance disease control prevention and education programs delivered by stakeholders, including access to hardware and equipment to prevent communicable diseases. Eliminate stigma and discrimination around sexually transmitted infections and blood-borne viruses. Maintain and improve partnerships with stakeholders engaged in communicable disease control activities.
2.6	Promote oral health improvement	1. Support activities that promote oral health.

Objective 3: Improving Aboriginal health and wellbeing

Policy Priorities	Priority Activities
3.1 Promote culturally secure initiatives and services	 Complement population-wide approaches with targeted programs that are culturally secure and meet the needs of Aboriginal people. Ensure services, programs, and initiatives work within a holistic framework that recognises the importance of connection to country, culture, spirituality, family, and community.
3.2 Enhance partnership with the Aboriginal community	 Ensure ongoing collaboration with the Aboriginal community to create a two-way transfer of skills and ensure that Aboriginal people's cultural rights, beliefs and values are respected in the development of health and wellbeing responses. Ensure a coordinated and collaborative approach to service delivery through knowledge exchange, information sharing and the pooling of resources, where possible.
3.3 Continue to develop and promote Aboriginal controlled services	 Work closely and collaboratively with Aboriginal controlled organisations in the development and delivery of culturally secure responses. Ensure ongoing participation by Aboriginal controlled organisations in decision-making to take back care, control and responsibility of their health and wellbeing.
3.4 Ensure programs and services are accessible and equitable	 Ensure programs and services are physically and culturally accessible to Aboriginal people. Develop programs and services that are inclusive of the needs of Aboriginal people. Incorporate Aboriginal ways of working that facilitate the engagement of Aboriginal people.
3.5 Promote Aboriginal health and wellbeing as core business for all stakeholders	 Ensure all relevant stakeholders consider and respond to the needs of Aboriginal people as part of their core business and not only through specific funded programs. Ensure services work together to acknowledge and address the impact of the cultural and social determinants of health. Enhance the capacity of the Aboriginal workforce.
	The <i>State PHP</i> aims to guide State and Local Governments and other partners in public health, to work together and contribute towards influencing the health and wellbeing of all Western Australians. This plan coincides with an amendment

The *State PHP* aims to guide State and Local Governments and other partners in public health, to work together and contribute towards influencing the health and wellbeing of all Western Australians. This plan coincides with an amendment (Part 5) to the *Public Health Act 2016*, to make public health plans mandatory for every local government in WA. All local government PHPs must be consistent with the *State PHP* whilst responding to local public health risks.

3.3 Town of Bassendean Strategic Community Plan 2020–2030

The PHP aligns with the Town's vision of creating a welcoming and inclusive community and specifically, the following Priority Areas contained within the Town's *Strategic Community Plan 2020–2030*:

Priority Area 1: Strengthening and Connecting our Community

Direction	Potential Strategies	What Success Looks Like
Fostering a culture of collaboration and trust between the organisation and the community.	 Provide opportunity to listen and involve our community in decisions that affect them. 	 Greater community support fro decision-making.
Establishing partnerships with the community that build capacity, connection and sense of belonging	 Identify community members and organisations with the capacity to deliver projects and programs. Build capacity of community groups to deliver social return on investment. Identify and deliver community funding. Foster volunteering to provide services for our community and to build connections. Build capacity of volunteers to deliver programs and services with limited input from the Town. 	 Increased percentage of services delivered by community groups compared to the Town. Increased social return on investment using an agreed approach. Increased volunteer participation rates. Town staff hours result in greater return for time in volunteer management.
Treating people equitably with access to programs and services, regardless of advantage or ability	 Ensure access and inclusion to spaces and places throughout our Town for all, including community members with disabilities, youth, seniors, Indigenous people, and culturally and linguistically diverse people. Enable programs and services that cater for all, including community members with disabilities, youth, seniors, Indigenous people, and culturally and linguistically diverse people. 	 Alignment between services delivered and community needs. Diversity (in terms of demographic, ability, culture, background) of community members accessing spaces, places, programs and services is reflective of community structure.
Creating an environment where people feel welcome and safe	 Create public spaces and transport routes that encourage people to linger, interact and enjoy (including evening use). Encourage the adoption of a collective responsibility towards safety. 	 Increased use of public transport by different demographics. Increased active transport by different demographics. Reduced antisocial incidents.

Direction	Potential Strategies	What Success Looks Like
Supporting healthy lifestyles throughout our Town	 Improve functionality of amenities and lifestyle options. Improve walkability and cycle-ability, including through infrastructure improvements. 	 Increased use of public open spaces and other amenities. Improved health and wellbeing of residents.
Creating a resilient and adaptable community	 Support community organisations in crisis preparedness and recovery. 	 Community organisations with their own crisis preparedness strategies.
	 Prioritise local employment. Identify essential and non-essential services for clear prioritisation. 	 Increased proportion of local workers are local residents. Clarity on prioritisation of services.
Facilitating community connection	 Prioritise projects that bring people together and strengthen community connectedness. 	 Increased participation rates in volunteering, community activities and events.

Priority Area 2: Leading Environmental Sustainability

Direction	Potential Strategies	What Success Looks Like
Support the creation of a more green and shaded Town	 Create an urban forest throughout reserves, gardens and streets. Protect existing trees and green spaces. 	 Short Term Fewer trees lost during development. Long Term Increased proportion of tree cover.

• Reduced heat island effect.





Support the creation of a more green and shaded Town ...

Priority Area 5: Facilitating People-Centred Services

Direction	Potential Strategies	What Success Looks Like
Ensure community members know where and how to access services	 Improve communication regarding where community members can receive services, advice and provide feedback. Ensure transparent and open discussions with community members. 	 Short Term Clarity within the community and local government regarding who deals with different types of decision. Clarity and consistency around complaints procedure.

Priority Area 6: Providing Visionary Leadership and Making Great Decisions

Direction	Potential Strategies	What Success Looks Like
Make brave decisions in line with a risk appetite	 Early identification of potential risks/issues/opportunities. Embed opportunity cost considerations. 	 Short Term Efficient and effective Council meetings. Defensible decision-making that is based on the identification of opportunities and benefits as well as negative impacts. Long Term Examples of being first adopters.
Ensure major decision-making is informed by community feedback	 Ensure community engagement processes are implemented in major strategic projects. 	 Short Term Ensure community engagement processes are implemented in major strategic projects.
Ensure operational activities reflect the strategic focus of Council	 Ensure clear communication and flow of information from decision-makers to operational staff. Implement a framework on decision-making that identifies delegated authority for different levels of decision. 	 Short Term Openness and transparency of decision-making. Enhanced staff morale. Staff have appropriate strategic direction. Agreement on the link between projects and Strategic Community Plan. General alignment regarding values.
Respond effectively and efficiently to crises	 Implement crisis management framework. Communicate the impacts to business continuity. 	 Short Term Clarity of impacts to business continuity among elected members and staff prior to crisis situations. Clarity amongst the community of local government, organisation and community responses.



Priority Area 7: Building Community Ic	lentity by Celebrating Culture and Heritage
Thomey Area 7. Danang commany re	criticy by cerebrating culture and richtage

Direction	Potential Strategies	What Success Looks Like
Appreciate, celebrate and engage with Noongar Boodjar (land), history, culture and people	 Enhance partnerships with Noongar people—be guided by Traditional Owners in the appreciation, celebration and participation of Noongar Boodjar, history, culture and people. Enhance participation and engagement of local Noongar people in community life and decision-making. Enhance participation and engagement of local Noongar people in caring for the land. 	 Short and Long Term Noongar people being active participants during projects and direction, in collaboration with the Town of Bassendean. Increased understanding of Noongar Boodjar, history, culture and people among nonindigenous community.
Create a community closely connected to its history and heritage	 Maintain and share the historical stories of the Town of Bassendean. Ensure heritage locations and buildings of historical value within the Town are recognised, cared for and utilised by the community. Implement initiatives, events and activities that focus on a range of cultural and artistic endeavours (not limited to entertainment). 	 Short Term Local studies collection actively accessed by the community. Long Term Historical and heritage facilities are well used by the community. Heritage sites and buildings are visible to locals and visitors.
Engage the community in arts and culture	 Implement arts and cultural programs and activities that reflect the unique history of the Town of Bassendean and are relevant to its community. 	 Short and Long Term Community participation in arts and cultural programs and activities.

3.4 One Planet Living

This plan aligns with the One Planet Living framework, specifically aligning with the following principles:

Goal	Principle	Alignment
Health and happiness	Encouraging active, social, meaningful lives to promote good health and wellbeing.	Create and support opportunities and environments that encourage people to live active and healthy lives.
Equity and local economy	Creating safe, equitable places to live and work which support local prosperity and international fair trade.	Provide and support a range of quality facilities and services that have a positive impact on health and wellbeing.
Culture and Community	Nurturing local identity and heritage, empowering communities and promoting a culture of sustainable living.	Ensure a strong and connected community for all generations. Our community is socially engaged and able to participate in and contribute to community life.
Land and Nature	Protecting and restoring land for the benefit of people and wildlife.	Protect, promote and enhance environmental factors which impact on community public health.
Local and Sustainable Food	Promoting sustainable humane farming and healthy diets high in local seasonal organic food and vegetable protein.	There are increased opportunities for our community to access secure and healthy food options.
Travel and Transport	Reducing the need to travel, encouraging walking, cycling and low carbon transport.	Create and maximise opportunities that encourage safe, active and passive outdoor recreation.





4. Community and // // Stakeholder Consultation ____

4.1 Department of Health WA

This PHP was developed using epidemiological data sourced from the DoH East Metropolitan Health Service. This data has enabled the Town to identify public health issues within its community which are higher than the State average.

Ongoing collaboration with East Metropolitan Health Service will continue in order to share skills and knowledge on health topics, collaborate and join resources, improve communication and seek opportunities to cross promote health and wellbeing programs.

4.2 Preliminary Consultation

The Town is committed to community consultation, genuinely seeking to understand the community's aspirations and needs. In 2019, the Town collected feedback and ideas from the community when shaping the *Strategic Community Plan 2020–2030* and, in 2021, to help inform the development of this PHP. The latter included:

- Community survey, available on the Town's website, in Customer Services Centre, the Library, Youth Services and Seniors and Disability Services from 1 June to 30 June 2021;
- A display at the Library, including banners and free health promotional material from the Cancer Council and DoH;
- A display and staff attendance at the Hawaiian's Bassendean Shopping Centre on 17 June 2021;
- Information on the Town's website and social media;
- Email signature banner on all internal and outgoing correspondence from the Town;
- A feature in the Town's community publication *Thrive*; and
- Emailing survey to community groups, sporting groups, religious groups, and local schools.

The PHP consultation included asking the community what they thought about a range of public health issues.

Survey content analysis results can be found in Appendix A.

In addition to this, the Town formed an internal working group which comprised of team members from across the Town's business units. The working group was able to identify key existing programs, strategies and services that directly contribute to improving the community's health and wellbeing.

It is important that the contribution of these existing programs and services are acknowledged as part of this plan as they represent a significant pre-existing commitment to improving community health and wellbeing.

A summary of these initiatives is included in Section 9 of the PHP.

4.3 Preliminary Feedback

Between 1 June and 30 June 2021, residents were asked to complete the Public Health Plan Community Consultation Questionnaire.

A total of 224 people provided their responses.

The most common responses to each of the questions, are listed below.



What could help you make healthier food choices?

The top responses were:

- Knowledge of quick ways to prepare healthy meals.
- More availability of healthy foods.
- Less unhealthy food advertising.
- Knowledge on how to understand food labels.
- Information on how to cook healthy meals.



What prevents you from eating healthier foods?

The top responses were:

- Lack of time to prepare healthy meals.
- Work long hours and are too tired to cook healthy meals.
- Healthy foods are more expensive.
- Too much conflicting information regarding what foods are healthy.
- Often dine out or have take-away.



What would encourage you to be more active?

The top responses were:

- Free fitness classes.
- More cycle and walking pathways.
- More trail routes and maps.
- More group activities/exercise groups/sporting groups.
- More health and fitness options offered through the RElax Program.
- Information on ways to be more active in the Town of Bassendean.
- Other (lighting, infrastructure, footpaths, gym equipment, dogs).



What prevents you from being more active?

The top responses were:

- Lack of time to exercise.
- Gym/fitness centres are too expensive.
- I don't have the motivation to exercise.
- Full-time carer/parent and are unable to exercise.
- Do not enjoy exercising.
- Do not know which exercises are best for me.
- Other-health condition/injury.





How important are the following areas to your health and that of your community?

Ranked in order of importance by the community:

- Feeling safe in the community.
- Parks, reserves and public open spaces.
- Walking and cycle paths.
- Environmental health protection (food, water, noise etc.).
- Access to nutritional and affordable foods.
- Smoke free environments.
- Access to mental health.
- Climate change.
- Free programs for community.
- Free community education.
- Local road safety awareness.
- Community events.
- Health education programs.
- Alcohol free environments.



What else would you like to see in your local suburb to support your health and wellbeing?

The top responses were:

- Improve street lighting.
- Outdoor exercise equipment in parks.
- Footpath maintenance.
- Fenced/more dog parks.
- Free fitness classes indoors and outdoors, including yoga, Tai-Chi, low impact, for all members of the community—tailored for all ages and abilities.
- Improve safety/security/decrease in crime rates.
- More walk trails and cycle paths.

Q

Within the Town of Bassendean, what do you see as the key health concerns for you and your community?

Ranked in order of importance by the community:

- Unsafe community (e.g., crime, antisocial behaviour).
- Poor mental health.
- Physical inactivity.
- Homelessness.
- Illicit drug use.
- Harmful alcohol use.
- Drinking sugary drinks.
- Tobacco smoking.
- Chronic diseases.
- Not eating enough fruit and vegetables.
- Serious injuries (e.g. self-harm, road accidents).



What could encourage you to get involved in a community group?

Ranked in order of importance by the community:

- More free time to be able to attend.
- A buddy/companion to attend with.
- Transport assistance.

5. Determinants of Health

Determinants of health are factors that influence how likely we are to stay healthy or to become ill or injured.

These include:

- the social and economic environment;
- the physical environment; and
- the person's individual characteristics and behaviours (i.e. biomedical risk factors and behavioural risk factors).

The causes of avoidable health problems are more likely to be addressed when our attention is focused on these determinants.

5.1 Social Determinants of Health

Social determinants are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live and age. These determinants can also be viewed as protective factors and an individual's access to these, can reduce their likelihood of suffering from poor health, or injury, and/or enhance their response to it.

Examples include:

- income and social protection;
 social inclusion;
- education;

- housing;
- unemployment and job security;
- access to affordable
- working life conditions;
- food security;

health services; andcommunity safety.

Economic Stability	Neighbourhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment Income Expenses Debt Medical bills Support	Housing Transportation Safety Parks Playgrounds Walkability	Literacy Language Early childhood education Vocational training Higher education	Hunger Access to healthy options	Social integration Support systems Community engagement Discrimination	Health coverage Provider availability Provider linguistic and cultural competency Quality of care

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Figure 1: Social Determinants of Health

6. Town of Bassendean **Community Health Profile**

6.1 Local Context

Year

The Town of Bassendean covers an area of 10.3 square kilometres. As at 2021, its total population was 15,932, an increase of 0.6% since the 2016 Census and an 18% increase since 2006.

WA Tomorrow – Population Report No. 11 Medium-Term Age-Sex Population Forecasts 2016 to 2031 uses a series of simulations to estimate population growth over the period. For 2026, the lowest growth indicates a population of 13,110 and the highest growth indicates a population of 16,260.

By 2031, the lowest growth 12,600, the highest growth i 15,840, whilst the median gi

Table 1: Western Australia T Medium Term Popul 2016 to 2031 and Su Town of Bassendea

indicates a p	population of population of imated at 14;			SINCE 200
lation Forec	Population Re asts for West 2016 to 2031 ulation	-		1-14 YRS 17.6% WA 19.0 65 YRS & OVER 17.4% WA
S	um of Persor	าร		
Band B	Band C	Band D	Band E	
15,555	15,555	15,555	15,555	
14 640	15.030	15 390	16 330	-

	Band A	Band B	Band C	Band D	Band E
2016	15,555	15,555	15,555	15,555	15,555
2021	13,750	14,640	15,030	15,390	16,330
2026	13,110	14,220	14,660	15,110	16,260
2031	12,600	13,730	14,170	14,630	15,840

Note: 'Band A" represents a 10% probability that the actual number will be less than this, and a 90% probability that it will be higher. Conversely, 'Band E' represents a 10% chance that the actual number will be higher, and a 90% chance of it being lower. The same applies for Bands B and D, only as 30% and 70% respectively. 'Band C' is the midpoint.



The population density of the Town, is considerably greater than metropolitan Perth at 1,540 people per square kilometre, compared to 317.7 people per square kilometre for metropolitan Perth (population.net.au). The median age of the Bassendean community is 40.

population

²⁰²¹15,932

WA 19.0%

WA 16.1

Children aged 0-14 years make up 17.6% of the population, which is lower than the State (19.0%) and people aged 65 years and over make up 17.4% of the population, which higher that the State (16.1%) (ABS, 2021).

6.1.1 Demographics

In 2021, there are 399 Aboriginal people within the Town, making up 2.5% of the population, which is higher than the Perth metropolitan average of 1.8%, and lower that the State (3.3%) (ABS, 2021).

The Town's population also consists of 17.1% from non-English speaking backgrounds, with 32.4% of residents having been born overseas, both of which are lower than the State.

Table 2 shows the estimated population of Bassendean in five-year age groups with percentage comparisons with the State.

Table 2: Population by five-year age groups

Five-year age group	Town of Bassendean (usual residence)		Western Australia
(usual residence)	Estimated population	Persons %	Persons %
0-4	1002	6.3	6.1
5–9	922	5.8	6.5
10–14	876	5.5	6.4
15–19	736	4.6	5.8
20-24	867	5.4	6.0
25–29	1023	6.4	6.6
30–34	1215	7.6	7.4
35–39	1320	8.3	7.6
40-44	1068	6.7	6.7
45-49	1121	7.0	6.6
50-54	1046	6.6	6.5
55–59	1008	6.3	6.1
60–64	965	6.1	5.7
65–69	837	5.2	5.0
70–74	736	4.6	4.3
75–79	481	3.0	2.9
80-84	360	2.3	2.0
85 and over	360	2.3	1.9

Source: Census of Population and Housing General Community Profile, Town of Bassendean LGA, ABS, 2021. Please note that there are small random adjustments made to all cell values to protect confidentiality of data. These adjustments may cause the sum of rows or columns to differ by small amounts from table totals.

6.1.2 Socio-economic Status

The Socio-economic indexes for areas (SEIFA) scores are made up of four indices which summarise a variety of social and economic variables such as employment, income, housing and educational attainment. SEIFA scores are based on a national average of 1000. An inverse association exists with the score and the level of disadvantage experienced by the community (i.e. a higher SEIFA score indicating a lower level of disadvantage and a lower SEIFA score indicating a higher level of disadvantage experienced by that community).

According to 2016 Census data, the following SEIFA scores of relative socioeconomic disadvantage for the Town of Bassendean is 1009.0. As shown in Table 3, the suburb of Ashfield has a higher level of disadvantage. Table 3 shows the SEIFA scores for each suburb in the Town of Bassendean, as well as the scores for Greater Perth and Western Australia.

Table 3: SEIFA Score

Suburb	SEIFA Score	Usual Resident population
Ashfield	946	3,826
Bassendean	1023	3,290
Eden Hill	990	7,963
Greater Perth	1026	1,943,858
Western Australia	1015.0	2,474,410

Source: 2016 Census of Population and Housing (Australia Bureau of Statistics 2016).

6.1.3 Education and Employment

In the Town of Bassendean, a total of 4,335 people are attending an educational institution (ABS, 2021). The number of people attending the different types of educational institutions is shown in Table 4.

Table 4: Bassendean population attending educational institutions

Type of educational institution	Bassendean population	Bassendean %	Western Australia %
Preschool	282	6.5	5.6
Primary—Government	771	17.7	19.3
Primary—Catholic	258	5.9	4.5
Primary—other non-Government	140	3.2	3.6
Secondary—Government	455	10.5	12.7
Secondary—Catholic	219	5.0	4.5
Secondary—other non-Government	190	4.4	4.6
Tertiary—Vocational education	367	8.4	7.4
Tertiary—University or other higher education	649	14.9	13.9

Source: 2021 Census all persons, QuickStats Bassendean (Australia Bureau of Statistics 2021).

Bassendean has an unemployment rate of 7.9% which is higher than the rest of Australia. The main employing industry is health care and social assistance (Australia Bureau of Statistics 2016). 0

6.1.4 Housing

The composition of households in the Town of Bassendean is predominantly families (66.4%), which is lower than the State (71.2%). Single (or lone) person households is 30.0% of housing which is higher than the State (25.4%) and group households make up 3.7% of housing in comparison to the State being 3.4%. (ABS, 2021).

6.2 Health and Wellbeing Snapshot

6.2.1 Mortality Rates (by condition)

In 2020, the leading causes of death for Australians were ischaemic heart diseases, dementia (including Alzheimer's disease), cerebrovascular diseases, trachea, bronchus and lung cancer, chronic lower respiratory diseases and diabetes (ABS, 2020). Despite a 22.9% decrease since 2011, deaths from Ischaemic heart diseases remains the number one cause of death in Australia. Deaths due to dementia, including Alzheimer's disease, increased by 47.8% since 2011 and is the second leading cause of death in Australia.

Leading causes of death give an indication of the health of the population and help to ensure that health resources are directed to where they are needed the most. In Western Australia, for the period 2014–2018, the leading causes of death were chronic diseases such as ischaemic heart diseases (11.7%); dementia, including Alzheimer's disease, (7.3%); lung cancer (5.4%) and cerebrovascular diseases (5.3%).

For the same period, the leading causes of death in the Town of Bassendean community were also ischaemic heart diseases (16.6%); dementia, including Alzheimer's disease (6.3%); lung cancer (5.5%); cerebrovascular diseases (4.4%); and chronic obstructive pulmonary disease (3.7%).

Table 5 shows that ischaemic heart disease is the leading cause of death for the Bassendean community and is higher than the State average for males and significantly higher for females.

	Bassendean LGA %	Western Australia %
Males		
Ischaemic heart diseases	15.6	12.8
Lung cancer	5.4	6.1
Intentional self-harm	4.3	3.6
Cerebrovascular diseases	4.0	4.2
Prostate cancer	4.0	3.6
Chronic obstructive pulmonary disease (COPD)	3.6	4.1
Dementia (including Alzheimer's disease)	3.6	4.7

Table 5: Leading causes of death by condition and gender



Table 5: Leading causes of death by condition and gender (continued)

	Bassendean LGA %	Western Australia %
Females		
Ischaemic heart disease	17.7	10.4
Dementia (including Alzheimer's Disease)	9.1	10.1
Lung cancer	5.7	4.6
Cerebrovascular diseases	4.9	7.6
Breast cancer	4.5	3.9
Chronic obstructive pulmonary disease (COPD)	3.8	4.0

Source: Top fifteen causes of death for Bassendean (T) LGA residents (Epidemiology Branch). Generated using data from the Death Registrations, Registry of Births, Deaths and Marriages, Cause of Death, ABS, August 2022.

6.2.2 Lifestyle Risk Factors

The prevalence of lifestyle risk factors in our community are important due to their relationship with chronic conditions that are considered to be preventable. The five leading risk factors contributing to the greatest burden of disease in Western Australia are tobacco use, alcohol use, high body mass, high blood pressure and physical inactivity (Epidemiology Branch, 2017).

As shown in Table 6, less than 10% of the Bassendean population eat the recommended five serves of vegetables daily and approximately 50% of the Bassendean population eat less than two serves of fruit each day. It also informs that 37% of the Town's population carry out less than two hours of physical activity per week and 40% of the Town's population spend more than 21 hours per week in sedentary leisure time.

Table 6: Lifestyle risk factors

Risk Factor	Bassendean LGA % Persons	Australia
Currently smokes	11.5	13.1
Eats less than 2 serves of fruit daily	50.9	48.6
Eats less than 5 serves of vegetables daily	90.8	88.9
Drinks at high risk levels for long-term harm ^a	25.0	31.5
Drinks at high risk levels for short-term harm ^b	7.9*	12.9
Less than 150 minutes of physical activity per week ^c	36.8	36.5
Spends 21+ hours per week in sedentary leisure time	39.7	32.4

Source: WA Health and Wellbeing Surveillance System, Epidemiology Branch Department of Health WA.

*Result has a Relative Standard Error (RSE) between 25% and 50% therefore should be used with caution.

^a Drinks more than 2 standard drinks on any one day.

^c Adults aged 18 years and over only. Refers to moderate minutes with minutes spent in vigorous physical activity doubled.

^b Drinks more than 4 standard drinks on any one day.

6.2.3 Biomedical Risk Factors

Biomedical risk factors are bodily states that can contribute to the development of chronic diseases (Australian Institute of Health and Welfare, 2016). Modifying these risk factors can reduce an individual's risk of developing chronic conditions. High blood pressure, body weight and cholesterol levels can be influenced by socioeconomic, psychological risk factors and lifestyle risk factors.

High blood pressure is a major risk factor for the development of ischaemic heart disease, stroke and renal failure. High blood cholesterol can be a major risk factor for ischaemic heart disease, ischaemic stroke and peripheral vascular disease. Being overweight or obese can contribute to the development of chronic conditions such as heart disease, type 2 diabetes, osteoarthritis and some cancers. (Australian Institute of Health and Welfare, 2016).

As shown in Table 7, it is estimated that 61% of the Town's adult population (8,028 people) are overweight or obese. Approximately 20% of the Town's population have high blood pressure, which is higher than the State average (16.5%), and 18.9% currently have high cholesterol.

Biomedical Risk Factors	Bassendean LGA % Persons	Western Australia % Persons
Current high blood pressure	19.6	16.5
Current high cholesterol	18.9	18.6
Overweight (BMI of 25-<30)	37.4	39.3
Obese (BMI of 30+)	23.6	27.5

Table 7: Biomedical risk factors

Source: WA Health and Wellbeing Surveillance System, Epidemiology Branch Department of Health WA.

In 2017–2018, an estimated 24% (746,000) of Australian children aged between 5 and 14 years, were overweight (17%) or obese (7.7%). Similarly in Western Australia, for the same period, around one quarter (24.7%) of children were either overweight (18.6%) or obese (7.2%).

Overweight and obesity increases a child's risk of poor physical health and is a risk factor for illness and mortality in adulthood. Children with overweight and obesity are also more likely to become obese adults, and to develop chronic conditions such as type 2 diabetes and cardiovascular disease at younger ages (Sahoo et al. 2015) (Australian Institute of Health and Welfare, 2017). Children with obesity have a higher risk of experiencing breathing difficulties, bone fractures, hypertension, insulin resistance and early markers of cardiovascular disease (World Health Organisation, 2018).

Table 8: Estimated population of children and adolescents (aged 2 to 17 years) who are overweight and obese in the Town of Bassendean and Western Australia 2014–2015

Risk Factors	Bassendea	Western Australia		
	Estimated Population	Per 100 persons*	Per 100 persons*	
Overweight	512	18.9	18.9	
Obese	161	5.7	6.1	

* Figures are based on children's BMI cut off points and are age standardised per 100 population. Source: Australia's Health Tracker Atlas, Data by LGA (Australian Health Policy Collaboration, 2017).



6.2.4 Health Conditions (other than mental health)

Chronic diseases significantly contribute to the burden of disease in Australia. These include cancer, cardiovascular health, injury prevention and control, mental health, diabetes, asthma, arthritis, dementia and obesity. When compared to the rest of WA, Bassendean has a higher percentage of its population burdened with chronic conditions (ABS, 2021).

Table 9: Health conditions other than mental health

Condition	Bassendean LGA % Persons	Western Australia % Persons	
Arthritis	8.5	7.6	
Asthma	8.5	7.3	
Cancer (including remission)	3.1	2.7	
Dementia (including Alzheimer's)	0.8	0.7	
Diabetes (excluding gestational diabetes)	4.7	4.4	
Heart disease (including heart attacks or angina)	4.1	3.6	
Kidney disease	0.9	0.8	
Lung condition (including COPD or emphysema)	2.2	1.6	
Stroke	1.0	0.8	
Any other long-term health condition(s)	8.7	7.4	
No long-term health condition(s)	57.1	61.2	

6.2.5 Mental Health Conditions

Mental health is defined as "a state of wellbeing in which every individual realises his or her own potential, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community" (World Health Organization, 2018).

Mental illness covers a broad range of mental health and behavioural disorders which can vary in duration and severity (Australian Institute of Health and Welfare, 2018). Mental Health conditions including depression and anxiety, are associated with higher rates of death, poorer physical health and increased exposure to health risk factors. Socioeconomic circumstances can also influence a person's mental health (Australian Institute of Health and Welfare, 2018).

Table 10 outlines mental health indicators including high and very high psychological distress and mental health conditions for the Town's population.

Psychological Risk Factor	Bassendean LGA % Persons	Western Australia % Persons	
High or very high psychological distress	9.3*	8.2	
Mental health problem ^a	17.4	14.5	
Stress related problem ^b	10.6*	9.1	
Anxiety ^b	13.0*	8.0	
Depression ^b	10.1*	8.2	

Table 10: Mental health indicators

Source: City Health District Health Profile, 2010–16, HWSS, Department of Health WA (Epidemiology Branch, 2019).

Notes: This information is based on responses from 217 adults within the Bassendean LGA and 44,379 adults within the State.

*Relative Standard Error (RSE) between 25% and 50% therefore should be used with caution.

^a Diagnosed by a doctor with a stress related problem, depression, anxiety or any other mental health problem in the last 12 months.

^b Diagnosed by a doctor in the last 12 months.

Based on hospitalisations between 2015 and 2019, the number of hospitalisations for mental disorders for the Bassendean population was significantly higher for both males and females, when compared to the rate of hospitalisations for all Western Australians.

Table 11 informs that the age group most affected by mental disorders is the 25- to 44-year-olds. Of the total mental disorder hospitalisations between 2015 and 2019, 58.5% were by females. Although hospitalisations in males was lower than the number of female hospitalisations, the percentage of males aged 25-44 years affected was higher than that seen for females who live in Bassendean.

Table 11: Percentage of Mental disorders hospitalisations by age and sex

Bassendean LGA Residents: 2015 to 2019							
	Age Group						
Sex	0-4	5–14	15–24	25–44	45–64	65+	
Male	0.5%	1.4%	15.4%	37.6%	29.4%	15.7%	
Female	0.0%	2.5%	24.5%	31.8%	28.6%	12.6%	

6.2.6 COVID-19

On 11 March 2020, the World Health Organization (WHO) declared COVID-19 to be a pandemic. COVID-19 is a respiratory illness that weakens the immune system causing inflammation. This commonly leads to poor respiratory outcomes such as viral pneumonia and secondary infection. Other manifestations such as acute kidney injury and cardiac complications have also been reported but these are less common.

As of July 2022, there were 9,428 (2.3%) death registrations received by the ABS certifying an individual as having died from or with COVID-19. Of these, COVID-19 was the underlying cause of death for 7,969 (84.5%) registered deaths as the condition or disease that initiated events leading to death.

People with pre-existing chronic conditions have a greater risk of developing severe illness from COVID-19. Whilst pre-existing chronic conditions do not cause COVID-19, they increase the risk of COVID-19 complications and therefore increase the risk of death. Pre-existing conditions were reported on 77.3% death certificates where the death was due to COVID-19.

Chronic cardiac conditions including coronary atherosclerosis, cardiomyopathies and atrial fibrillation were the most commonly certified co-mobilities (38.7%). Dementia including Alzheimer's disease was certified as a pre-existing condition in over 30% of deaths due to COVID-19. In addition, diabetes was certified as a pre-existing condition in 17.3% of deaths with a chronic condition mentioned and cancer was a pre-existing condition in 16.6% of deaths, with blood and lymph cancers (e.g., leukaemia) being the most commonly certified cancer type among those deaths.



Figure 2: Pre-existing chronic conditions certified with COVID-19 deaths a,b,c,d,e

- ^a Includes COVID-19 death registrations only. Numbers will differ to disease surveillance systems.
- ^b Includes all COVID-19 deaths (both doctor and coroner certified) that occurred and were registered by 31 July 2022.
- ^c All deaths due to COVID-19 in this report have been coded to ICD-10 code U07.1 COVID-19, virus identified or U07.2 COVID-19, virus not identified as the underlying cause of death.
- ^d Data is provisional and subject to change.

^e Refer to the methodology for more information regarding the data in this graph. Source: COVID-19 Mortality in Australia: Deaths registered until 31 July 2022, Australian Bureau of Statistics (abs.gov.au)





7. Implementation, Evaluation, Reporting and Review

7.1 Implementation

Monitoring and reporting of the PHP will be coordinated by the Town's Health Services team. The PHP will involve the delivery of actions by a range of service areas from across the Town of Bassendean.

A four-year Action Plan has been developed to address the identified priorities.

The PHP will be delivered through Town projects and programs and through partnerships with external stakeholder organisations and the community.

To ensure the success of the PHP, the Town will:

- Engage with priority populations to improve health outcomes;
- Understand the current activities and goals of each of the Town's service areas;
- Link in with broader health campaigns and identify potential funding opportunities;
- Understand external stakeholders' activities and goals; and
- Leverage from existing events to promote opportunities.

7.2 Evaluation

The Town will evaluate its work in relation to the identified health priorities and expected outcomes. This PHP will be reviewed annually in accordance with the *Public Health Act 2016*. The annual review and report will be prepared and submitted by the Town to the Chief Health Officer when required by the DoH.

Quarterly reporting against the Action Plan will be undertaken by relevant Town service areas and provided to the Town's Health Services team to track progress and identify any potential opportunities for collaboration and/or improvement. Changes in health status are typically only seen over long periods of time, therefore a range of progress indicators will be used to track the impact and effectiveness of the PHP strategies and actions over the short, medium and long term.

7.2.1 Short Term Progress Indicators

- Actions from the PHP have been implemented as planned.
- Actions from the PHP have been an effective way for the Town to focus on health and wellbeing.

7.2.2 Medium Term Progress Indicators

- Improved community perception of community health and wellbeing.
- Improved community perception and use of the Town's health and wellbeing services and assets.

7.2.3 Long Term Progress Indicators

- Decrease or no change in prevalence of health risk factors in the community.
- Decrease or no change in key preventable death and hospitalisation rates.

7.3 Reporting and Review

The vision for this PHP is for a healthy, liveable and socially connected community for all residents. The Action Plan will be reviewed annually to monitor the implementation of the Action Plan and will include:

- Checking the progress of the PHP's actions and partnerships.
- A review of the strategies to ensure they remain relevant and are producing the desired outcomes.
- A review of demographics and health data to ensure priorities remain current.
- Monitoring of the implementation of the actions in accordance with the schedule.
- A review of State plans to ensure alignment of priorities.
- Identification of any emerging public health issues.
- Identification of any budget resource changes.
- Identification of any barriers in delivering services, infrastructure and equipment, and development of options to address these.
- Amendment and updating of the plan to reflect changes.

After four years, the plan will be evaluated and reviewed prior to developing future plans.

... a healthy, liveable and socially connected community for all residents ...



The Town's Community Health Profile highlighted a number of public health challenges for the Town.

The findings from the collation and analysis of local data and from the consultation process has resulted in the identification of various health risk areas that the PHP will seek to address which include:

- Overweight and obesity.
- Mental health and wellbeing.
- Nutrition.
- Physical inactivity.
- Environmental health protection.
- Community safety.
- Alcohol and drug use.

These health risk areas were streamlined and grouped into five key priority areas. The Action Plan identifies objectives and actions for implementation to address the key priority areas.

Priority Area One

Active and Healthy Lifestyles

Objective: Create opportunities that encourage people to be active and healthy

- A community that is able to make healthy and active lifestyle choices.
- A community that has good health and is able to make healthy active lifestyle choices.
- A community that lives healthy, eats healthy and is active.
- A Town that enhances the health and wellbeing of all residents.



Priority	
Area	Social Wellbeing and Community Connections
Two	Objective: Support priority populations to achieve better social and health outcomes
	 A strong and connected community for all generations. A community which is socially connected and able to participate in and contribute to community life.
	 Community members are engaged in the community. An inclusive, healthy, creative community where people can feel safe, connected and engaged.
	 Inclusive and accessible environments that promote participation in community life by all.
	 Healthy, strong and resilient people and connected communities. Inclusion, diversity and uniqueness are respected, welcomed and celebrated.
Priority	
Area Three	Health Promotion and Advocacy
	Objective: Community is informed to make the best choices to live healthy, be healthy and active
	Objective: Promote mental health and wellbeing through
	collaborative partnerships
	 A healthy, well-informed and resilient community. A community that is able to flourish and fulfil its potential.
Priority	
Area Four	Built and Physical Environment
	Objective: Provide and support a range of quality facilities and services that have a positive impact on health and wellbeing
	Objective: Support the creation of environments that encourage healthy living
	• A healthy community enjoying quality facilities and services.
	• An environment that supports residents to lead active and healthy lives.
Priority Area	Regulation and Protection
Five	
	Objective: The Town supports strategies to promote a safer community
	Objective: To protect, promote and enhance environmental factors which impact on community public health
	 A community protected from environmental and health risks. A safe and protected community.
	 A safe community for everyone who lives in, works in and visits the district. Community health, safety and wellbeing are a focus in everything the



9. Action Plan

The following details actions to implement the PHP.

'E' represents an existing program or action already undertaken by the Town, whilst 'NP' represents a new program, which will require resourcing via subsequent budget processes.

9.1 Active and Healthy Lifestyles

Objective: Create opportunities that encourage people to be active and healthy

- A community that is able to make healthy and active lifestyle choices.
- A community that has good health and is able to make healthy active lifestyle choices.
- A community that lives healthy, eats healthy and is active.
- A Town that enhances the health and wellbeing of all residents.

Acti	on	Outcome	Responsibility		2022 -2023	Timef 2023 -2024	rame 2024 -2025	2025 -2026
9.1.1	Continue to deliver the RElax program and investigate opportunities to provide for increased physical activity. Provide a review analysis of the RElax program within 12 months.	Accessible and affordable health and wellbeing courses to residents and the wider community. Courses can range from physical activity to arts and craft. All courses offered aim to support the Act Belong Commit principles.	Community Development	Ε	~	√	√	✓
9.1.2	Promote and encourage increased physical activity and/or wellbeing through programs and initiatives provided by key stakeholders.	Active transport is supported and encouraged wherever possible, to increase physical activity.	Community Development	E	1	1	1	 Image: A start of the start of
9.1.3	Provide opportunities for social connection, engagement and physical activity for older persons.	Community ages well.	Community Development	NP	1	1	1	1
Actio	วท	Outcome	Responsibility		2022 -2023	Time1 2023 -2024	2024	2025 -2026
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9.1.4	Pursue grant funding opportunities to increase the health and wellbeing of the community through projects, activities and services.	Increased number of healthy lifestyle initiatives within the Town.	All	NP	1	1	1	1
9.1.5	Promote and deliver local nutrition and healthy eating programs.	Improved nutrition literacy.	Health Services	NP		1	1	√
9.1.6	Raise awareness of the risks of sun exposure and ensure sunscreen is available at Town approved events.	Improved community education and awareness.	Health Services	NP	1	1	1	✓
9.1.7	Provision of healthy meals and snacks at Youth Services facility.	Young people provided with healthy meals and fruit as an alternative to fast food and unhealthy snacks, improving physical health outcomes; increase food literacy.	Youth Services	E	~	~	~	<i>✓</i>
9.1.8	Provide healthy foods at all Youth Services' events and programs.	Improved healthy eating and access to affordable food.	Youth Services	NP		1	1	1
9.1.9	Participate in studies and implement programs, such as the KIDDO program, to help improve the fundamental movement skills of children.	Children's wellbeing and mental health is supported.	Children Services	E	~	~	~	✓
9.1.10	Examine opportunities to implement partnerships and programs to reduce alcohol and other drug use issues.	Changed culture on alcohol consumption and drug consumption. Improved community education and awareness.	Health Services Community Development Youth Services	NP			1	1

9.2 Social Wellbeing and Community Connections

Objective: Support priority populations to achieve better social and health outcomes

- A strong and connected community for all generations.
- A community which is socially connected and able to participate in and contribute to community life.
- Community members are engaged in the community.
- An inclusive, healthy, creative community where people can feel safe, connected and engaged.
- Inclusive and accessible environments that promote participation in community life by all.
- Healthy, strong and resilient people and connected communities.
- Inclusion, diversity and uniqueness are respected, welcomed and celebrated.

Actio	on	Outcome	Responsibility		2022 -2023	Timef 2023 –2024	2024	2025 -2026
9.2.1	Continue to provide and facilitate events, workshops and programs that bring community together (e.g., Craft Groups, Book Clubs, games, literary events and other extension activities).	Enhanced opportunities to socialise, be active and connected in a welcoming, accessible and all-inclusive environment.	Community Development	E	<i>√</i>	5	√	5
9.2.2	Continue to provide information to facilitate historical guided and self-guided walks and pursue grant funding to facilitate a bike tour during WA Bike Month.	Increased physical activity.	Community Development Health Services	E	~	1	<i>✓</i>	<i>✓</i>
9.2.3	Support/facilitate the delivery of the markets in the Town.	Access to affordable and fresh produce. Increasing community connection.	Community Development	E	1	1	1	1
9.2.4	Work with stakeholders to make information available to the community regarding local services, programs and facilities available to them.	Improved community education and awareness.	Customer Services	NP	~	1	1	1

						0	0	0
Actio	on	Outcome	Responsibility		2022 -2023	2023	frame 2024 -2025	2025 -2026
9.2.5	Provide and promote lifelong learning, digital literacy and encourage social inclusion.	Lifelong learning is the ongoing, active pursuit of knowledge that enhances social inclusion, active citizenship and personal development.	Community Development	E	~	5	5	~
9.2.6	Delivery of case management services to disadvantaged and/or at-risk young people.	Effective support relationships developed, and referrals to specialist services undertaken when appropriate.	Youth Services	E	1	1	1	1
9.2.7	Delivery of Open Access 'Drop-In' Program.	Disadvantaged young people aged 12–25 years are provided appropriate support, opportunities and leisure spaces. Relationships built in these environments are leveraged into referrals, informal counselling and ongoing support, decreasing marginalisation and disadvantage.	Youth Services	E				
9.2.8	Provide support to young Learner Drivers to assist them in obtaining a Driver's License.	Improved access to social, educational and vocational opportunities.	Youth Services	E	1	1	1	1
9.2.9	Continue to actively support and encourage volunteering programs in the community.	Working with local community groups for capacity building, promotion of volunteering, recruiting and engaging volunteers for mental and physical health.	Community Development Sustainability & Environment	E	~	~	1	~

Action	Outcome	Responsibility		2022 -2023	Timef 2023 –2024	2024	2025 -2026
9.2.10 Support and promote inclusion of diverse groups including people with disabilities, people who identify as Aboriginal or Torres Strait Islander people, culturally and linguistically diverse communities and LGBTQIA community members.	Providing inclusive community services that recognise the needs of LGBTQIA communities and individuals.	All	NP	<i>√</i>		✓	
9.2.11 Partner with professionals including Speech Therapists to share information with families on family information evenings.	Build capacity of parents and carers as the primary educators in a child's life.	Children Services	E	~	1	1	✓
9.2.12 Established relationship with Be You and utilise many of their resources such as Behaviour, Emotions, Thoughts, Learning and Social Relationships (BETLS) tool.	Children's wellbeing and mental health is supported.	Children Services	E	~	~	~	1
9.2.13 Facilitate opportunities for active ageing.	Remain connected and engaged in community life which contributes to positive health and wellbeing.	Health Services Community Development	NP	1	1	1	<i>√</i>



9.3 Health Promotion and Advocacy

Objective: Community is informed to make the best choices to live healthy, be healthy and active

Objective: Promote mental health and wellbeing through collaborative partnerships

- A healthy, well-informed and resilient community.
- A community that is able to flourish and fulfil its potential.

Actio	on	Outcome	Responsibility		2022 -2023	Timef 2023 –2024	2024	2025 -2026
9.3.1	Promote programs to increase physical activity levels in children and teenagers via organisations/clubs.	Increase in the number of healthy lifestyle initiatives within the Town.	Community Development Youth Services	NP		1	1	1
9.3.2	Build the capacity of local clubs, groups and organisations to deliver health and wellbeing activities and initiatives.	Improved community education and awareness.	Community Development	E	1	1	1	1
9.3.3	Administer the Town's Sponsorship and Grants Program.	Opportunity for the Town to adopt an Assets Based Community Development approach to enable and empower community to run programs, local gatherings and initiatives etc., with the outcome of increased community connection, mental health and wellbeing.	Community Development	E		~		~
9.3.4	Implementation of the Town's Community Awards.	Opportunity for Town residents to identify and recognise fellow community members making a significant contribution with the outcome of increasing community connection, mental health and wellbeing.	Community Development	E	1	1	1	✓

Action	Outcome	Responsibility		2022 -2023	Timef 2023 -2024	2024	2025 -2026
9.3.5 Continue to source, provide and promote information resources in a variety of formats to educate and inform our community about health issues.	Increased awareness and use of Health and Wellbeing resources that educate and inform the community.	Community Development	E	~	1	~	1
9.3.6 Identify opportunities to promote state and federal health promotion bodies and campaigns such as Quit (smoking), Cancer Council WA (LiveLighter) that will facilitate and help to promote health and wellbeing.	Informed community better equipped to make lifestyle choices.	Health Services	NP	✓	~	\checkmark	 Image: A start of the start of
9.3.7 Continue to promote mental health awareness through Act Belong Commit and increase community engagement and understanding of mental wellbeing and social inclusion.	More community members involved with mental health campaigns. Raised awareness of how to stay mentally healthy.	Community Development	E	<i>√</i>	1	<i>√</i>	J
9.3.8 Collaborate with and/or promote key stakeholders such as HeadSpace and Helping Minds to identify and implement/support mental health promotion initiatives with community groups.	Improved community education and awareness regarding wellbeing and service access. Existing campaigns (e.g., R U OK? Day and Mental Health Week) to support schools and community organisations raise the awareness regarding mental health supports for youth are utilised.	Community Development Health Services Youth Services	NP				
9.3.9 Collaborate with the Midvale Hub Parenting Service to provide a Parenting Champion who delivers parenting workshops for families.	Families have access to a number of programs to support them including Protective Behaviours, Circle of Security, 1, 2, 3 Magic and Emotion coaching, Tuning in to Kids and Tuning in to Teens.	Children Services	E	✓	~	<i>√</i>	~

9.4 Built and Physical Environment

Objective: Provide and support a range of quality facilities and services that have a positive impact on health and wellbeing

Objective: Support the creation of environments that encourage healthy living

- A healthy community enjoying quality facilities and services.
- An environment that supports residents to lead active and healthy lives.

Actio	on	Outcome	Responsibility		2022 -2023	Time1 2023 -2024	2024	2025 -2026
9.4.1	Planting trees throughout the district.	Increased tree canopy to create a cooler and more liveable community.	Infrastructure	E		1	1	<i>✓</i>
9.4.2	Providing shade structures throughout the district.	Increased shade to create a cooler and more liveable community.	Infrastructure	NP		1	1	1
9.4.3	Implement and maintain connected footpaths throughout the Town ensuring adequate seating, shade, lighting, drinking fountains, and bins are provided.	Walking trails and paths are well used and safe.	Infrastructure	E	1	1	1	 Image: A start of the start of
9.4.4	Implement cycleways throughout the Town ensuring adequate seating, shade, lighting, drinking fountains and bins are provided.	Cycleways are well used and safe.	Infrastructure	NP		1	1	1

... an environment that supports residents to lead active and healthy lives ...

Action		Outcome	Responsibility		2022 -2023	Timef 2023 -2024	2024	2025 -2026
ma fie rec mu clu co eas	eating and aintaining sporting elds to the quirements of ultiple sporting ubs allowing mmunity to sily participate in ganised sport.	Community have access to facilities that promote physical activity and wellbeing.	Infrastructure	E	1	5	5	✓
an use an coi ova an	ovide, maintain ad encourage the se of accessible ad affordable ammunity facilities, rals, walking routes ad reserves for ammunity use.	Community have access to facilities that promote physical activity and wellbeing.	Community Development Infrastructure	E	~	1	1	<i>✓</i>
en ass inf pro to be nat	omote and activate vironmental sets and existing frastructure ovided by the Town, enable people to e more active, enjoy ture and promote ental health.	Accessible public open spaces for passive recreation, active transport and connection with nature.	Community Development Sustainability & Environment	NP		1	1	✓
he: (in Ac ⁻ int	corporate public ealth principles icluding Healthy etive by Design) to local planning ameworks.	Planning and development of the built environment support the community to age well.	Planning Services	NP		1	1	✓
	plement the Asset anagement Strategy.	Facilities meet the needs of the community to recreate and socialise easily such as picnic tables, BBQs and toilet facilities.	Infrastructure	E	~	1	1	✓
me ho dis	ovide affordable edium term ousing options for sadvantaged young trents.	Reduction of risks surrounding homelessness, and improved connections with support services.	Youth Services	E	1	1	1	✓
spe	ovide youth ecific facilities and ograms.	Improved support and peer networks. Increased exposure to personal development opportunities.	Youth Services	E	1	1	1	1

Actio	n	Outcome	Responsibility		2022 -2023		frame 2024 -2025	2025 -2026
9.4.12	Respond to the data provided in the Australian Early Development Census (AEDC).	Improved outcomes for children by enhancing environments such as the play equipment etc.	Children Services	E	1	5	5	5
9.4.13	Develop a Community Emissions Reduction Strategy.	Enabling residents, schools and businesses to lead healthier and more sustainable lives by engaging in new habits and achieving lasting positive change in areas such as waste reduction to landfill, reduction in greenhouse gas emissions, active transport, sharing resources, growing food locally, renewable energy generation, increased food waste composting, and opportunity for community connection.	Sustainability & Environment	NP				
9.4.14	Provision of outdoor exercise equipment.	Improved health and fitness outcomes for the community.	Infrastructure	NP				1
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9.5 Regulation and Protection

Objective: The Town supports strategies to promote a safer community

Objective: To protect, promote and enhance environmental factors which impact on community public health

- A community protected from environmental and health risks.
- A safe and protected community.
- A safe community for everyone who lives in, works in and visits the district.
- Community health, safety and wellbeing are a focus in everything the Town does.

Actio	on	Outcome	Responsibility		2022 -2023	Timef 2023 -2024	2024	2025 -2026
9.5.1	Promote the food safety training, at cost recovery of fees incurred by the Town, for local food businesses to enhance skills and knowledge in food safety.	Safe handling of food and adequate skills and knowledge of food handlers.	Health Services	E	1	1	1	✓
9.5.2	Ensure all food businesses submit a Food Business Registration/Notification form as required under the Food Act 2008, and work with food businesses to provide safe and suitable food.	Food manufactured and/or sold in the Town is safe and compliant with Food Standards Code.	Health Services	E	~	1	~	
9.5.3	Ensure all food businesses servicing vulnerable populations submit verified Food Safety Plans as required under the Food Standards Code.	All food safety plans completed and verified with regular monitoring and reporting.	Health Services	E	1	1	1	✓
9.5.4	Conduct microbiological and chemical food sampling.	Food manufactured and/or sold in the Town is safe and compliant with Food Standards Code.	Health Services	E	1	1	√	√
9.5.5	Implement and manage the Town's Mosquito Monitoring and Control Program. Liaise with State Government agencies for the provision of funding to cover the cost of Mosquito control programs on state controlled land.	Effective mosquito monitoring and control program to reduce mosquito nuisance levels in the community and mosquito-borne diseases.	Health Services	E		5	√	

Actio	วท	Outcome	Responsibility		2022 -2023	Timef 2023 -2024	2024	2025 -2026
9.5.6	Disseminate information when the Department of Health considers local waterways pose a risk to people.	Safe waterways for community to recreate in.	Health Services	E	1	1	1	<i>✓</i>
9.5.7	Protect the community from illness through education and enforcement of public health standards at skin penetration premises.	Community is protected from disease and illness.	Health Services	E	1	1	1	<i>√</i>
9.5.8	Continue to implement the Town's statutory responsibilities for protecting the community as legislated by the <i>Public Health</i> <i>Act 2016, Food Act</i> <i>2008, Tobacco Products</i> <i>Control Act 2006,</i> <i>Environmental Protection</i> <i>Act 1986</i> , and the <i>Health (Miscellaneous</i> <i>Provisions) Act 1911</i> and subsidiary legislation. This includes public health complaint services (such as odour, noise, dust, asbestos handling, food safety, pollution control), food safety assessments, public building assessments, events safety assessments, industrial premises audits for pollution protection measures, and on-site effluent disposal approvals.	Recognition of the Town's statutory role and its contribution to community safety and increased community awareness about minimising public health risks in and around the home. Maintain amenity in the community.	Health Services	E				
9.5.9	Continue to develop and review management plans for Emergency Risk Management (ERM), Emergency Management Arrangements (LEMA), Local Recovery Plan (LRP).	The Town is well prepared to respond effectively to and recover from major emergencies, disasters or serious public health incidences.	Bassendean Local Emergency Management Committee Director Community Planning Services	E	1	1	\checkmark	

Action		Outcome	Responsibility		2022 -2023	Timef 2023 -2024	2024	2025 -2026
9.5.10 Comply with th local governme requirements of in State Hazard Pandemic Plan Emergency Man legislation whe enacted.	ent details d Plan/ , nagement	Improved staff skills and knowledge regarding emergency management and pandemic planning.	All	E	~	1	~	✓
9.5.11 Administer and Council's Local		Council's statutory role and its contribution to community safety is recognised.	Ranger Services Health Services Building Services Infrastructure Sustainability & Environment	E	<i>√</i>	√	<i>✓</i>	 Image: A start of the start of
9.5.12 Continue to pro waste services education to re and businesses	and esidents	Community is protected from disease and illness. Better waste management practices.	Sustainability & Environment	E	1	1	1	1
9.5.13 Continue to mo health and qua water in the Sw and in urban w	ılity of van River	Safe waterways for community to recreate in.	Sustainability & Environment Health Services	E	1	1	1	1



Continue to monitor the health and quality of water in the Swan River...

10. References

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11. Appendix A

11.1 Survey Results Analysis

Public Health Plan Community Consultation Questionnaire

Between 1 June and 30 June 2021, residents were asked to complete the Public Health Plan Community Consultation Questionnaire. A total of 224 people provided their responses.

The information collected helped to develop strategies and actions included in this PHP for the purpose of improving the health and wellbeing of the community.



Question 2: Which age group do you belong to?



Age Groups



Question 3: Tell us about yourself. Select all that apply.











Question 6: What prevents you from eating healthier foods?





Facilities meet the needs of the community to recreate and socialise easily such as picnic tables, BBQs and toilet facilities...



Question 7: What could encourage you to be more active?



Question 8: What prevents you from being more active?



Question 9: How important are the following areas to your health and that of your community?





Question 11: What else would you like to see in your local suburb to support your health and wellbeing?

The most common answers included:

- Improve street lighting.
- Outdoor exercise equipment in parks.
- Footpath maintenance.
- Fenced/more dog parks.
- Free fitness classes indoors and outdoors, including yoga, Tai-Chi, low impact, for all members of the community—tailored for all ages and abilities.
- Improve safety/security/decease in crime rates.
- More walk trails and cycle paths.

Walking trails and paths are well used and safe...



Question 12: Within the Town of Bassendean, what do you see as the key health concerns for you and your community?







Accessible public open spaces for passive recreation, active transport and connection with nature...

Question 14: Have you ever accessed mental health services?



Question 14a: When you try to access information about Mental Health Services, where do you go?



Question 15: Are you currently involved in a community group?



Question 15a: What could encourage you to get involved in a community group?



Question. 16: Would you like to see any other community groups implemented in the Town of Bassendean?

The most common answers included:

- No.
- Arts/crafts/woodworking/jewellery/knitting groups.
- Social sporting groups.
- Yoga/fitness/Tai-Chi groups.
- Community garden.
- Parent/mothers groups.
- Friendship group/coffee and chat group.
- Children specific—Girl Guide/Scouts/Reading and writing/arts and crafts/ fitness, exercise groups.

YP questions: Young People





Question YP2: (If you attend school outside the Bassendean Area) How far do you need to travel to get to school?



Question YP3: (If you attend school outside the Bassendean Area) How do you get to school?



DS questions: Disability and Seniors

Question DS1: Do you live with a disability?



Question DS2: Are you on an NDIS Package?



Question DS3: Are you on a Home Care Package?







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