



**WEST  
WIMMERA  
SHIRE COUNCIL**

# Municipal Public Health & Wellbeing Plan 2017 - 2021

*The best of country living*



## WEST WIMMERA SHIRE COUNCIL

### West Wimmera Shire Council MPHWP 20178-2021 v1.6 FINAL DRAFT

#### Actions **WWSC**

For review by WWSC, content and formatting.  
Identify comments using review in Microsoft Word.  
Inclusion of Mayor and/or CEO introductions?

WWSC to send draft to stakeholders for comment

correct font to be embedded

Provide pictures for inclusion

Return version with comments to Kernow by September 14 2017

#### Actions **Kernow**

Final edit and format to create FINAL VERSION Provide to WWSC by 9 October

#### Actions **WWSC**

Launch



# WEST WIMMERA SHIRE COUNCIL

	Index	Page
1	Map	
2	Council statements	
	Council Vision	
	Council Mission Statement	
	Council Values	
2	Scope	Victorian Public Health and Wellbeing Plan scope and policy.
3	Context	
	A	What is a Municipal Public Health and Wellbeing Plan?
	C	What is Council's role in public health and wellbeing?
4	Strategy & Implementation	
	A	Preparing West Wimmera Shire Council Municipal Public Health and Wellbeing Plan.
	i	Community engagement
	ii	Links with other Council plans
	iii	Health and climate adaptation
	iv	Addressing Domestic Violence in Our Communities
	v	Recommendations from evaluations of WWSC MPHWP 2013-2017
	B	West Wimmera Shire Council Community Profiles
	C	West Wimmera Shire Council health and wellbeing priorities for 2017-2021
5	References and attachments	
	Appendix 1	
	Appendix 2	
	Appendix 3	



## WEST WIMMERA SHIRE COUNCIL

### From the Mayor

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### From the CEO

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# WEST WIMMERA SHIRE COUNCIL

Picture 1. West Wimmera Shire Council Region



## Community Vision Statement

Our West Wimmera communities are healthy, thriving, diverse, harmonious, prosperous and self-sustaining, with regional and global connectivity.

## Council Mission Statement

West Wimmera Shire Council will work in partnership with the community and government to develop and enhance a productive, healthy and safe community by providing leadership, services, advocacy and good governance.

## West Wimmera Shire Council Values

1. West Wimmera Shire values its resident population and its wellbeing. This will be demonstrated through the promotion of viable and sustainable communities, the retention of the current population and support to grow communities.
2. West Wimmera Shire values good governance and transparent decision making. Supporting Community Groups and advocating on their behalf will enable open dialogue to occur with residents.
3. Representing the whole of West Wimmera is valued highly by Councillors. Eliminating any perception of a geographical divide will greatly benefit everyone.
4. A connected community, both via transport infrastructure and modern digital technology that enables us to be connected to the world for business and education.
5. Partnerships (locally, regionally and with government) are valued as a way of ensuring sustainable service delivery.



### What is a Municipal Public Health and Wellbeing Plan?

The Victorian Public Health and Wellbeing Plan 2017-2019 contains the Victorian government's health and wellness strategies to achieve the best possible health and wellbeing for all Victorians. Local government Public Health and Wellbeing Plans play an important part of the health and wellbeing strategy for Victoria.

Linked to the Victorian Public Health and Wellbeing Plan, and obliged by section 26 of the *Public Health and Wellbeing Act 2008*, Council's Municipal Public Health and Wellbeing Plan (MPHWP) outlines Council's strategy for community health and wellbeing. The *Public Health and Wellbeing Act 2008* requires that a Municipal Public Health and Wellbeing Plan includes the following:

- include an examination of data about health status and health determinants in the municipal district;
- identify goals and strategies based on available evidence for creating a local community in which people can achieve maximum health and wellbeing;
- specify measures to prevent family violence and respond to the needs of victims of family violence in the local community;
- provide for the involvement of people in the local community in the development, implementation and evaluation of the public health and wellbeing plan;
- specify how the Council will work in partnership with the Department and other agencies undertaking public health initiatives, projects and programs to accomplish the goals and strategies identified in the public health and wellbeing plan.

The Municipal Public Health and Wellbeing Plan must-

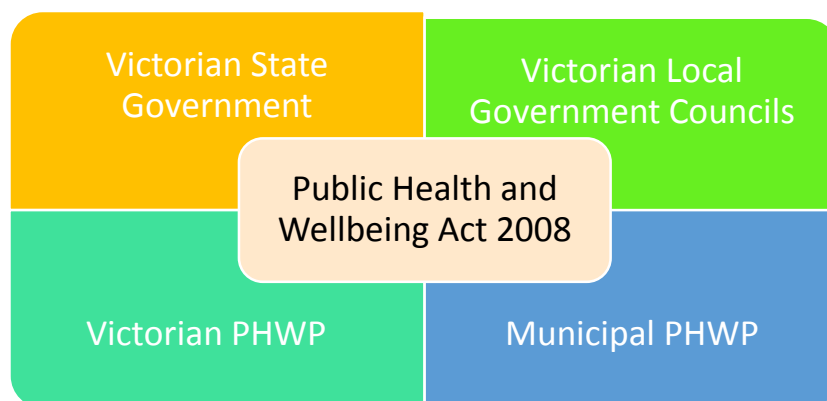
- be consistent with the Council Plan;
- be consistent with the municipal strategic statement prepared under section 12A of the Planning and Environment Act 1987;
- consider the Victorian Public Health and Wellbeing Plan;
- be evaluated annually.

Embracing the challenge to create significant health and wellness policy in the face of competing priorities coupled with diminishing fiscal resources, West Wimmera Shire Council's Municipal Public Health and Wellbeing Plan documents health and wellness priorities relevant to the local communities, Council's Plan 2017-2021 and the Victorian Public Health and Wellbeing Plan 2015-2019.



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Figure 2. Public Health and Wellbeing Plan Documents and Author Responsibility



### Victorian Public Health and Wellbeing Plan 2015-2019 Scope and Policy.

*A Victoria free of the avoidable burden of disease and injury so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age.*

*Victorian Public Health and Wellbeing Plan 2017-2019*

The Victorian Public Health and Wellbeing Plan provides guidance and direction for health and wellbeing strategies and goals necessary to achieve the Victorian health and wellbeing vision. There is a strong focus on prevention, the determinants of health and wellbeing, and whole of government approach. The complexity of health and wellness planning to effectively target health *challenges* has been partly ameliorated with strategic methods that are informed by a *life course* approach, and the alignment of health and wellness *priorities* for action and *platforms* for change with health and wellbeing *outcomes*.

There is a strengthened focus on outcomes though the monitoring of health data and health indicators. Victorian health and wellbeing strategy involves allocating defined actions to identified health and wellbeing challenges and monitoring the outcomes. Short and long-term monitoring will reveal progress towards the health and wellbeing vision. Changes in health and wellness indicators and data can demonstrate the impacts of health and wellness strategies and policy.

#### *Victorian Health and Wellbeing Challenges*

The Victorian Public Health and Wellbeing Plan acknowledges that health inequalities can result from other life inequalities or, they can lead to other life inequalities. Housing, education, employment, transport and service accessibility, domestic violence and nutrition are examples of health and wellness inequities that may be experienced by people consistently or occasionally during their life. The greatest health and wellbeing improvements need to happen for those most disadvantaged.





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*The link between poor health and poverty is clear: those with the least resources suffer more from avoidable illness and reduced life expectancy, often across generations. These inequalities are particularly evident for Aboriginal Victorians. Victorian Public Health and Wellbeing Plan 2017-2019*

### *Life Course Approach*

Avoidable chronic illness and associated health inequalities must be addressed across all stages of life to facilitate lasting positive health impacts. Negative impacts accumulate and do protective factors. There are four main life stages identified by the Victorian Public Health and Wellbeing Plan.

### *Health & Wellbeing Platforms for Change*

Three unique but related platforms for change have been identified to provide affected communities with guidance as to the areas where health and wellness interventions can be targeted. Communities can prioritise health and wellness according to their specific needs, with the platforms providing a guidance framework.

### *Victorian Health & Wellbeing Priorities for Action*

The health and wellbeing priorities are prominent contributors to inequalities the most significant preventable causes of illness and poor health and wellbeing for Victorians. The priorities are identified for action, to be prioritised, as reducing the inequalities will make a positive difference to Victorian communities.

### *Health & Wellbeing Outcomes Summary*

Post 2008, the Victorian Public Health and Wellbeing Plans establish a stronger focus on outcomes, targets and accountability. The Victorian government creates health and wellness targets based on World Health Organization targets, providing real and measurable goals.

The Outcomes Framework is the long-term program that monitors changes in Victorian health and wellness data and indicators. The Outcomes Summary shows five areas or domains formed from the grouping of over 30 data national and Victorian data sources.

The outcomes have been created to allow for health and wellness changes to be monitored, and changes in health and wellness indicators to be linked to health and wellness strategies. Short term, but more importantly long-term monitoring will reveal changes in health and wellness indicator. Victorians will be able to see the changes in health and wellness brought about by health and wellness strategy, policy and actions.





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Figure 3. Victorian Health and Wellbeing Priorities and Outcomes

Health and Wellbeing Challenges	Life Course Approach	Health and Wellbeing Platforms	Health and Wellbeing Priorities	Health and Wellbeing Outcomes Summary
<ul style="list-style-type: none"><li>• Increases in some risks to health and only limited or no improvement in others</li><li>• Increasing impact of chronic disease</li><li>• Persistent inequalities in health status</li><li>• Demographic trends require new approaches</li><li>• Environmental sustainability and health protection</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Starting well</li><li><input type="checkbox"/> Resilience in adolescence and youth</li><li><input type="checkbox"/> Healthy adulthood</li><li><input type="checkbox"/> Active and healthy aging</li></ul>	<ul style="list-style-type: none"><li>• Healthy and sustainable environments</li><li>• Place-based approaches</li><li>• Person-centred approaches</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Healthier eating and active living</li><li><input type="checkbox"/> Tobacco-free living</li><li><input type="checkbox"/> Reducing harmful alcohol and drug use</li><li><input type="checkbox"/> Improving mental health</li><li><input type="checkbox"/> Preventing violence and injury</li><li><input type="checkbox"/> Improving sexual and reproductive health</li></ul>	<ul style="list-style-type: none"><li><input type="checkbox"/> Victorians are healthy and well</li><li><input type="checkbox"/> Victorians are safe and secure</li><li><input type="checkbox"/> Victorians have the capabilities to participate</li><li><input type="checkbox"/> Victorians are connected to culture and community</li><li><input type="checkbox"/> Victoria is liveable</li></ul>



## WEST WIMMERA SHIRE COUNCIL

### What is Council's Role in Health and Wellbeing?

Council has direct and indirect roles and responsibilities for health and wellbeing *protection, prevention and promotion*. The *Public Health and Wellbeing Act 2008* states that Council must seek to protect, improve and promote public health and wellbeing in the municipality by:

- creating an environment which supports the health of members of the local community and strengthens the capacity of the community and individuals to achieve better health;
- initiating, supporting and managing public health planning processes at the local government level;
- developing and implementing public health policies and programs within the municipal district;
- developing and enforcing up-to-date public health standards and intervening if the health of people within the municipal district is affected;
- facilitating and supporting local agencies whose work has an impact on public health and wellbeing to improve public health and wellbeing in the local community;
- co-ordinating and providing immunisation services to children living or being educated within the municipal district;
- ensuring that the municipal district is maintained in a clean and sanitary condition

### Linking MPHWP with Council's Other Plans

When creating Municipal Public Health and Wellbeing Plans Council needs to link the plan to other Council plans.

*Maintaining or improving the total quality of life for the residents of West Wimmera.*  
*WWSC Council Plan 2017-2021*

West Wimmera Shire Council's Strategic Objectives are centred around community, recognising that the strength of the community relies on the health and wellness of individuals, and that improvements for the community can affect positive change for the region.

By focusing on improving the quality of life for the residents of the community the Council Plan is linked to the Municipal Public Health and Wellbeing Plan. Inequalities of health can result from or lead to other inequalities. Remote settings exacerbate other health indicators, and this is the reality for the communities of West Wimmera Shire.

Current demographics and population projections reveal the region's population decline and the changing demographic profile (Appendix 2 & 3). WWS Council Plan ensures population growth is at the centre of the long-term strategies across Council.

Through the development of the West Wimmera Shire Council Plan 2017-2021 the West Wimmera Shire Council has identified strategic priorities for the community.



## WEST WIMMERA SHIRE COUNCIL

**Table 1. West Wimmera Shire Council Strategic Objectives from *West Wimmera Shire Council Plan 2017-2021***

**West Wimmera Shire Council Strategic Objectives from *West Wimmera Shire Council Plan 2017-2021***

A proactive, well governed, professional and financially sustainable organisation that encourages community participation.

Meaningful partnerships to support advocacy priorities and service provision.

Quality sustainable community services and infrastructure.

Building on our agricultural and business strengths and supporting economic development.

Thriving, safe and diverse local communities.

Participating in activities that address health and wellbeing issues.

Providing access to and promoting the natural environment.

West Wimmera Shire Council Municipal Public Health and Wellbeing Plan links to a range of strategic plans, internally and with partnership stakeholders.

***West Wimmera Shire Council Plans Linked to MPHWP***

Domestic Waste Water Plan

Domestic Animal Management Plan 2017-2021

Economic Development Action Plan 2016-2018

Economic Development Strategy

Emergency Management Plan

Municipal Public Health and Wellbeing Plan 2013-2017

Recreational Trails Strategy

Social Infrastructure Study – Aspley Edenhope

Social Infrastructure Study – Goroke Harrow

Social Infrastructure Study – Kaniva District

Early Years Plan – **expired\***

Improved Liveability of Older People – **expired\***

Youth Services Plan – **expired\***

Home and Community Care Common Standards Improvement Plan

West Wimmera Shire Council & Edenhope Hospital Active Service Model

Wimmera Primary Care Partnership Strategic Plan 2017-2021

\*As Council plans become updated and developed they can be linked to the MPHWP and the MPHWP can identify them during annual review.



## WEST WIMMERA SHIRE COUNCIL

### Health and Climate Adaptation

Victorian communities will experience climate change in many ways. Directly through the changing frequency and severity of weather events. This will include changes in rainfall patterns and amounts, increased frequency and intensity of summer heat waves, increased frequency and intensity of bushfires, changes in seasonal patterns of temperature and rainfall, and changes in flood and storm patterns and intensity. Indirectly as the built and natural environment reacts and responds to the changing weather patterns and climate. This includes as examples, increased rates and changing locales of vector born illness, increased heat-stress for vulnerable populations, increased pressure on energy infrastructure, planning and development challenges for coastal and inland water regions.

Two local examples include:

- the aging WWSC population is at risk of heat-stress
- the WWSC environment and population will be affected by the changing frequency and intensity of bushfire, drought and flood

The community impact of climate change requires local climate action from Councils to ensure local services for infrastructure, development and planning, public and environmental health can meet the changing demands.

WWSC incorporates climate adaptation strategies into local area policies and planning. For example, the Emergency Management Plan reflects climate adaptation strategies as part of the processes around emergencies including bushfires and floods. The Mosquito Control Program in partnership with DHHS is an example of a proactive partnership response to an increased risk - the increased risk of mosquito borne illness.

### Addressing Domestic Violence in Our Communities

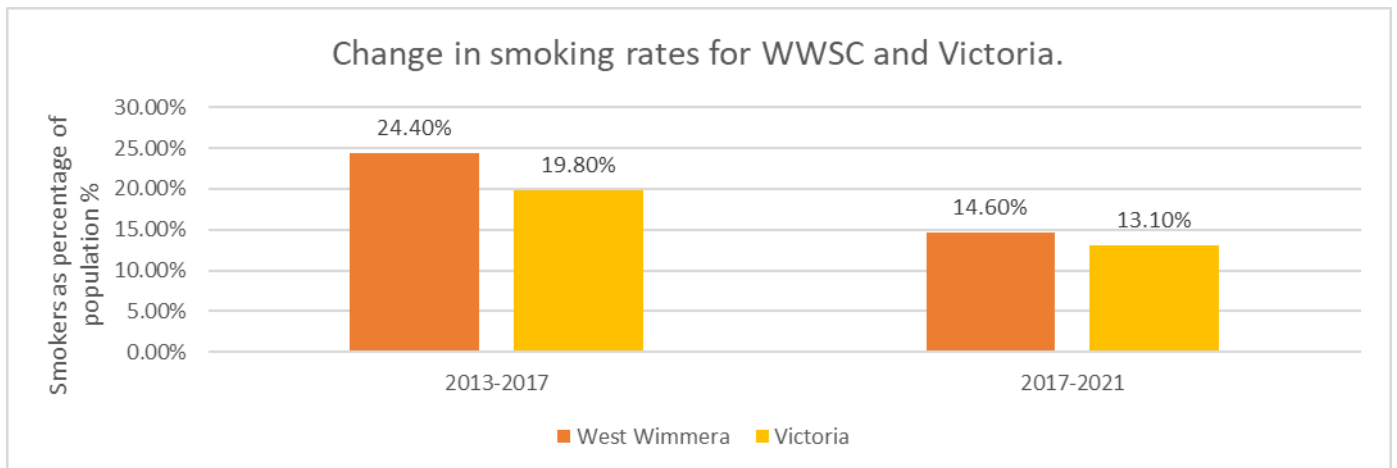
Recommendation 94 from the Royal Commission into Family Violence Report, states that councils "report on the measures they propose to take to reduce family violence and respond to the needs of victims". Family violence and municipal public health and wellbeing planning guide from DHHS identify several ways in which Council can proactively address family violence:

- local leadership
- planning
- developing facilities and creating safe public environments
- service provision and
- as an employer and procurer.

West Wimmera Shire Council is including family violence leave as a standard entitlement for Council employees. As council focuses on implementing actions to secure the future of West Wimmera Shire Council will look for opportunities to continue addressing family violence in our community.



## WEST WIMMERA SHIRE COUNCIL



### Evaluation and Recommendations from Previous Municipal Public Health and Wellbeing Plan.

Addressing preventable disease continues to be a priority for all Australian and the community of West Wimmera Shire is no exception. These health and wellbeing objectives are enduring and to effect positive change can take many years. As such relevant health and wellbeing priorities from the 2013-2017 MPHWP have been refined and continued into the 2017-2021 MPHWP.

Health care partnerships are vital to facilitate and continue health and wellbeing services in West Wimmera Shire, and the region's reliance on these health care partnerships for public health and wellbeing change and security continues to be reflected in the 2017-2021 MPHWP.

Economic stimulus and population growth persist as prevailing issues for the region identified in key Council documents including the Council Plan 2017-2021. This is maintained in the 2017-2021 MPHWP.

The strategies from West Wimmera Shire Council Municipal Public Health and Wellbeing Plan 2013-2017 have been evaluated (Appendix 1). Activities have been achieved in areas of core business. Some of the strategies to effect change for community health and wellbeing have been difficult to measure. Measurable outcomes are important to indicate change. The Victorian government has identified that measurability is an important quality of MPHWP. As such the 2017-2021 MPHWP has included more measurable actions.

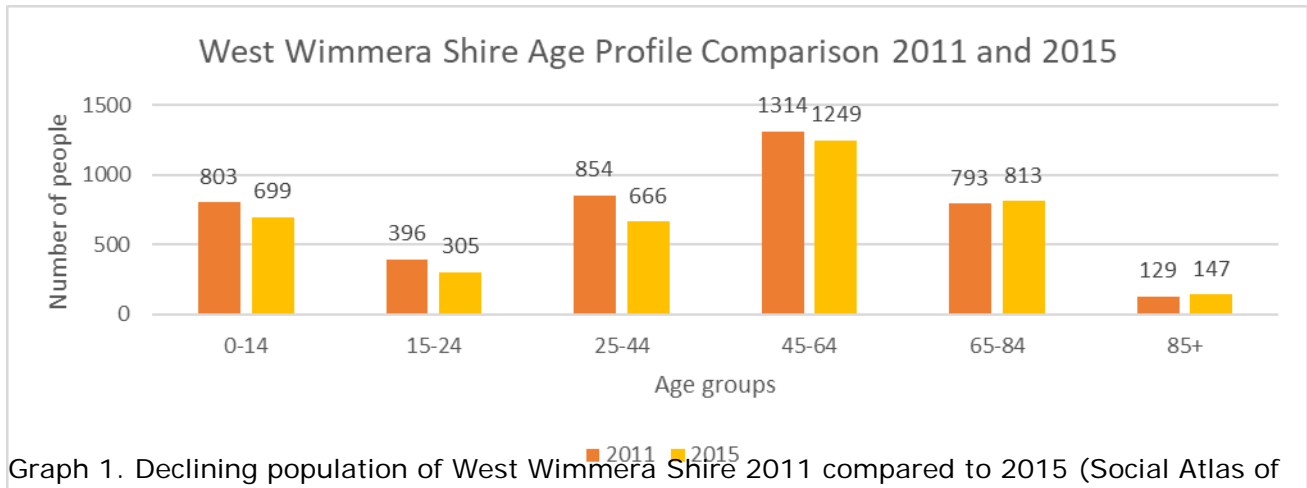
### Health data then and now

Health data included in WWSC MPHWP 2013-2017 has been compared to health data included in WWSC MPHWP 2017-2021. It is possible to note some changes in community health and wellness indicators.

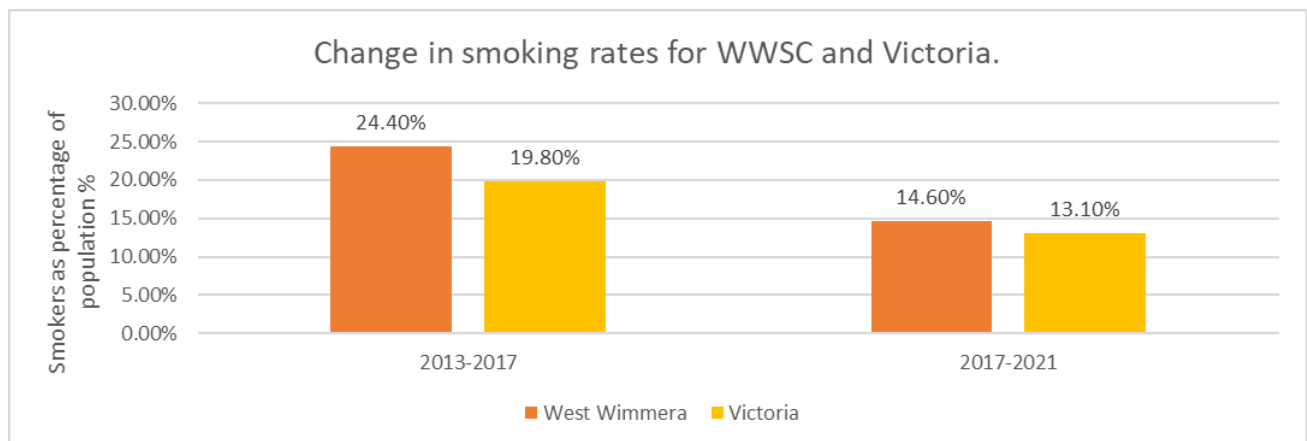
It is predicted that the WWSC population is in decline and the population data supports this. The WWSC population has declined by six and a half percent between 2011 and 2015.



## WEST WIMMERA SHIRE COUNCIL



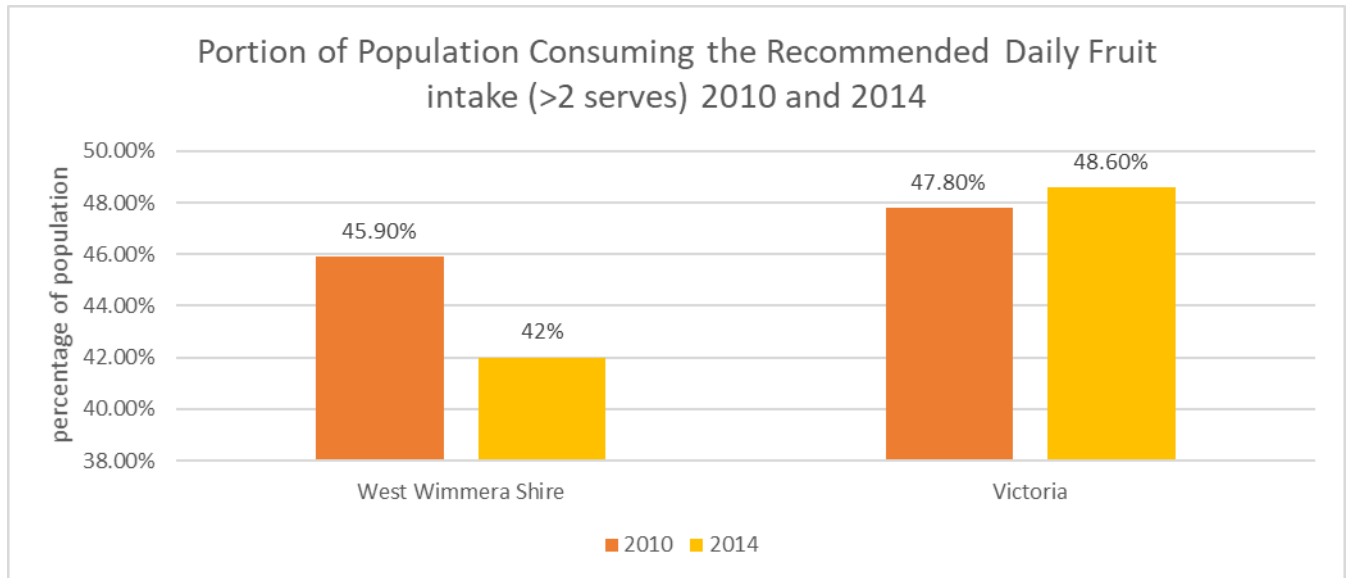
The decline in smoking rates for the WWS community is a positive change. The percentage of the WWS community identifying as smokers has decreased since the last MPHWP, from 24.4% to 14.6%.



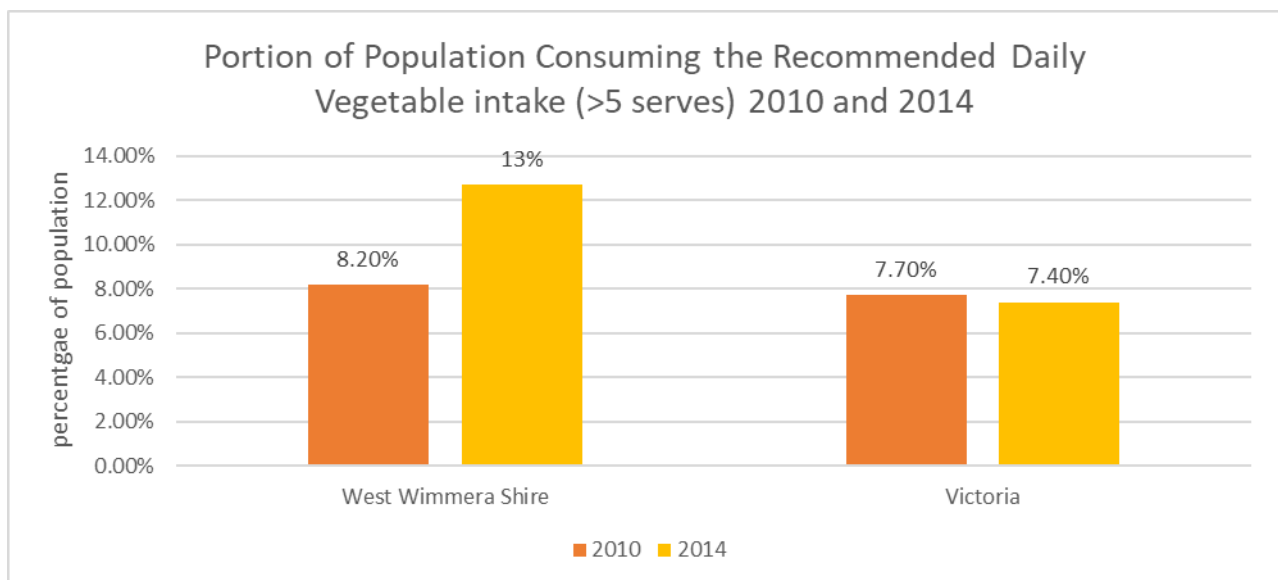
Dietary changes in the WWS community since the last MPHWP have seen a decrease in the percentage of the WWSC population consuming the recommended daily intake of fruit (>2 serves), and an increase in the percentage of the population consuming the recommended daily intake of vegetables (>5 serves).



## WEST WIMMERA SHIRE COUNCIL



Graph 3. Decline in fruit consumption for West Wimmera Shire population compared to 2010 (West Wimmera PCP Health Profile).



Graph 4. Increase in vegetable consumption for West Wimmera Shire population compared to 2010 (West Wimmera PCP Health Profile).

Although there is a greater portion of the WWS community, compared to the Victorian average, that consumes the recommended daily intake of vegetables, eighty-seven percent (87%) of the WWS community *does not* consume the recommended serves of vegetables. Nearly fifty-three percent (53%) of the WWS community consumes less than the daily 2 serves of fruit.

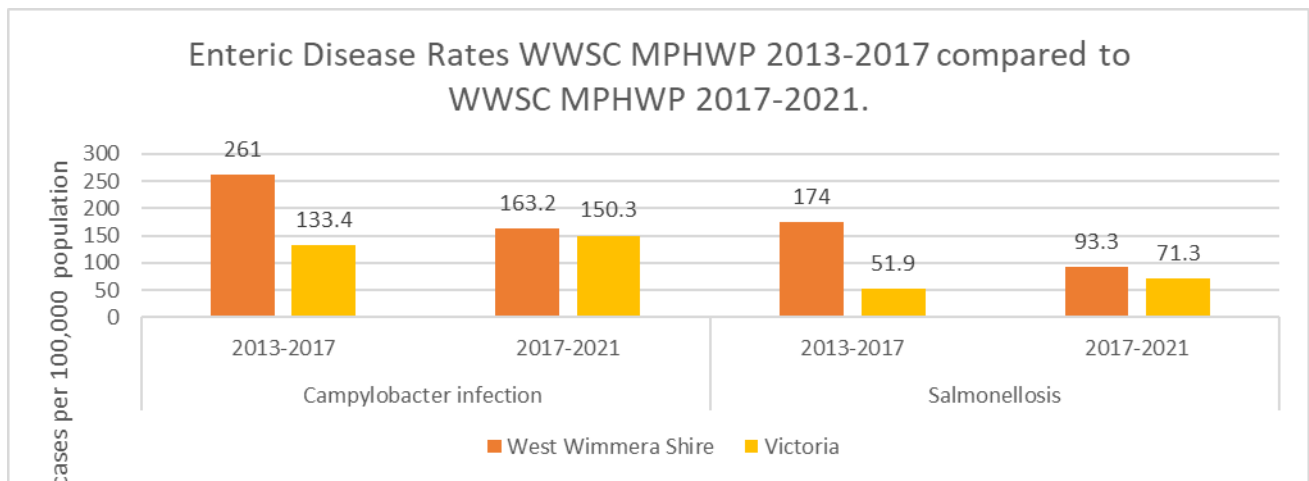




## WEST WIMMERA SHIRE COUNCIL

Victorian overweight and obesity rates are increasing, consistent with Australian and global western trends. WWS community is also seeing an increase in overweight and obesity rates. WWS males have seen a slight decrease in obesity but an increase in the percentage of overweight population. WWS females have seen an increase in obesity rates. (Graph 5 next page).

Rates of enteric disease in WWS are greater than the Victorian average. The rates of WWS enteric illness were greater in 2011-2012 than they were for 2015-2016. (Graph 6).



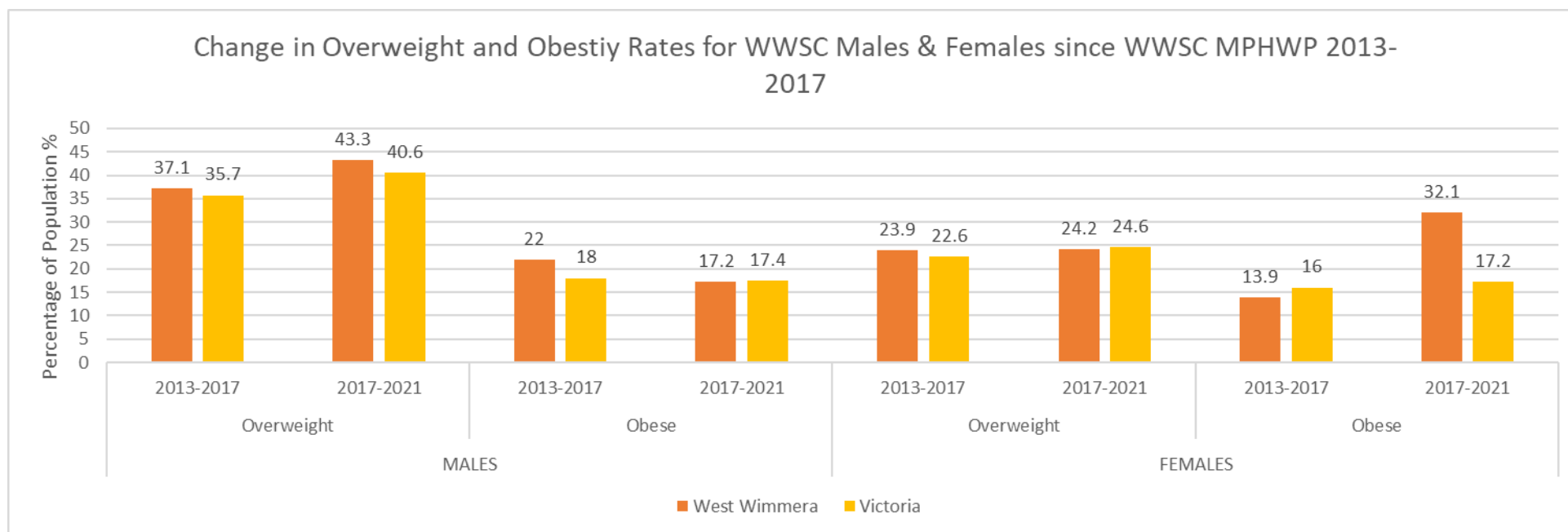
Graph 6. Comparison of enteric disease rates (West Wimmera PCP Health Profile).



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Graph 5. Change in Male and Female Overweight and Obesity

Rates WWSC MPHWP 2013-2017 data compared to WWSC MPHWP 2017-2021 data.





## WEST WIMMERA SHIRE COUNCIL

### Preparing West Wimmera Shire Council's Municipal Public Health and Wellbeing Plan

In addition to the recommendations from the previous MPHWP, Victorian and local health and wellbeing data and community consultation are applied to the WWSC MPHWP development process.

#### *Examination of health data*

West Wimmera Shire health and wellbeing data is examined to guide the development of local health and wellbeing priorities for the duration of the WWSC MPHWP 2017-2021. As well as guiding health and wellbeing priorities the examination of health data can indicate effectiveness of health and wellness policy and action by identifying changes in data and indicators. For example, smoking rates have reduced for the WWS population since the last MPHWP (Graph 2, previous page).

#### *Community engagement*

For the 2017-2021 MPHWP West Wimmera Shire Council sought to engage the community via anonymous survey. Survey sheets were mailed to West Wimmera residents/ ratepayers, as identified by Council's database. Electronic access to the survey was made available through Council's website. The survey was available during April and May 2017.

One hundred and ten (110) people responded to Council's survey. Twenty respondents utilised the electronic access for the survey, available on Council's website. The remainder chose the hard copy survey and returned the completed survey to a designated survey collection point in the West Wimmera community. Most respondents were female (70%). Half of the respondents were aged 65-84 years (51%) (Appendix 3. Graphs 1 & 2).

The respondents were asked to rank public health and wellbeing issues in order of importance. Analysis of 110 survey results identified the following order of importance, from most important to least important, of public health and wellbeing issues. (Appendix 3. Graph 3).

Table 3. Ranking of public health and wellbeing issues from community survey (Appendix 3. Graph 3)

#### **Public health and wellbeing priorities from community survey**

Most important	1. Healthier Eating and Active Living
	2. Improving Mental Health
	3. Reducing Harmful Alcohol and Drug Use
	4. Preventing Violence and Injury
	5. Tobacco Free Living
Least Important	6. Improving Sexual and Reproductive Health

Just over a quarter (27.52%) of respondents stated they felt '*informed*' or '*very informed*' about Council's public health and wellbeing programs, leaving nearly three quarters (72.48%) of respondents feeling '*somewhat informed*' or '*less*' (Appendix 3. Graph 4.).



## WEST WIMMERA SHIRE COUNCIL

Less than a quarter of respondents (21%) felt that Council was 'very' or 'extremely effective' at addressing public health and wellbeing issues at the local level, with nearly eighty percent (80%) of respondents feeling that Council was 'somewhat effective' or less (Appendix 3. Graph 5).

Forty-nine (49) respondents provided comments to the comment question: "*Do you have any comments or suggestions about public health and wellbeing at the local government level that you would like to share with West Wimmera Shire Council?*".

Just over a quarter of the comments (26%) were about Council's communication and broader engagement. Generally, respondents identified communication about Council's public health and wellbeing responsibilities as an area for improvement (Appendix 4. Graph 6).

Respondents commented on aging population, healthy eating and physical activity, and mental health as important issues for Council. Some respondents suggested increased individual ownership of preventable risk factors (e.g. obesity) was needed.

### West Wimmera Shire Council Region

#### *West Wimmera Shire Locality*

West Wimmera Shire is situated along the Victoria - South Australia border is truly the "Land of Diversity" - diversity of land use and suitability, business enterprise opportunities, climatic conditions and country lifestyle, as well as the 21st century technology opportunities available to people and businesses in metropolitan and regional cities.

Noted for its natural attractions and many unique and exciting country events West Wimmera Shire boasts generous open spaces, low density housing, complemented by significant natural vegetation and a number of lakes including Lake Wallace in Edenhope.

We offer some of the most envied qualities of rural living in Australia - space, freedom, climate and opportunity with some of the best farmland in the state.

Our Shire is approximately 9,108 square kilometres with a population of 3,897 (2015, Appendix 3). It is centrally located in the South Eastern Australian "food bowl" between Melbourne and Adelaide and stretches along the Victorian and South Australian borders from the Big Desert in the North to Chetwynd in the South.

The main townships are Edenhope and Kaniva with smaller rural areas including Harrow, Gorokey, Serviceton, Dergholm and Apsley.

Along with all areas of Australia, the Wimmera is experiencing climatic changes. This is showing an ongoing increase in average temperature, with more days over 30 degrees Celsius in the summer months. Evidence is predicting a declining rainfall and that rain that is expected will fall in heavier downfalls bringing with it higher chances of flash flooding.



## WEST WIMMERA SHIRE COUNCIL

### West Wimmera Shire Health Services

#### *Health Partnership*

The partnership and collaboration between WWSC and Wimmera Primary Care Partnership (PCP) is essential for the health and wellbeing outcomes for the region.

The Wimmera Primary Care Partnership is made up of twenty-seven member agencies, including local government, welfare, disability, primary health care, health services, social services and education. We have four health services spread over fourteen campuses and two bush nursing centres. The Wimmera Primary Care Partnership region covers some 28,041 square kilometres and services a population of 38,375 including the Local Government Areas of West Wimmera, Yarriambiack, Hindmarsh and Horsham Rural City. (Wimmera PCP, 2017).

#### *Health services*

Kaniva is serviced by *West Wimmera Health Service (WWHS)*, and has a hospital and associated services, and ancillary services visiting from Nhill (WWHS's headquarters). Obstetrics services are provided at Nhill, as are a limited number of visiting specialists.

Kaniva has a Doctors surgery and a pharmacy within the township, but no dentist. The nearest public dentist is within the townships of Nhill or Bordertown.

Edenhope is serviced by the *Edenhope & District Memorial Hospital*, which provides Accident & Emergency, Acute Care, Surgery, Aged Care and a range of Community Health and support services.

Kaniva & Edenhope operate 24 hrs Ambulance branches. These are run by professional paramedics who are supported by volunteer community officers (ACO's). These branches provide service to the whole of West Wimmera Shire.

Prenatal and postnatal care is provided at hospital, with no maternity services available at the hospital but Maternal and Child Health Services through the Shire are available. This also impacts on the accuracy of population figures between census dates, due to the morbidity outside of our shire and the reporting practices. Edenhope is serviced by a Doctors surgery and a pharmacy, as well as a dentist that services both private and public patients

*Goroke Community Health Centre* serves the small community of Goroke, and is part of the West Wimmera Health Service. Doctor's visit twice a week from other nearby towns, and a wide variety of other services are provided at set intervals.

*Harrow Bush Nursing Centre* provides district nursing, accident & emergency nursing, visiting GP services and other ancillary services at set intervals.

The Harrow Bush Nursing Centre also encourages other activities which impact the health and wellbeing of the community eg. Book Club, Men's Shed, Neighbourhood House, Kinder Gym, Line Dancing, Singing Group



## WEST WIMMERA SHIRE COUNCIL

### *External Health Services*

Community members may have to make appointments to Horsham, Ballarat, Mt Gambier (SA), as well as Melbourne or Adelaide to see specialists. This has been an ongoing concern from members through-out the Shire. This can be difficult for those unable to drive, but services are available to assist with this, such as the community car service.

### *Maternal & Child Health*

The Shire has a highly dedicated maternal and child health nurse who provides a service to new mothers, including regular health checks for babies and small children, home visits where required, immunisation, referral to other services such as postnatal depression groups, and a listening professional ear. The dedication of the maternal and child health nurse sees the West Wimmera have high immunisation rates throughout the shire.

### *Home & Community Care*

Home and Community Care (HACC) is provided through both the Shire and local health services, providing assistance to the frail aged and other people with disabilities in their homes. Meals on Wheels are provided as part of this service.

### *Men's Shed*

Council supports the ongoing work of the Men's Sheds with there being four groups within the Shire at Edenhope, Kaniva, Goroke and Harrow. Providing men in the shire a place to get together and work on projects with there being opportunity to discuss men's health issues at these informal gatherings as well.

## **The People of West Wimmera Shire Community**

West Wimmera Shire has a declining, aging and homogenous community profile (Social Health Atlas 2016 and ABS 2011).

Nearly a third of the population is 65 or older. People aged 45-64 currently make up forty-seven percent (47%) of the population. In twenty years this group will add to the 65+ group.

89.4% of the West Wimmera Shire Community is Australian born (Social Health Atlas 2016).

Less than 1% of the population identify as Indigenous (Social Health Atlas 2016).

## **The Health and Wellbeing of West Wimmera Shire People**

In the health and wellbeing sphere there are areas where the West Wimmera Shire community are doing just as good or better than the Victorian averages and rates, and there are areas that need addressing.

Daily consumption of vegetables by the WWSC community is below the daily recommended intake (>5 serves) for eighty-three percent (83%) of the population (Appendix 2. Graph 10). The portion of the WWS community consuming the recommended daily intake of vegetables has increased since the last WWSC MPHWP, from 8.2% to 12.7% (Appendix 2. Graph 10).





## WEST WIMMERA SHIRE COUNCIL

Daily consumption of fruit is below the daily recommended intake (>2 serves) for more than half (58%) of the WWS population (Appendix 3. Graph 11). This figure has changed slightly since the last WWSC MPHWP 2013-2017 when it was 54.1% of the community not eating the recommended daily serves of fruit (Appendix 2. Graph 11).

The percentage of the WWSC community that consume sugar sweetened drinks daily is slightly higher than the Victorian average (12.6% to 11.2%) (Appendix 3. Graph 15). The amount of soft drink consumed by WWS 'soft-drink drinkers' is less than the Victorian average at 567mL and is also the lowest in the region. (Appendix 2 Graph 16). WWS population average daily water consumption exceeds Victorian average, 1.38L compared to 1.25L (Appendix 2. Graph 17).

Over sixty percent (60%) of the WWS community is overweight or obese (Appendix 2. Graphs 13 & 14) and rates have increased since the writing of the WWSC MPHWP 2013-2017 (Appendix 2. Graph 4).

The people of WWSC have jobs that are less likely to be sedentary than Victorians (Appendix 3 Graph 20.). The WWS population is more likely to sit for longer periods (> 8 hours) during weekdays rather than weekends (Appendix 2. Graphs 18 & 19).

WWSC population has a slightly higher rate of smokers than the Victorian average, fourteen percent (14.6%) compared with thirteen percent (13.1%). (Appendix 2. Graph 12). The smoking rate for the WWS population has reduced since the writing of the WWSC MPHWP 2013-2017, falling from twenty-four percent (24.4%) to fourteen percent (14.6%) (Appendix 2. Graph 2).

Rates of high cholesterol and high blood pressure are higher in WWS population than the Victorian (Appendix 2. Graph 22.). 36.3% of WWS population have high cholesterol compared to 33.4% Victorians, and 30% high blood pressure compared to 25.9% for Victorians (Appendix 2. Graph 22.)

It is a similar situation for lifetime heart disease and stroke risk (Appendix 2. Graph 23). WWS population had a lifetime risk of 7.4 and 3.3 for heart disease and stroke, compared to Victorian population rates of 7 and 2.4 (Appendix 3. Graph 23).

Preventable mortality rates are higher for the WWS community compared to Victoria in the areas of cancer, lung cancer, respiratory disease, heart disease and circulatory disease (Appendix 2. Graph 21).

Hospital admissions are greater for the WWS community compared to Victoria (Appendix 2. Graph 30). And self-reported health status is lower for West Wimmera people compared to Victoria and the regional rates (Appendix 2. Graph 29). The same is true for self-reported dental health status (Appendix 2. Graph 24.)

Alcohol consumption is having an impact on the WWS community, with both short term and Lifetime risk of alcohol related harm affecting a greater proportion of the WWS than the Victorian community. The increased rates of alcohol related harm in the WWS community is one of the greatest in the region (Appendix 2. Graphs 26 & 27)

Fewer West Wimmera Shire residents report high or very high levels of psychological stress compared to Victoria, 9.4% compared to 12.6% (Appendix 2. Graph 34) though the lifetime





## WEST WIMMERA SHIRE COUNCIL

prevalence rates for anxiety and depression are greater in west Wimmera than Victoria. West Wimmera females are 20 per cent more likely to experience anxiety and depression than Victorian females. Compared to their male counterparts West Wimmera females are more than twice as likely to experience anxiety and depression (Appendix 2. Graph 35.).

West Wimmera does immunisation well and has some of the highest rates of immunisation in the country.

Table 5. Childhood immunisation rates 2014-2015. West Wimmera PCP Health and Wellbeing Profile 2016.

### **Children fully immunised (2014-15)**

	<b>12 -&lt;15 months</b>		<b>24 -&lt;27 months</b>		<b>60-&lt;63 months</b>	
<i>West Wimmera</i>	45	95.70%	41	100.00%	47	97.90%
<b>Victoria</b>	<b>69,386</b>	<b>91.20%</b>	<b>68,893</b>	<b>89.60%</b>	<b>70,418</b>	<b>92.60%</b>

Table 6. HPV immunisation rates 2014, females 12-13 years. West Wimmera PCP Health and Wellbeing Profile 2016.

### **Children fully immunised 2014**

<b>Location</b>	<b>No.</b>	<b>%</b>
<i>West Wimmera</i>	61	95.10%
<b>Victoria</b>	<b>49,891</b>	<b>78.30%</b>

Most people in WWS do not live in close proximity to public transport services (Appendix 2. Graph 33). And 28%b of the community have experienced transport difficulties at least annually (Appendix 2 Graph 32.). WWS community members are more likely to live alone compared to Victorians (Table 4)

Table 4. Lone households in West Wimmera Shire, surrounding regions and Victoria. 2011. West Wimmera PCP Health and Wellbeing Profile 2016.

### **Proportion of lone person households (2011)**

	<b>Number</b>	<b>% of all occupied dwellings</b>
<i>Hindmarsh</i>	741	13.90%
<i>Horsham</i>	2,269	12.60%
<i>West Wimmera</i>	571	14.50%
<i>Yarriambiack</i>	936	14.50%
<b>Victoria</b>	<b>476,872</b>	<b>9.60%</b>



## WEST WIMMERA SHIRE COUNCIL

Despite the transport challenges the community has some of the highest rates of volunteer and community participation (Table 7) in the state. And perhaps because of the transport challenges and community participation rates, nearly three quarters of West Wimmera residents report being able to rely on their neighbour for help when they need it (Appendix 2 Graph 31).

Table 7. Community participation indicators (2011-12). West Wimmera PCP Health and Wellbeing Profile 2016.

<i>Type of participation</i>	<b>West Wimmera</b>	<b>Victoria</b>	<b>Hindmarsh</b>	<b>Horsham RC</b>	<b>Yarriambiack</b>
<i>Attended a local community event in last 6 months</i>	85.6	<b>55.3</b>	78.8	68.7	79.8
<i>Member of sports group</i>	43.8	<b>26.5</b>	41.8	42	43.8
<i>Member of religious group</i>	21.2	<b>18</b>	26.4	22.4	24.1
<i>Member of school group</i>	25.5	<b>12.5</b>	14.2	12.1	18.6
<i>Member of professional group</i>	19.7	<b>24</b>	9.8	15.1	28.1
<i>Member of other community/action group</i>	40.8	<b>18.7</b>	34.2	34	35.9
<i>Member of organised groups that has taken local action</i>	47.9	<b>25.8</b>	42.4	46.8	56.6
<i>Volunteers (once a month or more)</i>	62.3	<b>33.9</b>	49.9	51.2	51.8
<i>Actively involved in children's school</i>	22.1	<b>14.2</b>	17.5	14.1	19.5
<i>On decision making board or committee</i>	38.4	<b>17.8</b>	28	22.3	34.8
<i>Feels valued by society (yes, definitely response)</i>	60.5	<b>52.6</b>	62.2	64.4	56.9



## WEST WIMMERA SHIRE COUNCIL

### Priority Settings for Action for West Wimmera Shire Council

#### Health & Wellness Priority 1

##### HEALTHY LIVING

###### Reasoning

This priority focuses on health eating and active lifestyles.

More than half of West Wimmera Shire community are not consuming the recommended daily intake of fruit and vegetables.

Sedentary lifestyles are present in the community, where people sit for more than 7 hours a day.

More than 60% of the West Wimmera Shire population is overweight or obese, and these rates are increasing not decreasing.

As West Wimmera Shire implements population growth strategies community infrastructure must meet the needs of current and future population number and demographic. Current trends are for an aging population but towards the second half of Target 10,000 the population bulk is projected to comprise younger adults and families.

###### Measure

Monitor levels of physical activity.  
Monitor fruit and vegetable consumption.  
Monitor overweight and obesity rates.

###### Actions

Identify regulatory and other ways Council can influence the availability of healthy food in preference to unhealthy food.

Identify healthy lifestyle education opportunities with health service partners.

Identify active living promotion opportunities with health service partnerships.

Increase social activity opportunities, structured and non-structured, in conjunction with community groups, health services, associations and schools.

All access abilities for walkways and pathways.

All-weather access for pre-schools.

###### What are we already doing?

The portion of West Wimmera Shire population consuming the recommended daily intake of vegetables has increased since the last MPHWP.

Implementing Social Infrastructure Assessment Strategies and Projects.

###### Responsibility

Councillors & Mayor

Early Years

Maternal & Child Health

Home & Community Care

Youth Services

Tourism and Communications

Parks and Gardens

Planning and Environment

###### Partnerships

DHHS

Department of Education

Wimmera PCP



## WEST WIMMERA SHIRE COUNCIL

Wimmera Health service providers

Documents

Council Plan

Economic Development Plan

Recreational Trails Strategy

Social Infrastructure Studies

Wimmera PCP Strategic Plan

draft



## WEST WIMMERA SHIRE COUNCIL

### Health & Wellness Priority 2

#### REDUCING HARM

##### Reasoning

This priority focuses on preventing harm from alcohol, tobacco and other drugs, family violence.

Family violence is a Victorian priority, identified for action at all levels of government. West Wimmera Shire, like the rest of the country has family violence levels that are too high.

Alcohol is impacting the health of over 60% of the West Wimmera community, with this group having increased lifetime risks of alcohol related harm.

West Wimmera has a smoking population higher than Victoria, though this has dropped since the last MPHWP.

##### Measure

Monitor risk levels due to alcohol consumption.

##### Actions

Support family violence awareness and reduction programs offered by health partnerships and community partnerships.

Identify opportunities for Council to address family violence and support family violence victims with a range of partnerships.

Identify opportunities to increase access to mental health services, in person and online.

Support businesses and the community to comply with new smoking laws.

##### What are we already doing?

The portion of West Wimmera Shire population identifying as smokers has reduced since the last MPHWP.

Conducting tobacco seller inspections.

Support and promote existing alcohol and drug support services.

Family violence leave as a standard entitlement for Council employees.

Support counselling services at schools.

##### Responsibility

Councillors & Mayor

Environmental Health Services

Early Years

Maternal & Child Health

Home & Community Care

Youth Services

Community Support

##### Partnerships

DHHS

Wimmera PCP

Wimmera Health service providers

Department of education

Community groups

##### Documents

Council Plan

Wimmera PCP Strategic Plan

Family violence and Municipal Public Health and Wellbeing Planning Guidance for Local Government



## WEST WIMMERA SHIRE COUNCIL

### Health & Wellness Priority 3

#### INCLUSIVE AND SUPPORTIVE COMMUNITIES

##### Reasoning

This priority focuses on supporting mental health services, community participation and sense of community and diversity.

Living regionally limits opportunities to access mental health support services. West Wimmera Shire community has greater lifetime prevalence of anxiety and depression compared to Victoria. West Wimmera Shire females are more than twice as likely to experience anxiety and depression than their male counterparts.

West Wimmera Shire residents have transport barriers especially for public transport. Despite this the community has some of the state's highest rates of volunteering and community participation.

As population targets are realised it will be important to ensure community participation rates continue and new community members are supported to contribute.

Population growth will also introduce new cultures and lifestyles to the historically homogenous community profile. Diversity planning should continue to be a priority for the area.

West Wimmera is at risk of emergency events due to weather events. Access to mental health services are an important part of community recovery. Community support and volunteering is also important to managing emergencies and facilitating recovery.

##### Measure

Monitor volunteer and community participation.

Monitor mental health support service access rates.

Monitor mental health prevalence rates.

Monitor community demographic profile.

##### Actions

Identify opportunities to increase access to mental health support services for at risk groups, in person and online.

##### What are we already doing?

An existing culture of neighbourhood support with nearly three quarters of West Wimmera residents reporting they can rely on their neighbour if they needed help.

Support and promote existing mental health support services. e.g. Talk to a mate and Mental Health First Aid program, Uniting Care Rural and Remote Officer.

Diversity planning.

High volunteer and community participation rates.

##### Responsibility

Councillors & Mayor

Environmental Health Services

Early Years

Maternal & Child Health

Home & Community Care

Youth Services

Community Support



## WEST WIMMERA SHIRE COUNCIL

### Partnerships

DHHS

Department of education

Wimmera PCP

Wimmera Health service providers

Emergency Services

### Documents

Council Plan

Wimmera PCP Strategic Plan

Emergency Management Plan

West Wimmera Shire Council – Diversity Planning

Home and Community Care Diversity planning and Practice Implementation Review

Edenhope Hospital and WWSC Shared Active Service Plan





## WEST WIMMERA SHIRE COUNCIL

### Health & Wellness Priority 4

#### PARTNERSHIPS IN HEALTH

##### Reasoning

This priority focuses on implementing and developing health and wellbeing partnerships.

Faced with current and forecasted population decline and fiscal resource constraints West Wimmera relies on partnerships to achieve health and wellbeing goals. Collaborative health partnerships achieve outcomes for the community by sharing skills and knowledge and pooling resources to focus on joint outcomes and to eliminate duplication.

##### Measure

Monitor a broad range of health and wellbeing indicators.

##### Actions

Support existing and emerging health and wellbeing programs provided by our health and wellbeing partners.

Identify new health and wellbeing initiatives with our health and wellbeing partners.

Identify potential new health and wellbeing partnerships.

##### What are we already doing?

Supporting and promoting existing health and wellbeing programs provided by our health and wellbeing partners.

Active in health and wellbeing partnerships. e.g. HACC and Wimmera PCP shared indicators workshops.

##### Responsibility

Councillors & Mayor

Environmental Health Services

Early Years

Maternal & Child Health

Home & Community Care

Youth Services

Project and Contract Management

##### Partnerships

DHHS

Wimmera PCP

Wimmera Health Service Providers

##### Documents

Council Plan

Wimmera PCP Strategic Plan

Wimmera PCP Improved Service Plan

Edenhope Hospital and WWSC Shared Active Service Plan



## WEST WIMMERA SHIRE COUNCIL

### Health & Wellness Priority 5

#### HEALTHY ENVIRONMENTS

##### Reasoning

This priority focuses on protecting the community from communicable disease, public health risks and environmental harm.

Climate change impacts include increased risk from vector borne communicable disease. Climate change may also change season patterns and trends potentially influencing outbreak patterns for communicable diseases that have seasonal spikes.

Maintaining immunisation rates alongside incremental population growth will require planning.

Confidence that healthy environments are inspected and maintained by Council is important for community satisfaction and population growth projects.

As population grows and density changes in residential areas the incidence of public health nuisance and environmental nuisance may increase.

##### Measure

Completion of statutory tasks in required timeframes.

Implementation of programs.

##### Actions

Planning for increased statutory tasks as population increases.

Planning for increased nuisance management as population increases.

Planning for communicable disease management as climate change impacts are realised.

##### What are we already doing?

Manage and implement immunisation program, and track immunisation rates. Immunisation rates for West Wimmera Shire community are some of the highest in the nation.

Investigation and remedy of nuisance and pollution, food borne outbreaks and food complaints.

Educating the community about vector borne illness, food safety during emergency and recovery.

Food and water sampling.

Inspect and register public health risk premises, cooling towers and accommodation, and fixed, mobile and temporary food premises.

Implementation of domestic waste water management program.

Implementation of Mosquito Management Program.

##### Responsibility

Councillors & Mayor

Environmental Health Services

Local Laws

Planning and Environment

Early Years

Maternal & Child Health

Economic & Business Development

Emergency Management



## WEST WIMMERA SHIRE COUNCIL

### Partnerships

DHHS

EPA

### Documents

Council Plan

Economic Development Plan

draft



### References

DHHS, Victoria - Family violence and Municipal Public Health and Wellbeing Planning Guidance for Local Government, May 2017

DHHS, Victoria - Health and wellbeing status of Victoria. Companion document PHWP 2015-2019

DHHS, Victoria – Victorian Public Health and Wellbeing Plan 2015-2019

DHHS, Victoria – Victorian Public Health and Wellbeing Outcomes Framework 2016

DHHS, Victoria – Victorian Public Health and Wellbeing Outcomes Framework Data Dictionary 2017

Edenhope Hospital and WWSC Shared Active Service Plan 2015-2016

Edenhope Hospital Diversity Plan 2015-16

Grampians Region Diversity Population Data Report 2015 – 2016

Home and Community Care (HACC) Diversity planning and Practice Implementation Review 2015

Social Health Atlas of Australia 2016, PHIDU

West Wimmera Shire Council – Council Plan 2017-2021

West Wimmera Shire Council – Diversity Planning 2015-2016

West Wimmera Shire Council - HACC Improvement Plan June 2015

West Wimmera Shire Council - Municipal Public Health and Wellbeing Plan 2013-2017

Wimmera Primary Care Partnership Population Health Profile – October 2016, Nancy Vaughan, October 2016 Wimmera Primary Care Partnership, Horsham, Victoria.

Wimmera Primary Care Partnership – Workshop 1-4.

Wimmera Primary Care Partnership [online] <http://wimmerapcp.org.au>



## WEST WIMMERA SHIRE COUNCIL

### Appendices

#### Appendix 1. Evaluation of West Wimmera Shire Council Municipal Public Health and Wellbeing Plan 2013-2017.

GOAL: Promote and Maintain Food Safety

STRATEGY	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURE AND TIMEFRAME	Evaluation
Ensure all class 1,2 and 3 food premises are inspected annually	EHO	Department of Health	Quarterly Department of Health reports Will occur annually through life of plan	Completed.
Complete required annual food sampling program	EHO	Department of Health OMIC Australia (analysis lab)	Quarterly OMIC sample statements. Will occur annually through life of plan	Completed.
Promote Department of Health Streatrader website for temporary and mobile food businesses to ensure compliance with registration	EHO	Local Business owners Community groups running markets	All mobile/temporary food businesses at events will be registered	Completed.
Promote food safety in council newsletter and social media	EHO	Health Services	Relevant article in newsletter each Spring	Completed.
Prepare a hard copy 'Emergency Food Procedures' document for times of emergency and incident management	EHO	Community food providers	To be completed before 2013/2014 summer, updated annually	Completed.



## WEST WIMMERA SHIRE COUNCIL

### GOAL: Create, Promote and Maintain Healthy Environments

STRATEGY	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURES AND TIMEFRAMES	Evaluation
Ensure all beauty, hair and accommodation premises are registered and inspected annually	EHO	Business proprietors Department of Health	Occurs annually, measured by number of inspections completed	Completed.
Ensure installation of septic tanks are in accordance with the EPA guidelines	EHO	Plumbers LCA assessors Shire Building Inspector	Ongoing, number of tanks installed	Completed.
Respond to nuisance complaints under the Public health and Wellbeing Act	EHO	Shire Communities	Complaints registered in Health manager system, occur as required	Completed.
Promote awareness of mosquitoes and the transmission of infections, by utilising shire newsletter	EHO	Health Services	Concentrate in lead up to and through summer time. Measure by evidence of promotional materials being dispersed	Completed.
Promote heatwave health to community with a target to vulnerable populations	EHO HACC	Health Services Schools Sporting Clubs Community Groups	Ongoing through hot months with review of annual heatwave plan throughout cooler months	Completed.



## WEST WIMMERA SHIRE COUNCIL

### GOAL: Promote and Encourage Healthy Eating

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURES AND TIMEFRAMES	Evaluation
Raise awareness of healthy food choices available to the community through social media	EHO	Food Businesses Supermarkets Schools	Increased consumption rates as detailed in Vic Health Population Health Survey. Yearly/ongoing	Completed.
Increase people's knowledge of preparing healthy foods	EHO	Health Services – Dietician School groups	Increased consumption rates as detailed in Vic Health Population Health Survey. Yearly/ongoing	Completed.
Council to ensure healthy meal options are available in the delivery of its Meals on Wheels program	HACC	Health Services	Health Service Dietician's accreditation. Ongoing	Completed.
Encourage schools to promote healthy eating through regular classes and other programs such as Stephanie Alexander Kitchen Garden Program	Youth Officer	Shire Schools	Increased consumption rates as detailed in Vic Health Population Health Survey. Yearly/ongoing	Completed.





## WEST WIMMERA SHIRE COUNCIL

GOAL: Increase and Strengthen Partnerships with Health Services

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURES AND TIMEFRAMES	Evakuation
Meet with Health Services to discuss shared programs and services offered to the community.	GMCCS	Health services	Twice yearly meetings to occur	Completed.



## WEST WIMMERA SHIRE COUNCIL

GOAL: Increase the Physical Activity Levels of Shire Communities

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURE AND TIMEFRAMES	Evaluation
Promote physical activities offered within the shire through use of shire newsletter	EHO	Health services Sporting Clubs	Increased participation. Measured through club and school participation numbers	Completed.
Develop and improve new and existing recreational facilities and programs	EHO	Community Groups	Evidence of further facilities, Playground Audit. Ongoing	Completed.

GOAL: Provide Tobacco Education and Surveillance

STRATEGY	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURE AND TIMEFRAME	Evaluation
Complete routine inspections and complete 6 monthly reports to Municipal Association of Victoria(MAV) in accordance with service agreement	EHO	MAV, Department of Health Business proprietors	Reports lodged each 6 months and grants from MAV received	Completed.  *Smoking rates reduction since 2013-2017 MPHWP

GOAL: Maintain High Levels of Immunisation Rates

STRATEGY	SHIRE DEPARTMENT	OTHER PARTNERS INVOLVED	MEASURES AND TIMEFRAMES	Evaluation
Continue to promote and support the Maternal and Child Health Services within the shire	MCHN	Schools Kindergartens	Quarterly statistics provide by MCHN. Ongoing	Completed.



## WEST WIMMERA SHIRE COUNCIL

GOAL: Promote the Benefits of Increased Social Connection

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS	MEASURES AND TIMEFRAMES	Evaluation
Work in partnership with service clubs to promote the benefits of involvement in the community	GMCCS	Service Clubs Sporting Clubs Western Victoria Volunteers	Volunteer rates. Ongoing	Completed.
Encourage and support community access, participation with alternative activities by advertising through newsletter	GMCCS	Service Clubs Recreational Clubs	Participation rates in community groups. Ongoing	Completed.
Continue to acknowledge the work that is completed by volunteers in the shire	GMCCS	Western Victoria Volunteers	Nominations and support for Volunteer awards. Ongoing	Completed.



## WEST WIMMERA SHIRE COUNCIL

GOAL: Provide Services and Activities to Address Mental Health in a Regional Setting

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS	MEASURES AND TIMEFRAMES	Evaluation
Provide school focused youth counselling sessions for students and parents	Youth Officer	Schools Local families Counselling services / psychologists	Once per 2 years	Completed.
Support the work of Wimmera Uniting Cares Rural and Remote Engagement Officer	EHO GMCCS	Health Services	Referral numbers. Ongoing	Completed.
Promote and support the Men's Sheds within the shire as a place for men to gather	EHO GMCCS	Men's sheds Local men	Grant application numbers. Ongoing	Completed.
Provide and support counselling services to assist with hardship through fire/flood/drought and other emergencies	GMCCS	Health Services Counselling services	Referral Numbers to Counselling Services.	Completed.

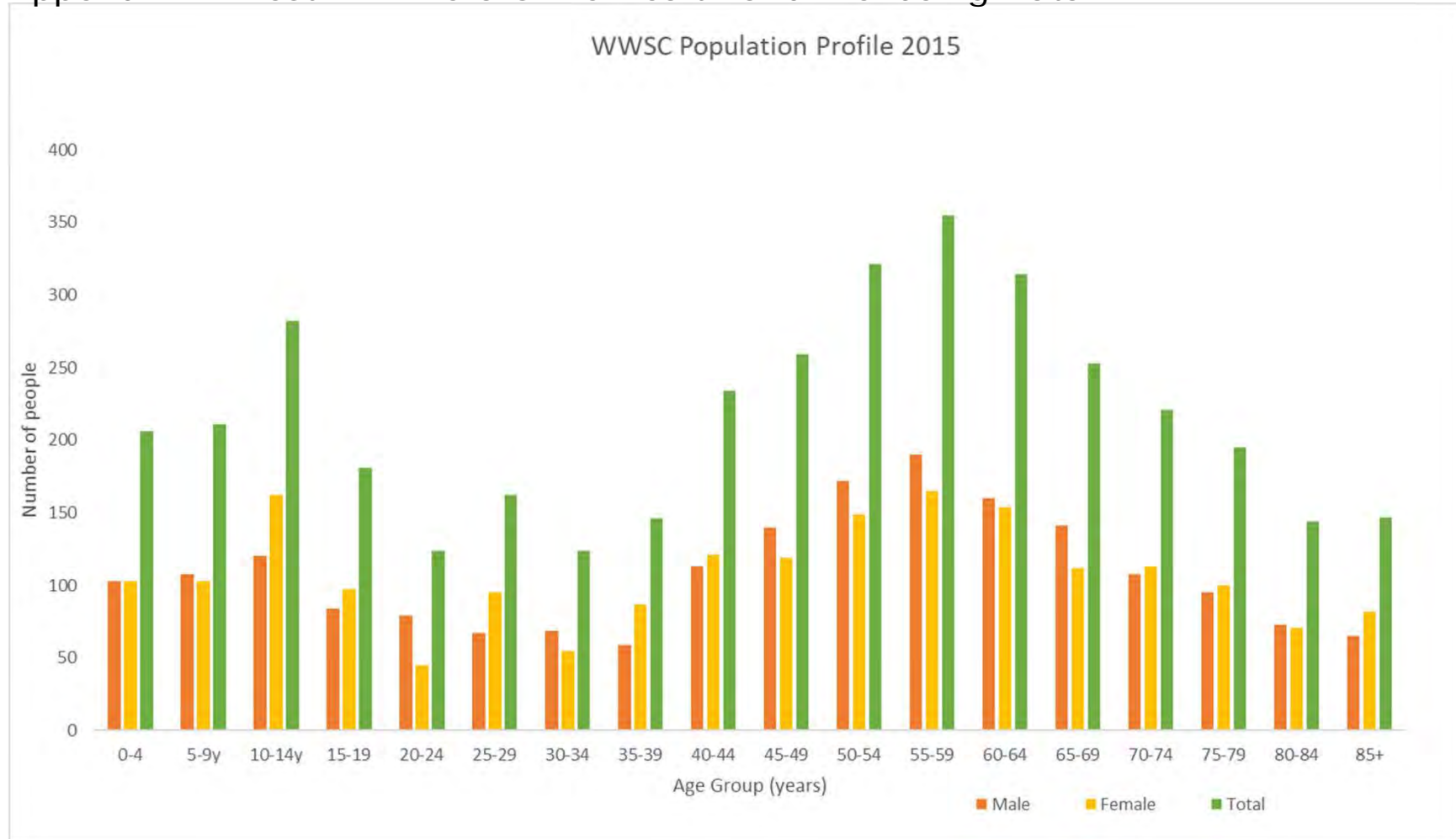
GOAL: Support Education and Employment Opportunities for Young People within the Shire

STRATEGIES	SHIRE DEPARTMENT	OTHER PARTNERS	MEASURES AND TIMEFRAMES	Evaluation
Continue to provide awards to the three secondary colleges within the shire.	EACEO	Local Secondary Colleges	Yearly award presentation.	Completed.
Work with schools to identify youth not engaged with education or employment.	Youth Officer	Local Schools	Referrals to and from the Youth Officer. Ongoing	Completed.



## WEST WIMMERA SHIRE COUNCIL

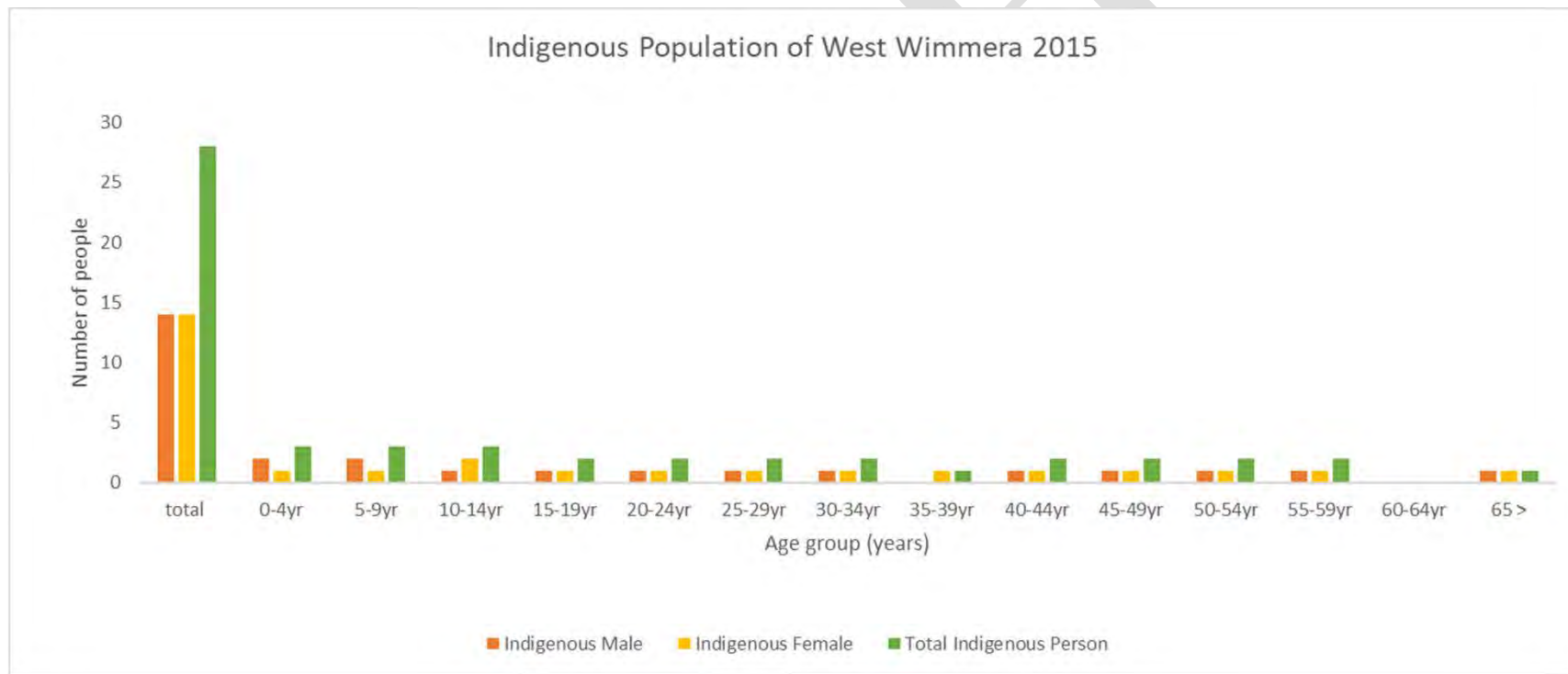
### Appendix 2. West Wimmera Shire Health and Wellbeing Data



Graph 6. West Wimmera Shire Council population profile 2015. Social Atlas of Australia 2016.



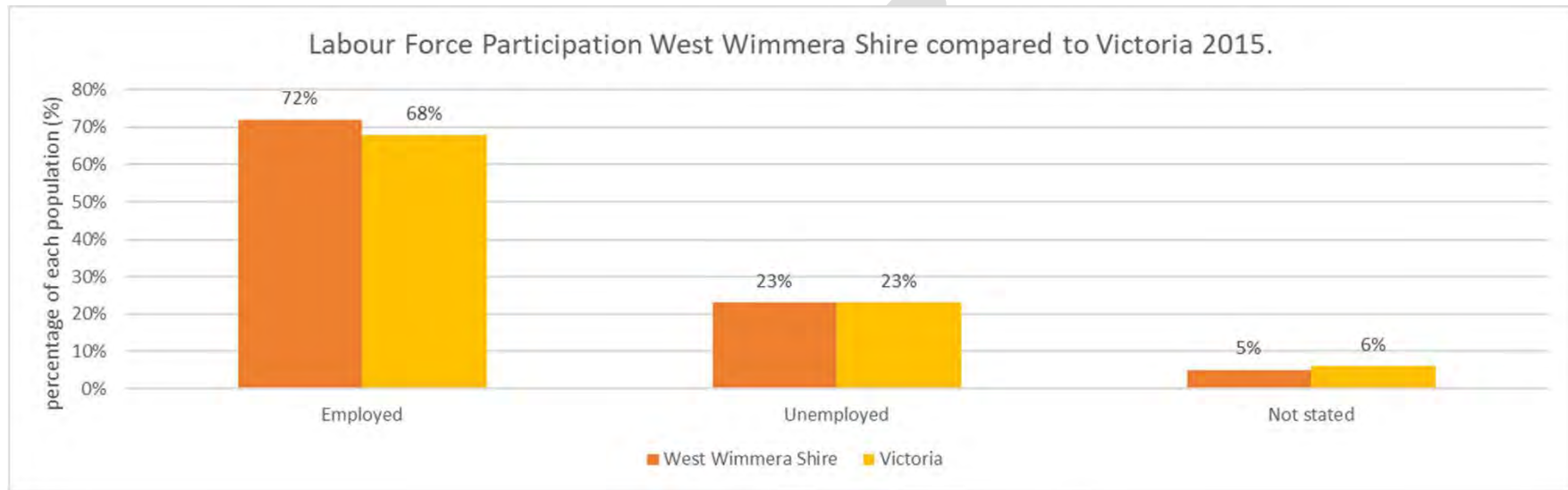
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Graph 7. West Wimmera Shire Council Indigenous Population 2015. Social Atlas of Australia 2016.



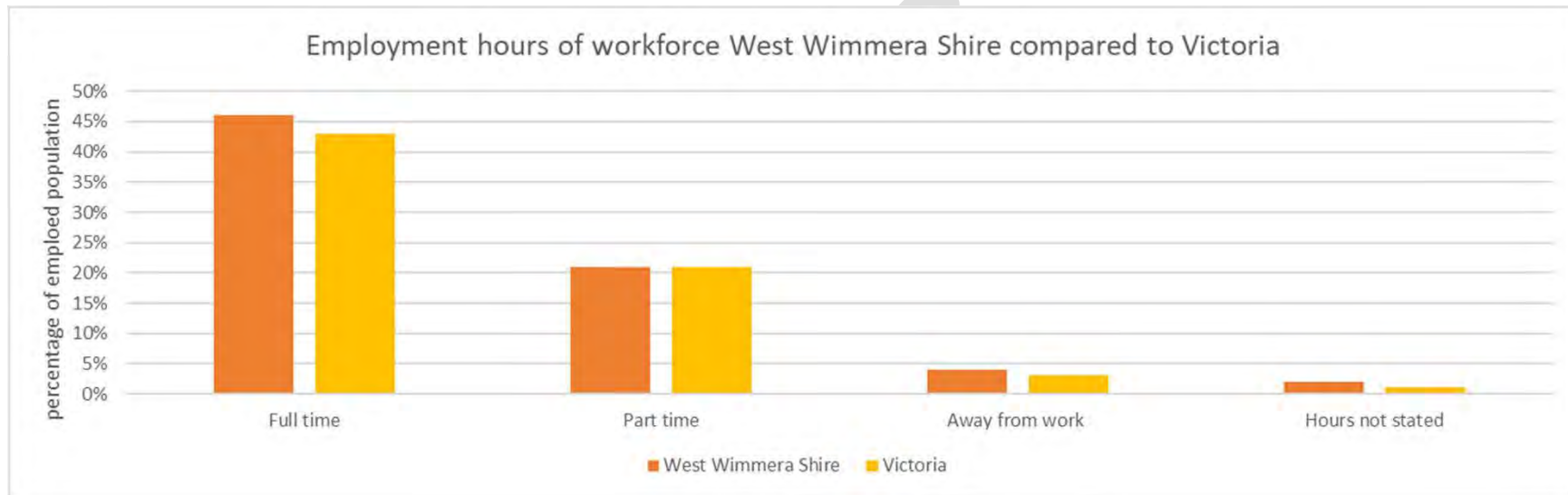
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Graph 8. Labour Force Participation West Wimmera Shire compared to Victoria 2015. Social Atlas of Australia 2016.



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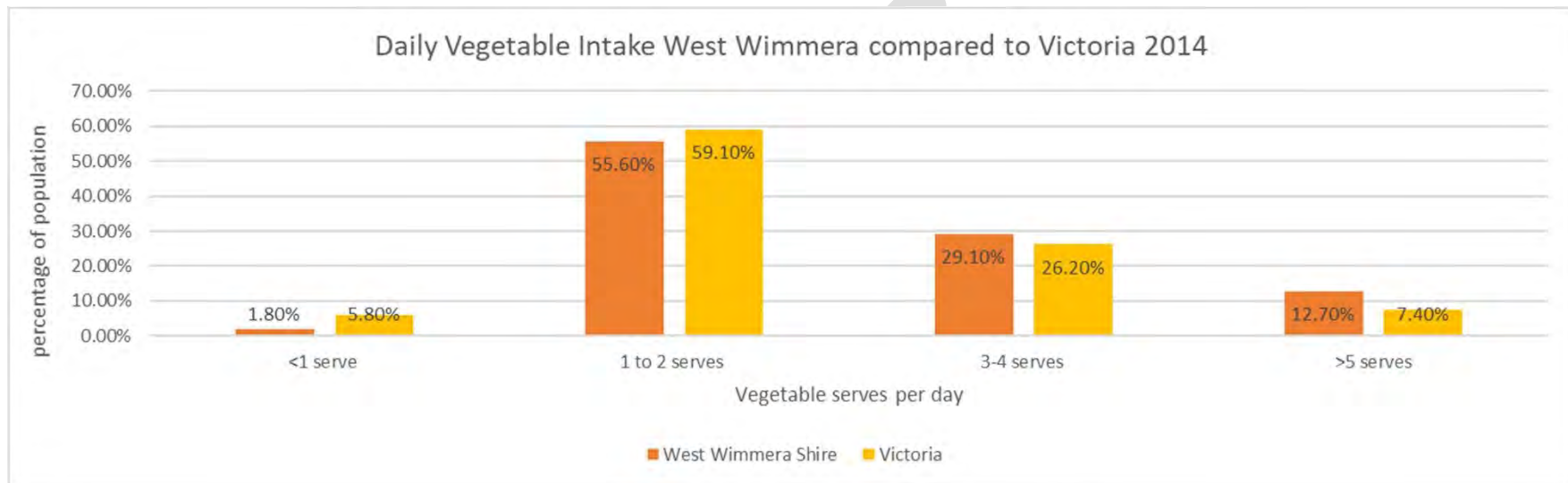


Graph 9. Employment hours of workforce West Wimmera Shire compared to Victoria 2015. West Wimmera PCP Health and Wellbeing Profile 2016.





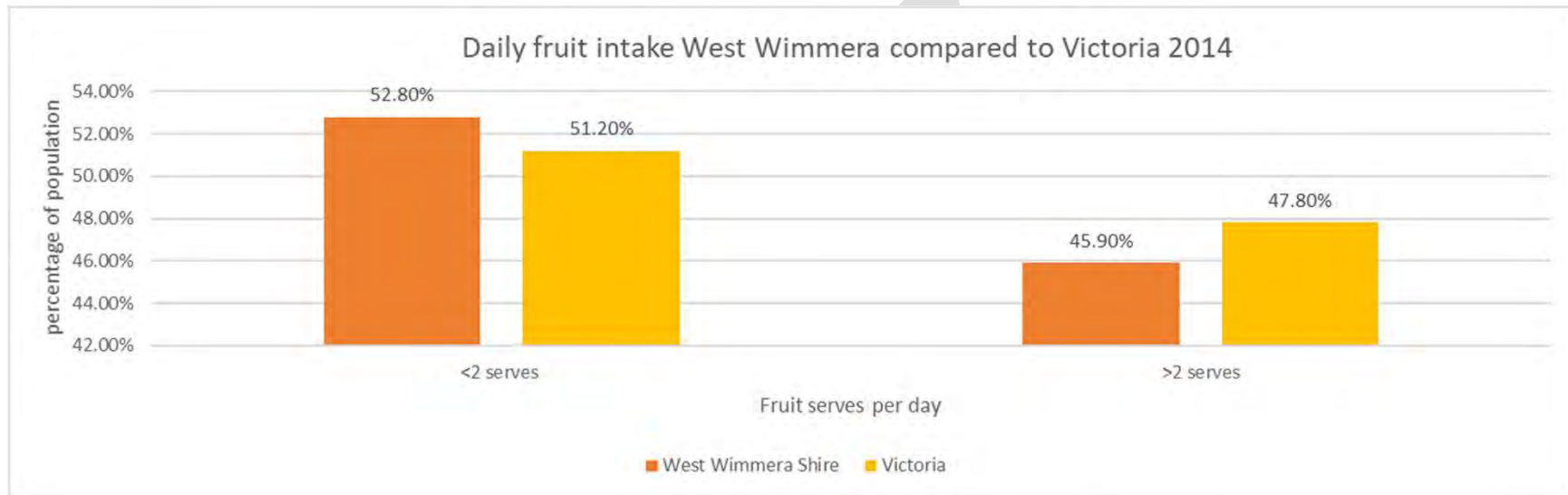
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Graph 10. Daily Vegetable Intake West Wimmera Shire compared to Victoria 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



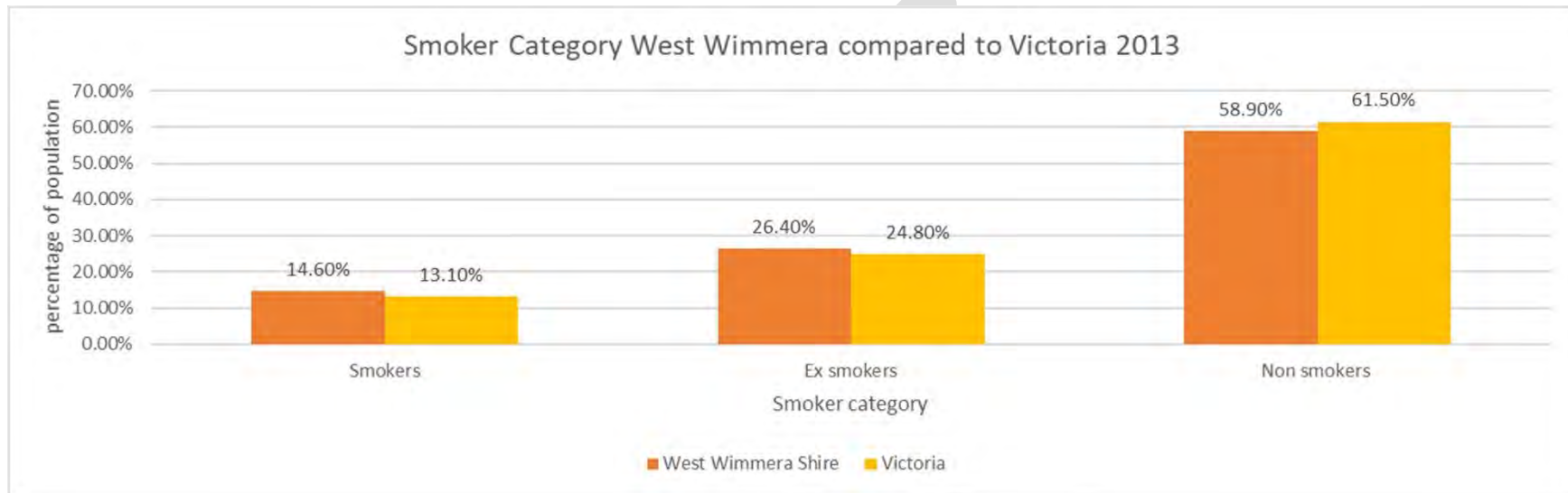
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Graph 11. Daily Fruit Intake West Wimmera Shire compared to Victoria 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



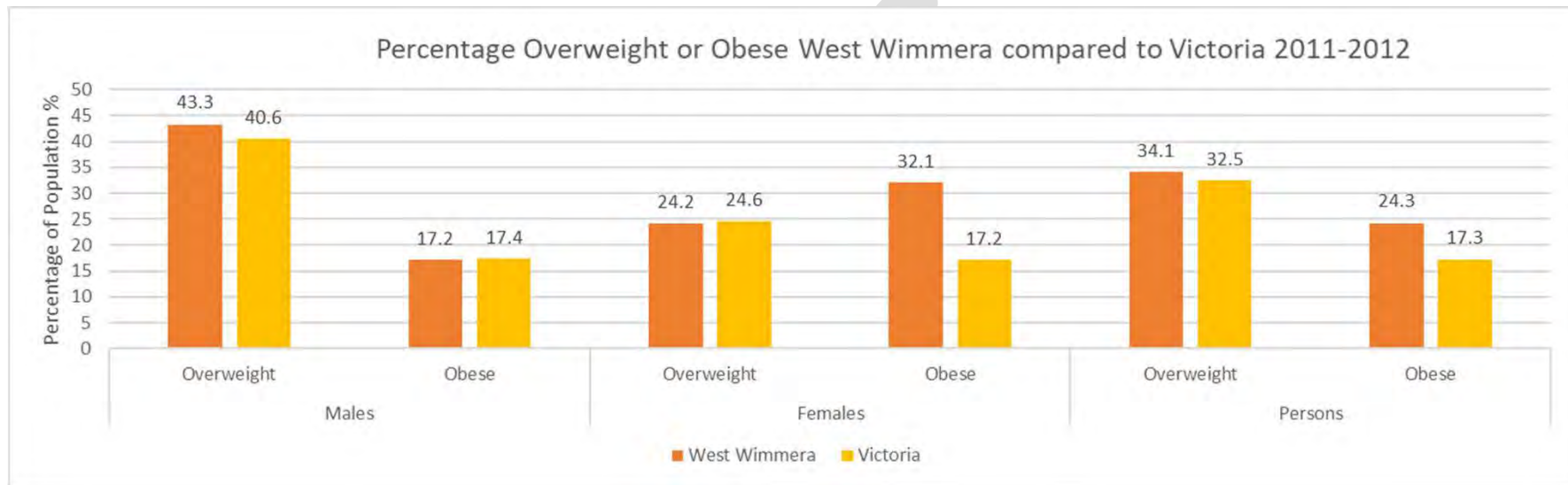
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Graph 12. Smoker Category West Wimmera Shire compared to Victoria 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



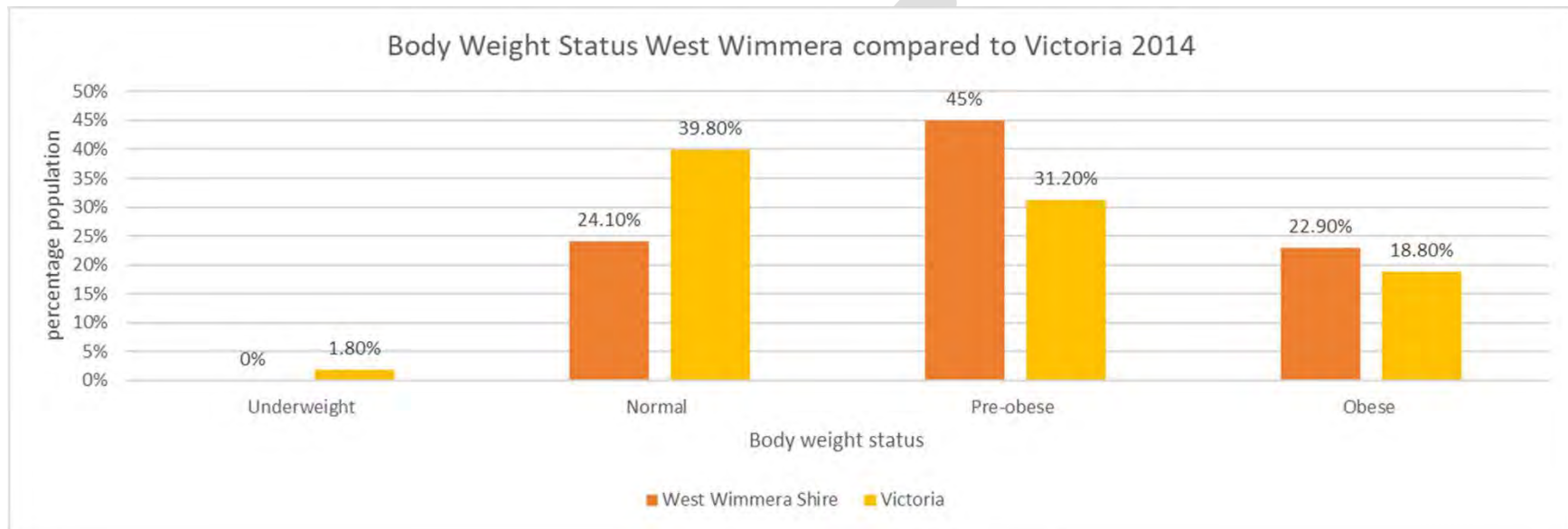
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Graph 13. Percentage Overweight or Obese West Wimmera Shire compared to Victoria 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



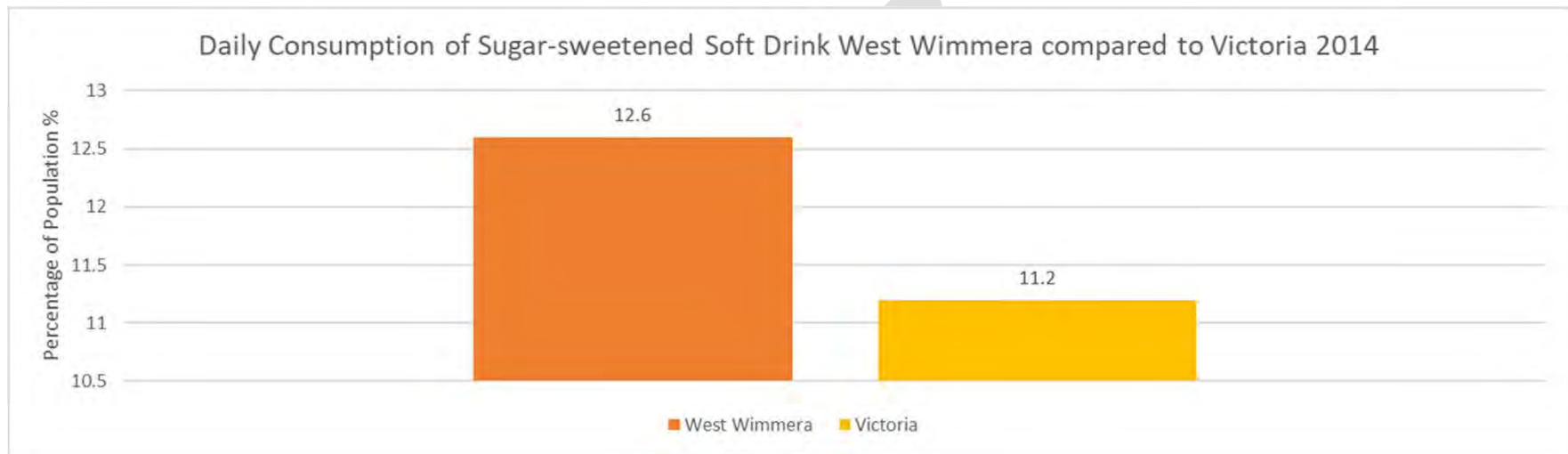
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Graph 14. Body Weight Status West Wimmera Shire compared to Victoria 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



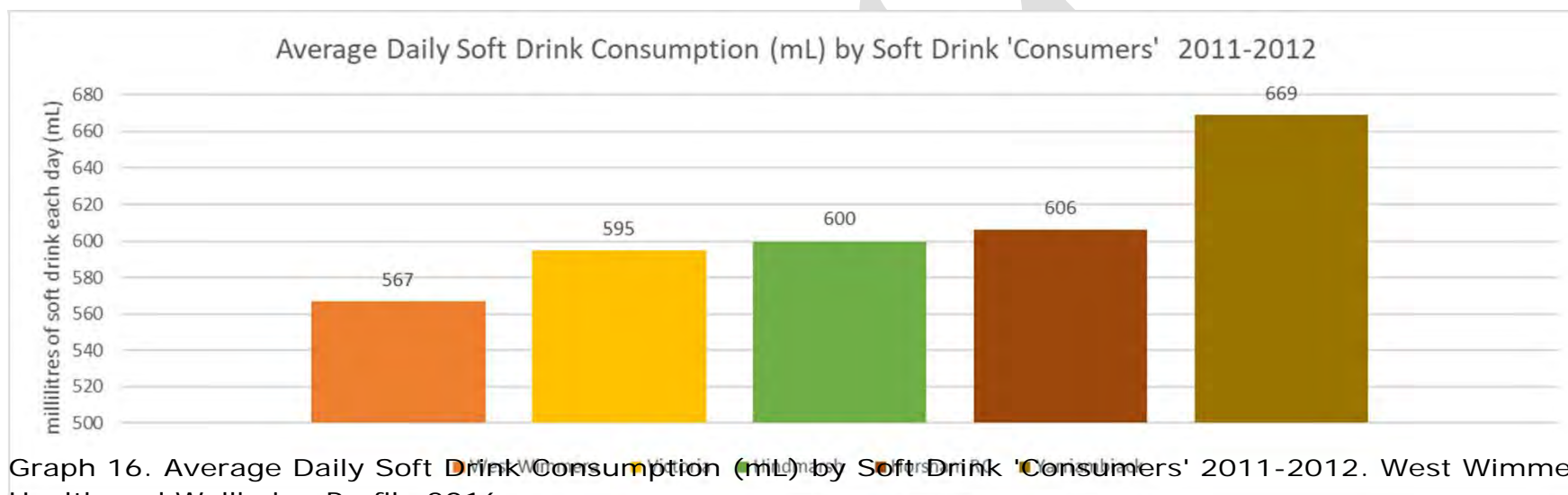
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Graph 15. Daily Consumption of Sugar-sweetened Soft Drink West Wimmera compared to Victoria 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



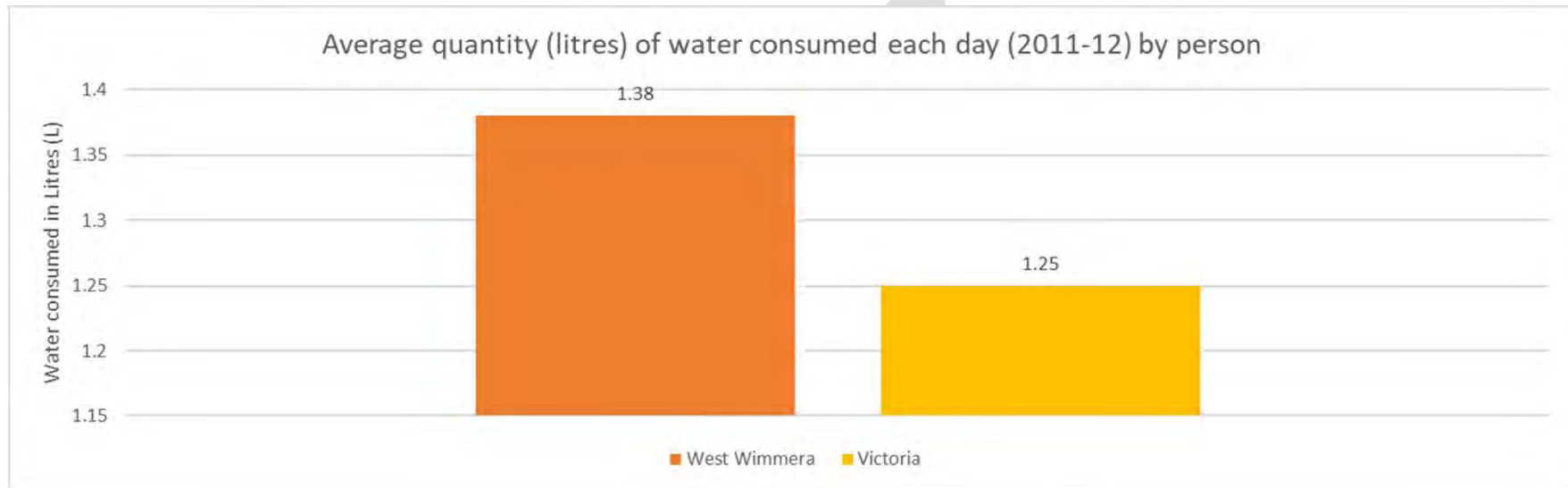
## WEST WIMMERA SHIRE COUNCIL



Graph 16. Average Daily Soft Drink Consumption (mL) by Soft Drink 'Consumers' 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



## WEST WIMMERA SHIRE COUNCIL

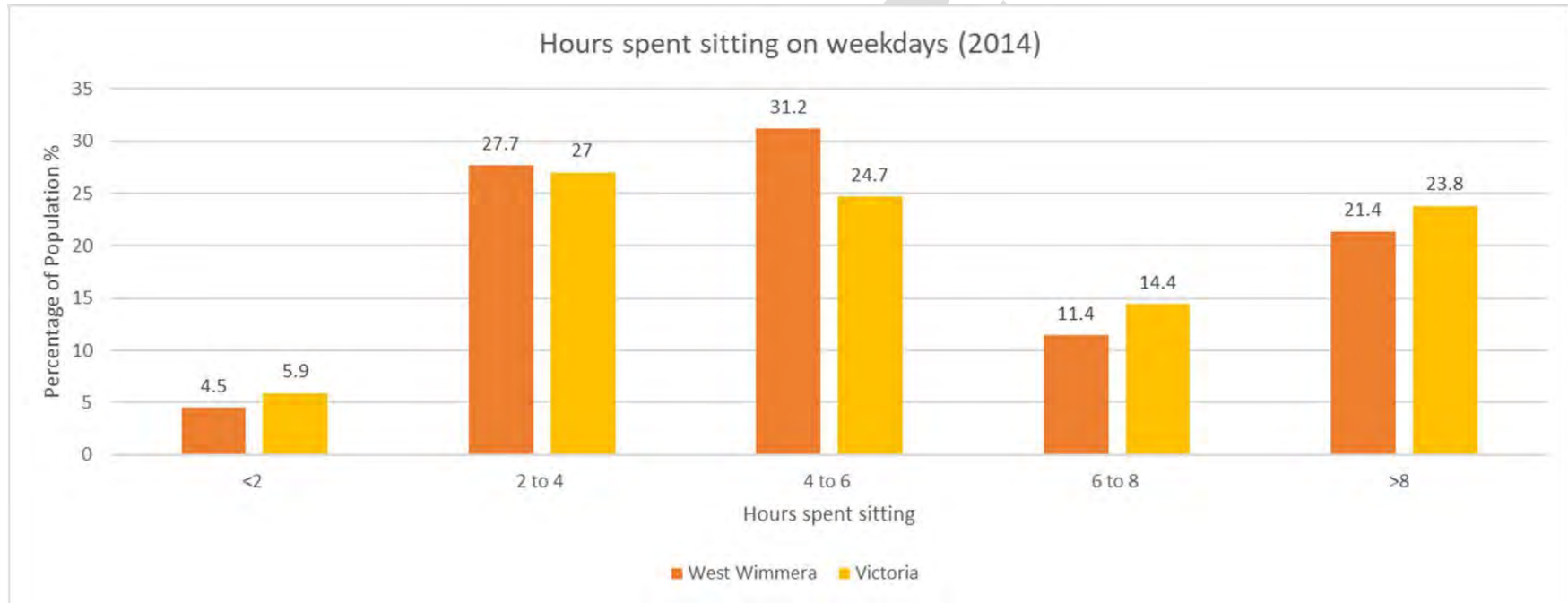


Graph 17. Average quantity (litres) of water consumed each day (2011-12) by person. West Wimmera PCP Health and Wellbeing Profile 2016.





## WEST WIMMERA SHIRE COUNCIL



Graph 18. Hours spent sitting on weekdays 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



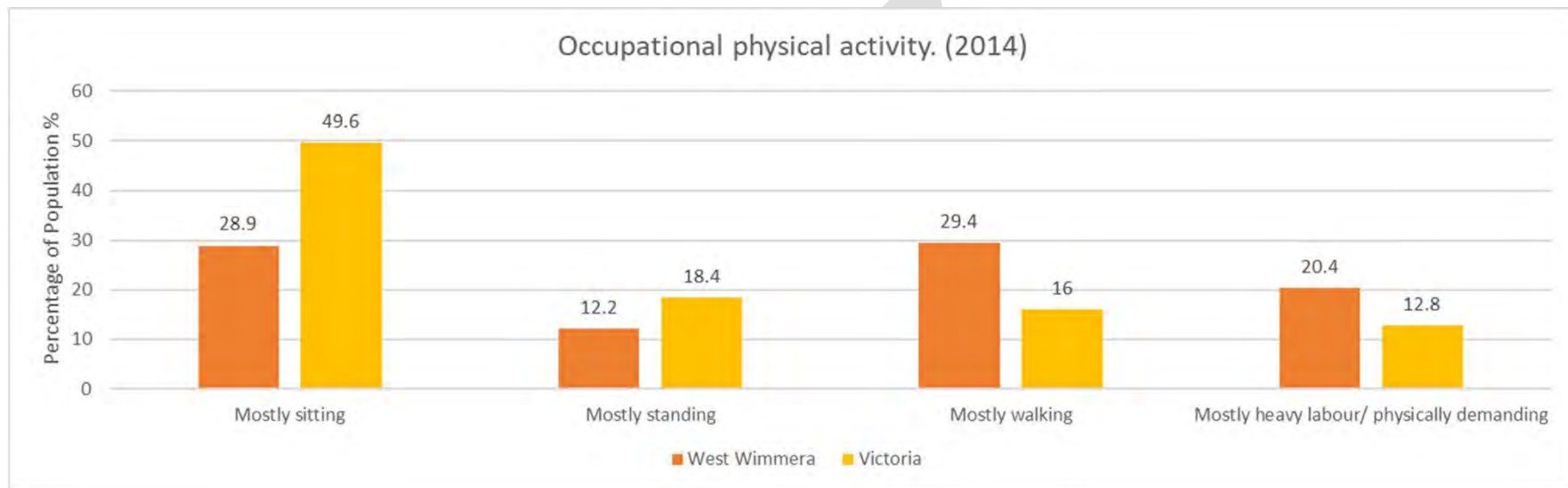
## WEST WIMMERA SHIRE COUNCIL



Graph 19. Hours spent sitting on weekends 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



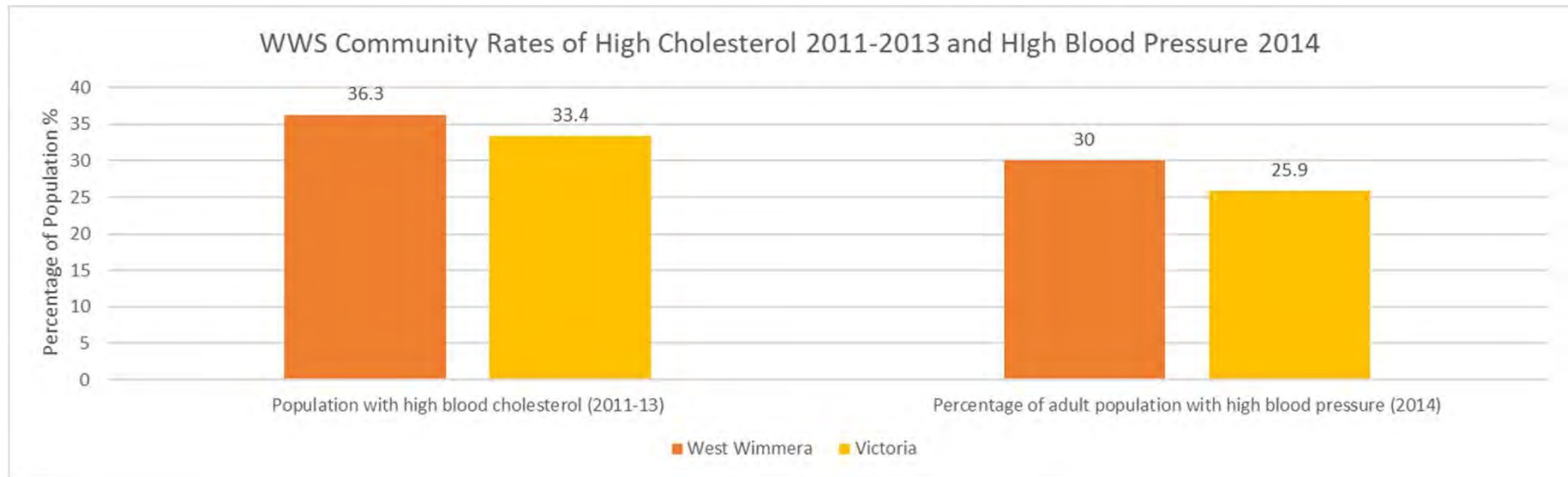
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Graph 20. Occupational physical activity 2014. West Wimmera PCP Health and Wellbeing Profile 2016.  
Graph 21. Premature mortality by cause West Wimmera compared to Victoria 0-74 years, ASR Social Health Atlas 2016.



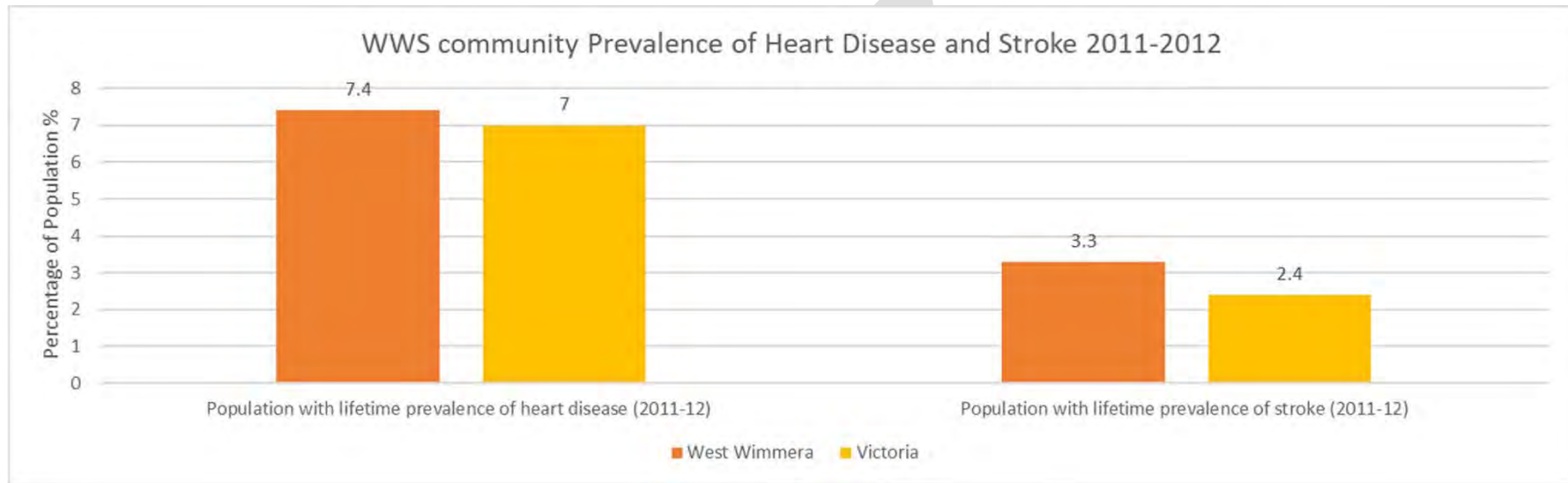
## WEST WIMMERA SHIRE COUNCIL



Graph 22. WWS Community Rates of High Cholesterol 2011-2013 and High Blood Pressure 2014. West Wimmera PCP Health and Wellbeing Profile 2016.



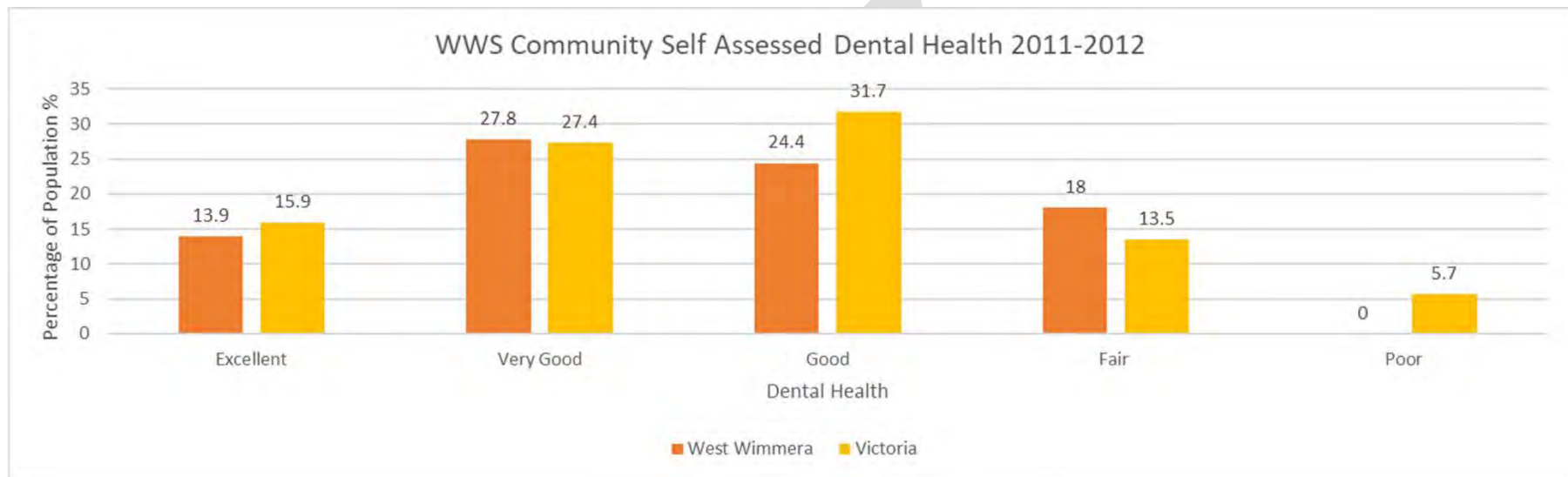
## WEST WIMMERA SHIRE COUNCIL



Graph 23. WWS Community Prevalence of Heart Disease and Stroke 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



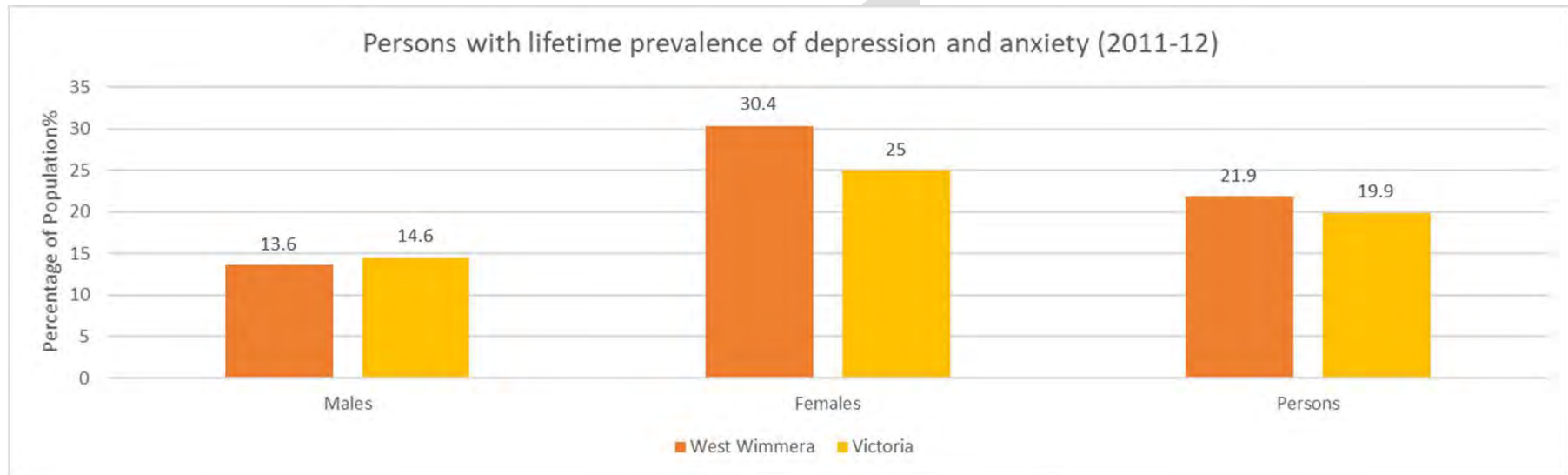
## WEST WIMMERA SHIRE COUNCIL



Graph 24. WWS Community Self Assessed Dental Health 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



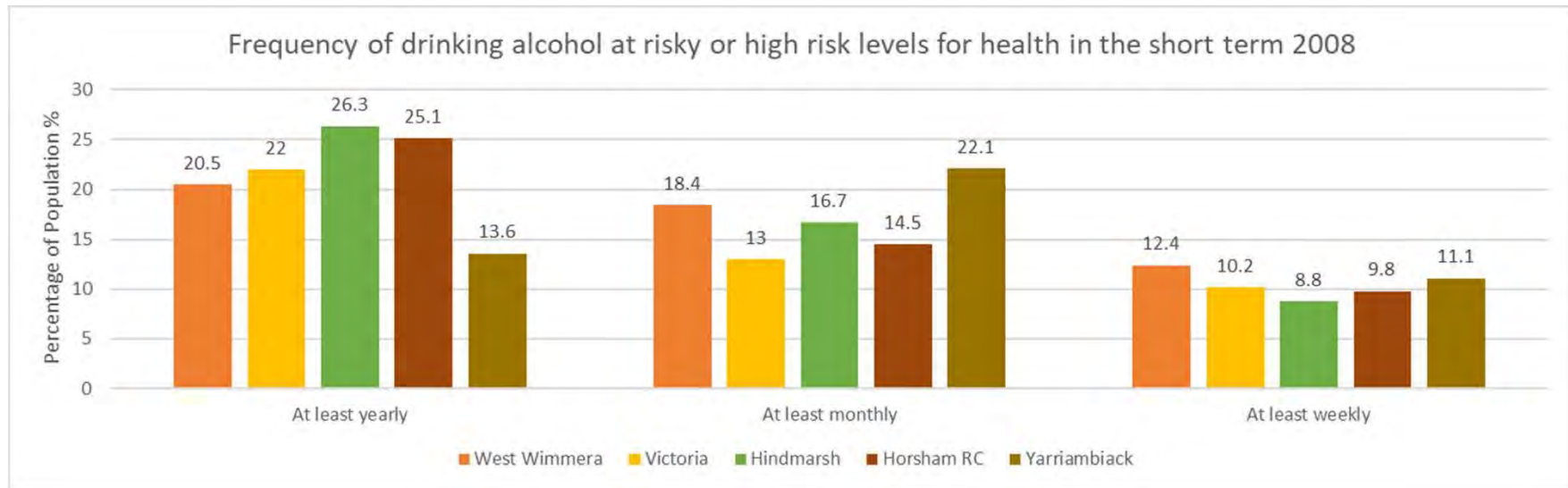
## WEST WIMMERA SHIRE COUNCIL



Graph 25. WWS Persons with lifetime prevalence of depression and anxiety 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



## WEST WIMMERA SHIRE COUNCIL

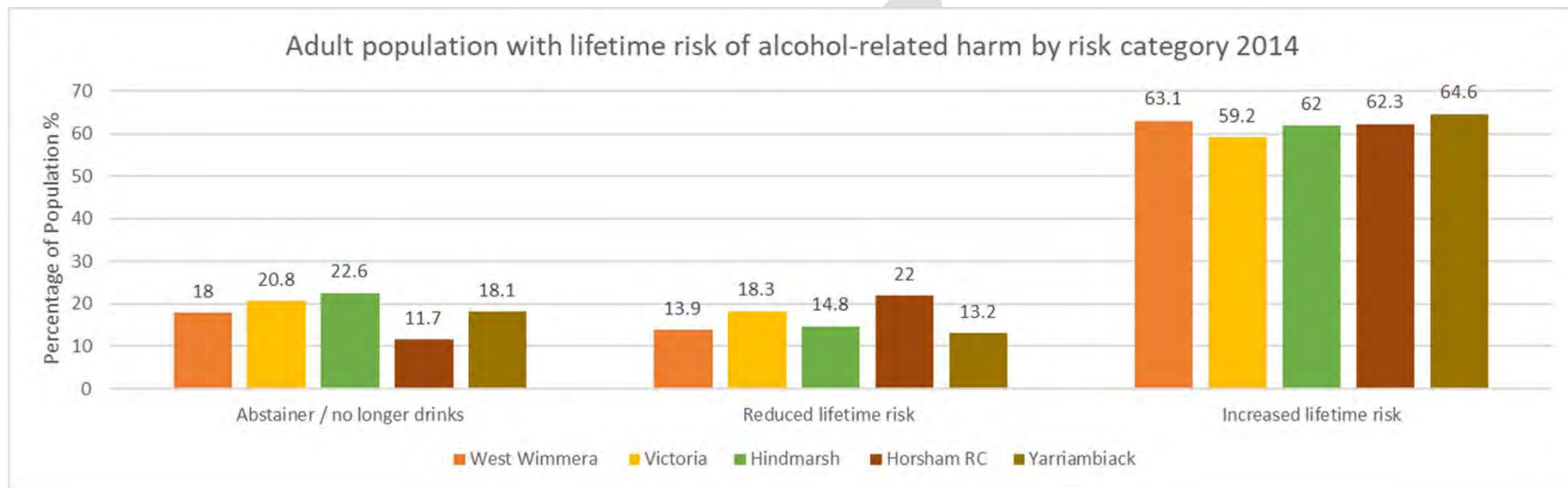


Graph 26. WWS Population Frequency of drinking alcohol at risky or high risk levels for health in the short term 2008. West Wimmera PCP Health and Wellbeing Profile 2016.





## WEST WIMMERA SHIRE COUNCIL



Graph 27. WWS Adult population with lifetime risk of alcohol-related harm by risk category 2014. West Wimmera PCP Health and Wellbeing Profile 2016.

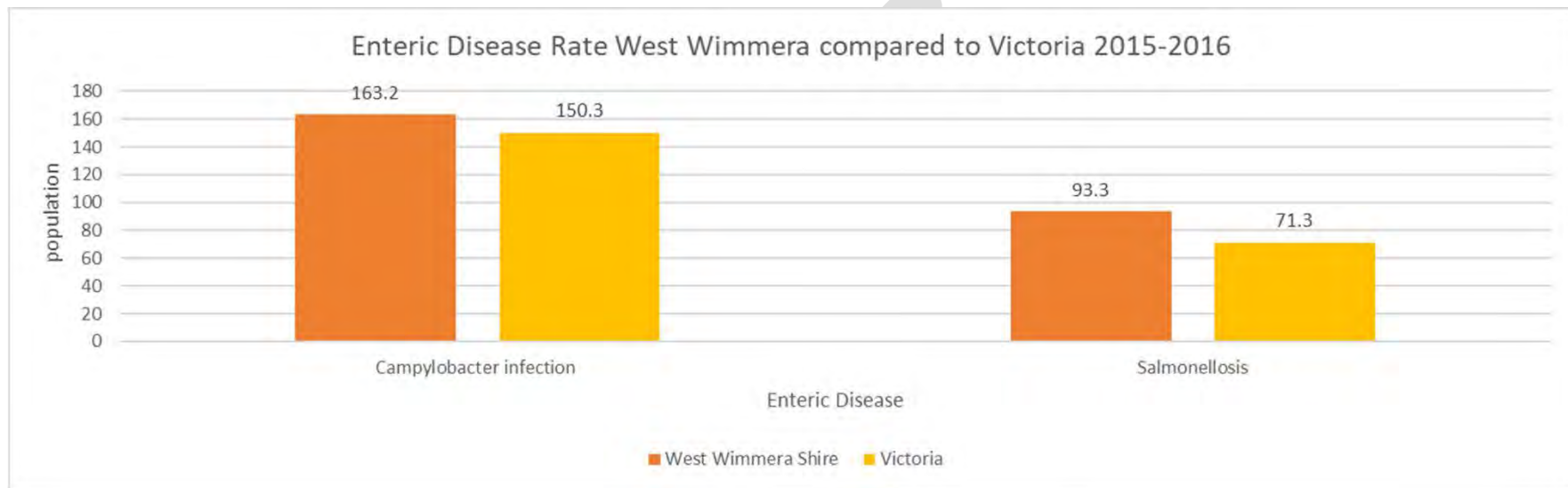


## WEST WIMMERA SHIRE COUNCIL





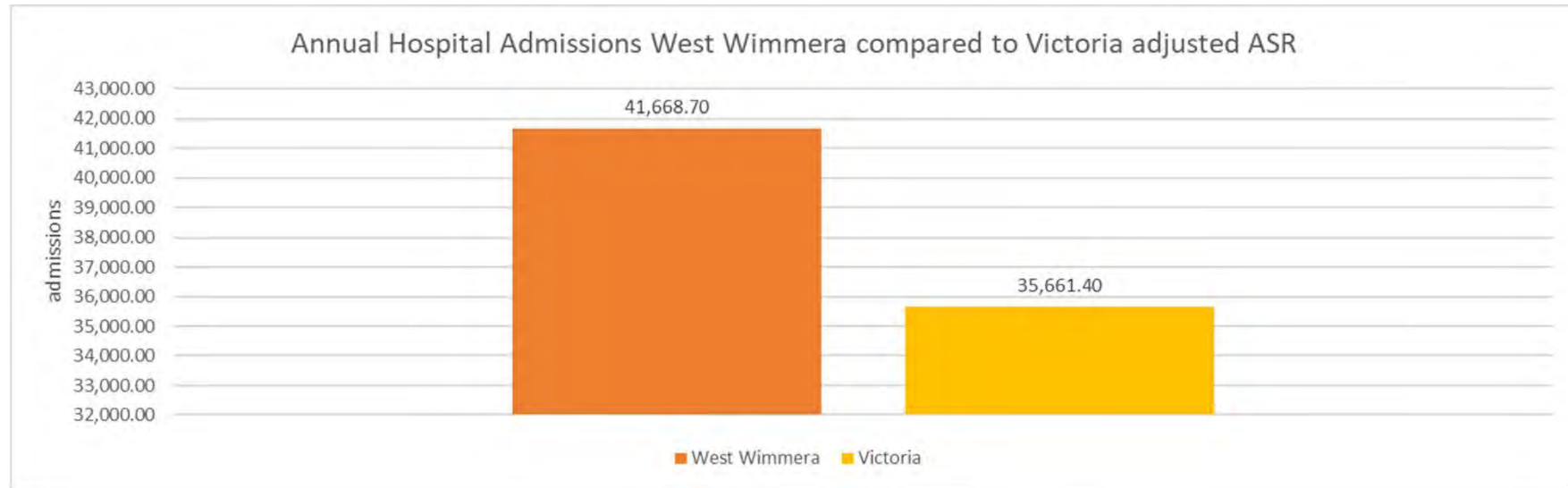
## WEST WIMMERA SHIRE COUNCIL



Graph 29. Enteric Disease Rate West Wimmera compared to Victoria 2015-2016. West Wimmera PCP Health and Wellbeing Profile 2016.



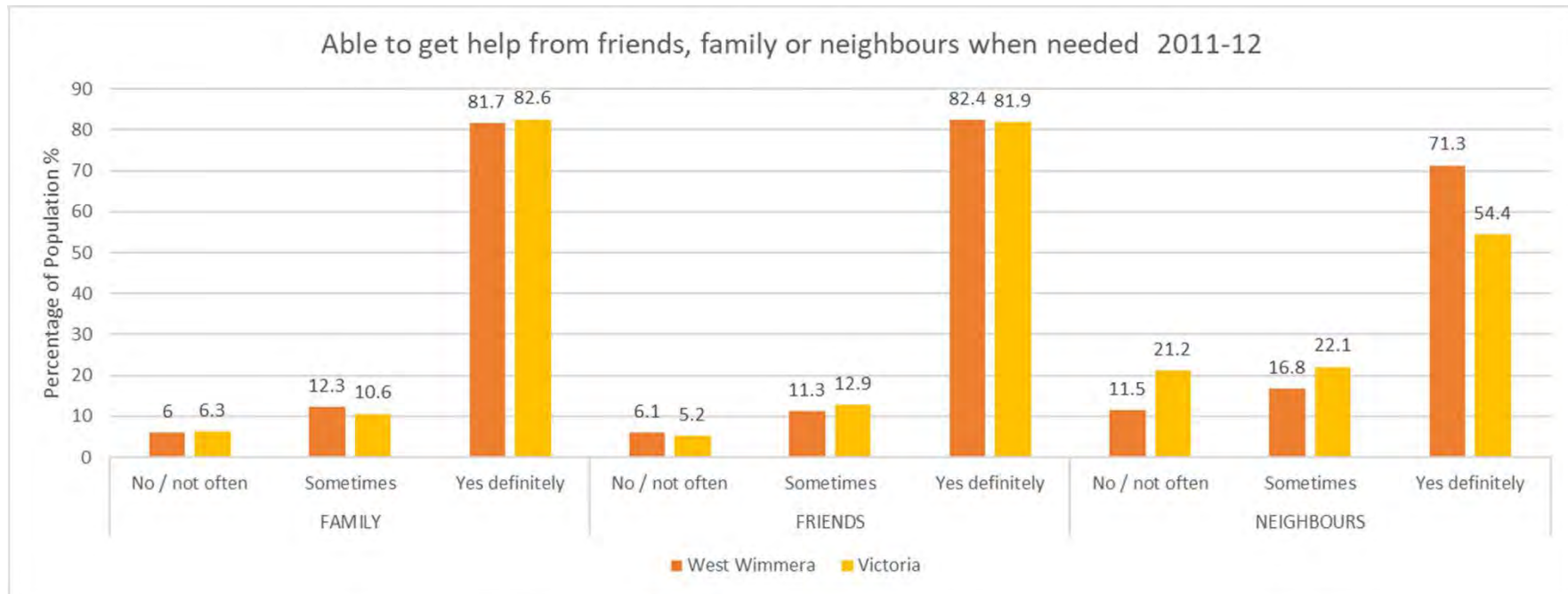
## WEST WIMMERA SHIRE COUNCIL



Graph 30. Annual Hospital Admissions West Wimmera compared to Victoria. Social Health Atlas of Australia 2016.



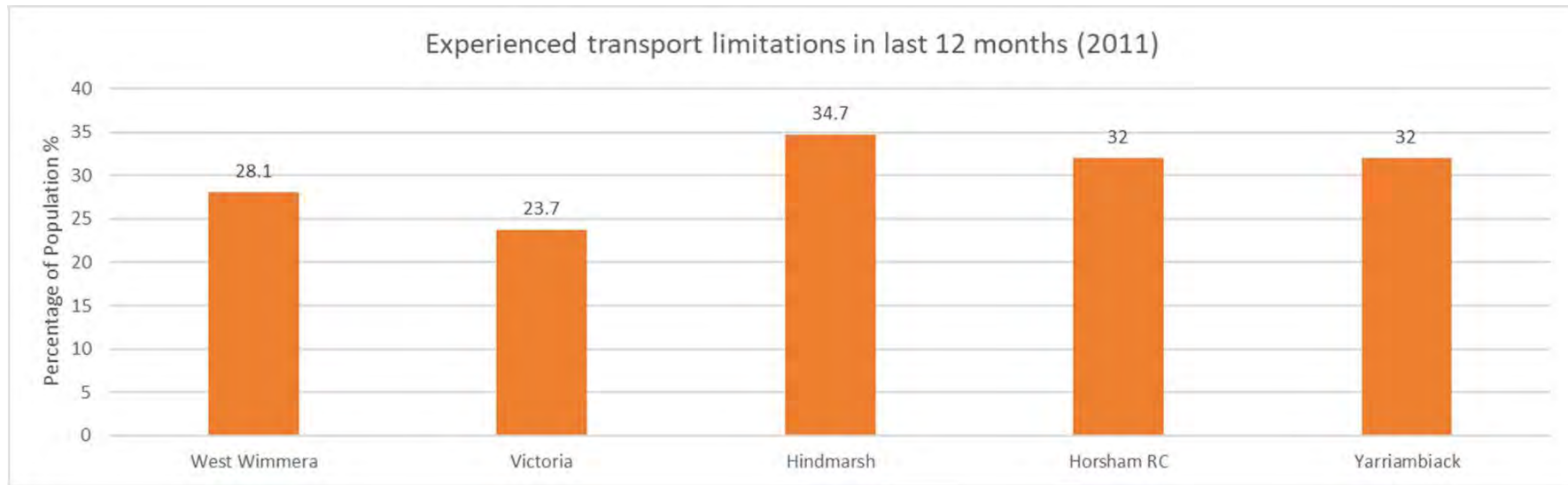
## WEST WIMMERA SHIRE COUNCIL



Graph 31. Able to get help from friends, family or neighbours when needed 2011-12. West Wimmera PCP Health and Wellbeing Profile 2016.



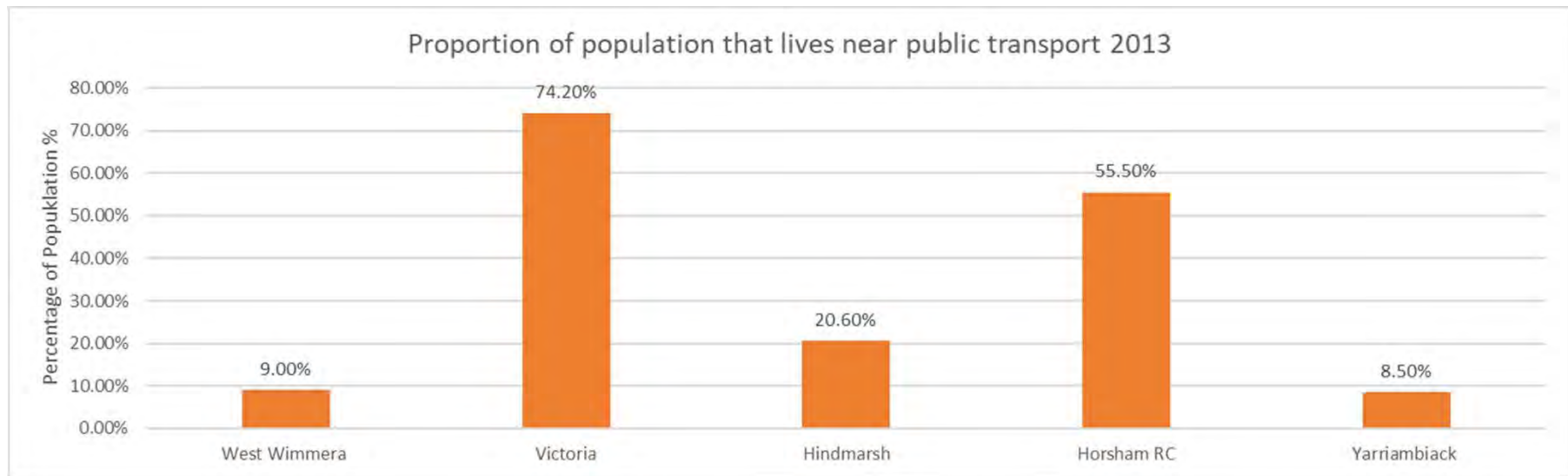
## WEST WIMMERA SHIRE COUNCIL



Graph 32. Experienced transport limitations in last 12 months 2011. West Wimmera PCP Health and Wellbeing Profile 2016.



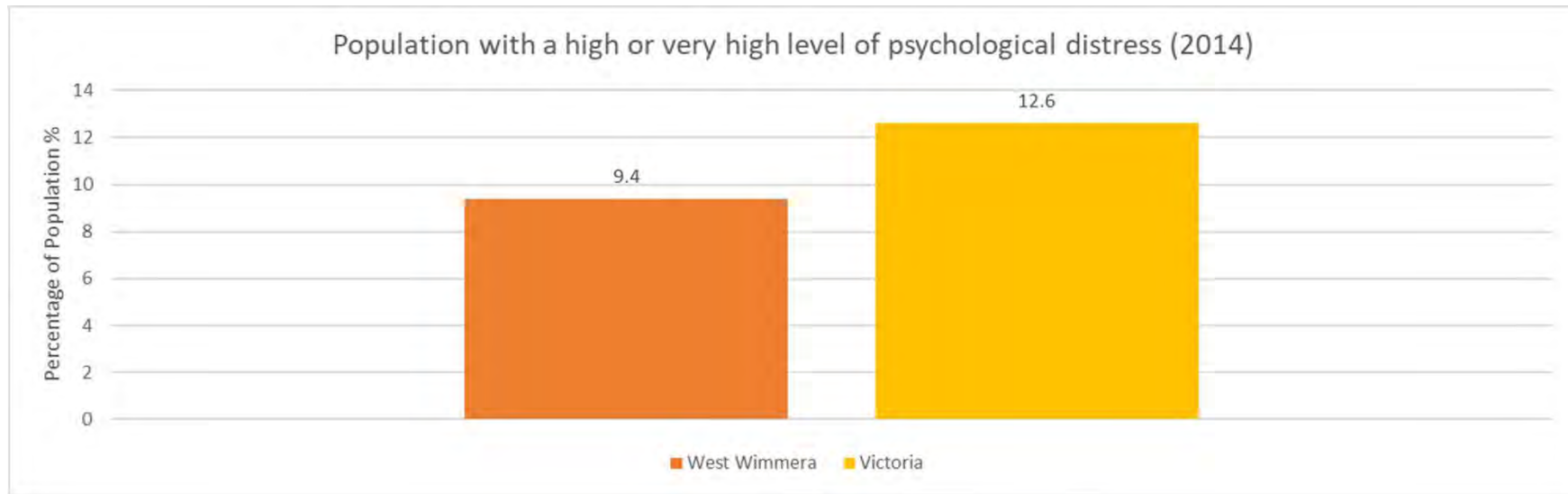
## WEST WIMMERA SHIRE COUNCIL



Graph 33. Proportion of population that lives near public transport 2013. West Wimmera PCP Health and Wellbeing Profile 2016.



## WEST WIMMERA SHIRE COUNCIL

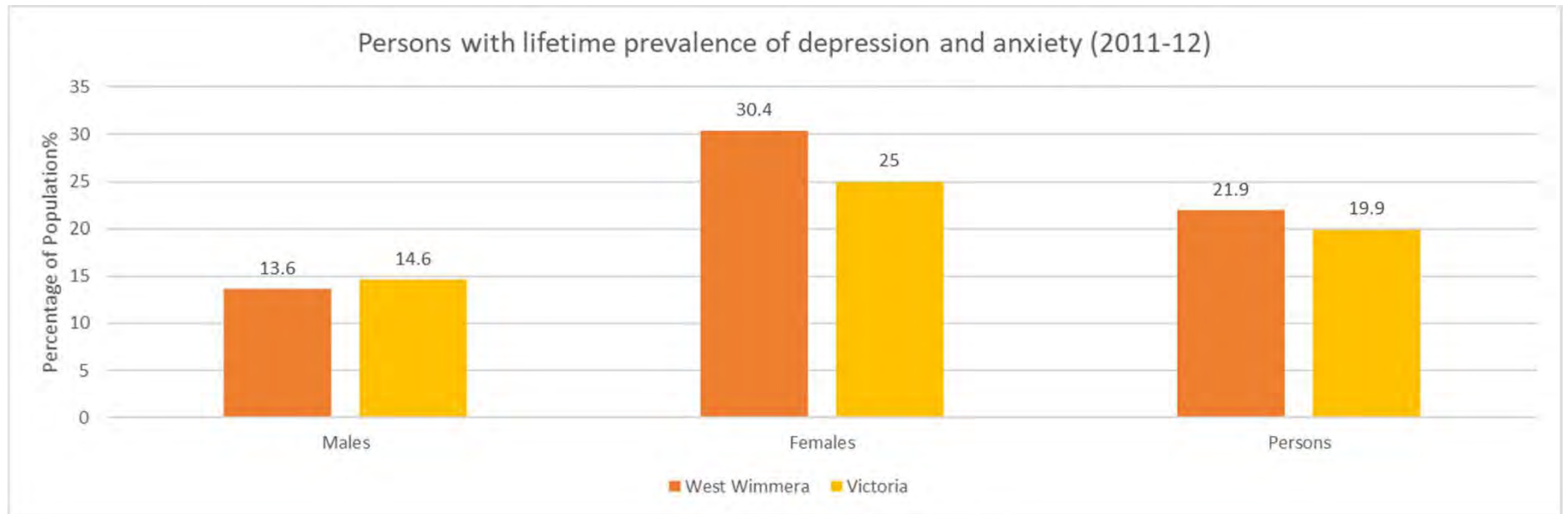


Graph 34. Population with a high or very high level of psychological distress 2014. West Wimmera PCP Health and Wellbeing Profile 2016.





## WEST WIMMERA SHIRE COUNCIL



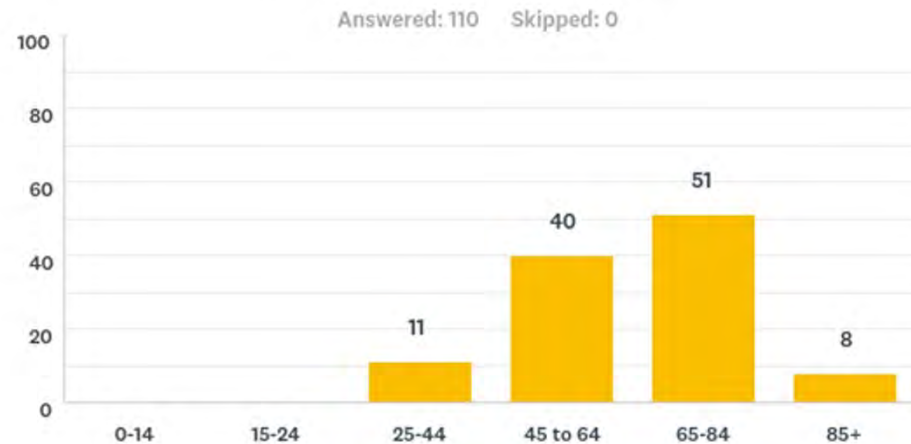
Graph 35. Persons with lifetime prevalence of depression and anxiety 2011-2012. West Wimmera PCP Health and Wellbeing Profile 2016.



## WEST WIMMERA SHIRE COUNCIL

### Appendix 3. Results from WWSC Municipal Public Health and Wellbeing Plan Community Survey 2017

#### Q1 What is your age?



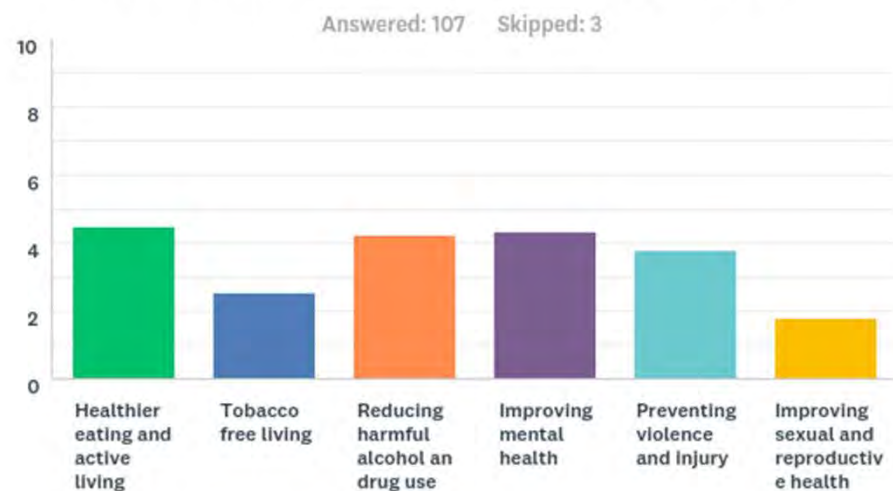
#### Q2 What is your gender?





## WEST WIMMERA SHIRE COUNCIL

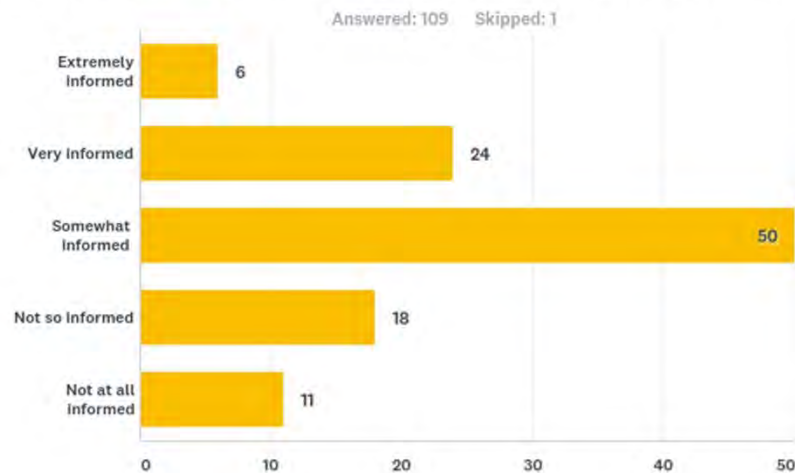
**Q3 Rank the health and wellbeing issues listed in order of importance to you, from most important to least important.**





## WEST WIMMERA SHIRE COUNCIL

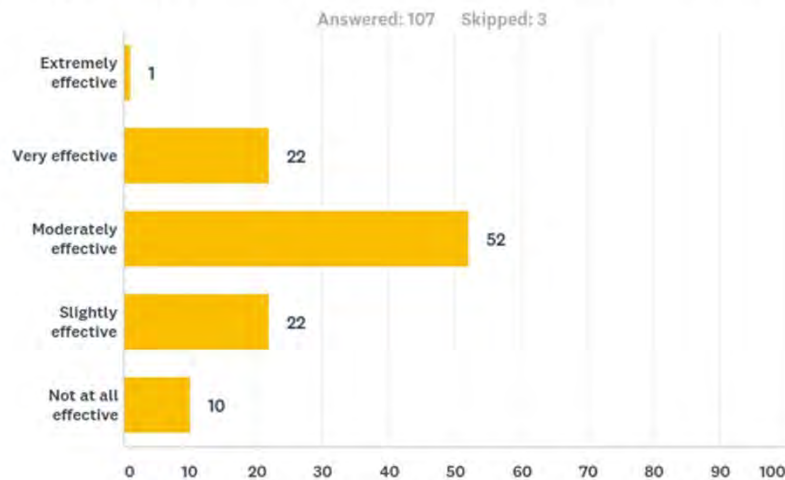
**Q4 Overall, how informed do you feel about the public health and wellbeing activities and programs offered and supported by West Wimmera Shire Council?**





## WEST WIMMERA SHIRE COUNCIL

**Q5 Overall, how would you rate the effectiveness of West Wimmera Shire Council at addressing public health and wellbeing issues at the local level?**





## WEST WIMMERA SHIRE COUNCIL

Q6 Do you have any comments or suggestions about public health and wellbeing at the local government level that you would like to share with West Wimmera Shire Council?

A selection of comments from the community survey.

- How do you inform the ratepayers about what you are doing? I have no idea what is being done! I wasn't aware the shire did health and wellbeing initiatives and programs.
- I am not fully aware of what the shire provides or what WW health provides. Improved communication and publicity to connect all members of the community. Do we need to do more to connect new residents in the community?
- Instead of always addressing the problems we need to be addressing the causes. More promotion of healthy living is needed.
- Mental health, violence and racism to be addressed. "Active living" is a legitimate area for council action, in such areas as the provision of parks and gardens, playing fields, and sports centres. I think obesity is a massive problem in this shire and the biggest risk to the wellbeing of the community.
- Work in partnership more effectively between Shire, Hospital & schools.

\* NB Over a third (36%) of respondents' comments were not directly related to municipal public health and wellbeing, and were either outside of Council's jurisdiction (e.g. hospitals) or were about other matters (e.g. allegations of environmental nuisance).

---

## Agreement under Section 173 of the Planning and Environment Act 1987

**Dated**        /        /

---

### Parties

Name	<b>West Wimmera Shire Council</b>
Address	<b>49 Elizabeth Street, Edenhope</b>
Short name	<b>Council</b>

Name	<b>William John Rich and Margery Joy Rich</b>
Address	<b>325 Richs Road, Goroke</b>
Short name	<b>Owner</b>

### RECITALS

- A. Council is the responsible authority for the Planning Scheme, pursuant to the Act.
- B. The Owner is or is entitled to be the registered proprietor of the Subject Land.
- C. On 22<sup>nd</sup> August 2017 Council, as directed by Victorian Civil Administrative Council decision on 21<sup>st</sup> August 2017, issued Planning Permit Number P1356 (**Planning Permit**) which allowed the Subject Land Crown allotment 7, Section 3, Lot 2, LP129452, Parish of Kaniva to be developed for the purpose of the removal of 24 Black Box trees and one (1) Buloke to allow access for agricultural machinery in accordance with a plan to be endorsed pursuant to the Planning Permit. Condition 2 of the Planning Permit provides as follows:

#### 2. Offset evidence

Before any native vegetation is removed, evidence that an offset has been secured must be provided to the satisfaction of the Responsible Authority. This offset must meet the offset requirements set out in this permit and be in accordance with the requirements of *Permitted Clearing of Native Vegetation –Biodiversity Guidelines and the Native Vegetation gain scoring manual*. Offset evidence can be either:

- a) Security agreement, to the required standard, for the offset site or sites, including a 10 year offset management plan.
- b) A credit register extract from the Native Vegetation Credit Register.

- D. The parties enter into this Agreement, pursuant to Section 173 of the Act, to give effect to the requirements of the Planning Permit and to achieve and advance to objectives of planning in Victoria and the objectives of the Planning Scheme in respect of the Subject Land.

## The Parties Agree

---

### 1. Definitions

In this Agreement unless expressed or implied to the contrary:

**Act** means the *Planning and Environment Act 1987*.

**Building** has the same meaning as in the Act.

**Environmental Weed** means any plant described as a weed, environmental weed or the like in the Planning Scheme or any other Victorian Law, and includes any 'noxious weed' within the meaning of the *Catchment and Land Protection Act 1994*.

**Indigenous** means plants which have a natural distribution with West Wimmera Shire

**Management Period** means the management timeframe described in the Offset Management Plan in which the Offset Works are to be carried out.

**Management Zone** means all areas where the Offset Works have been or are to be carried out in accordance with this Agreement.

**Mortgagee** means the person or persons registered or entitled from time to time to be registered by the Registrar of Titles as Mortgagee of the Land or any part of it.

**Native Vegetation** has the same meaning as in the Planning Scheme.

**Native Trees** refers to any native vegetation that is classified as a tree in an ecological vegetation class as defined by the Department of Environment and Primary Industry.

**Offset** means any revegetation, weed removal, fencing or protection of native vegetation required as part of Offset Management Plan.

**Offset Management Plan** means the plan entitled Offset Management Plan prepared by William John and Margery Joy Rich dated September 2017 and approved by the responsible authority.

**Offset Works** means anything included in the management program described in the Offset Management Plan, including all plantings, management measures to protect or enhance existing native vegetation, fencing, buildings and Works.

**Owner** means the person registered or entitled to be registered, from time to time, as proprietor of an estate in fee simple of the Subject Land or any part of it and includes a mortgagee in-possession.



**Planning Scheme** means the West Wimmera Planning Scheme and any other planning scheme that applies to the Subject Land from time to time.

**Subject Land** means the land referred to in Certificate of Title Volume 8063 Folio 687 as crown allotment 30 Parish of Dopewora, Volume 2928 Folio 569 as crown allotment 36 Parish of Dopewora any reference to the Subject Land includes all or any part of it, including any lot created by the subdivision of the Subject Land.

**Works** has the same meaning as in the Act.

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## **2. Interpretation**

In this Agreement unless the context admits otherwise:

- 2.1 The singular includes the plural and vice versa.
- 2.2 If a party consists of more than one person this Agreement binds them jointly and each of them severally.
- 2.3 A term used in this Agreement has its ordinary meaning unless that term is defined in either this Agreement or in the Act. In the event that a term is defined in both this Agreement and the Act the definition in this Agreement shall prevail.
- 2.4 A reference to an Act, Regulation or planning scheme includes any Acts, Regulations or amendments amending, consolidating or replacing the Act, Regulation or planning scheme.
- 2.5 The obligations of the Owner under this Agreement will take effect as separate and several covenants which are annexed to and run at law and equity with the Subject Land provided that if the Subject Land is subdivided, this Agreement must be read and applied so that each subsequent owner of a lot is only responsible for those covenants and obligations which relate to that owner's lot.

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## **3. Owner's Obligations**

The Owner agrees and undertakes as follows.

### **3.1 Implementation of Offset Management Plan**

The Owner must ensure that the Offset Works are carried out in accordance with all provisions, recommendations, requirements and timeframes described in the Offset Management Plan.

**3.2 Timing and scheduling of Offset Works**

If the Owner proposes any variation to the timing or scheduling of works described in the Offset Management Plan for any calendar year, the Owner must:

- (a) notify Council and submit to Council a copy of its proposed schedule of works for the coming calendar year by 1 December in the year prior.

**3.3 Protection of Offset Works**

3.3.1 The Owner must, in perpetuity and to the satisfaction of Council:

- (a) maintain and protect the Offset Works;
- (b) protect all Native Vegetation in the Management Zone.

3.3.2 Upon completion of any part of the Offset Works, the Owner must:

- (a) maintain and protect the Offset Works in perpetuity;
- (b) not interfere with, or allow any other person to interfere with the Offset Works; and
- (c) carry out any other ongoing maintenance activities or Works described in the Offset Management Plan;

all to the satisfaction of Council.

**3.4 Ongoing obligations**

The Owner's obligations under this Agreement continue to apply:

- 3.4.1 regardless of any right conferred by the Planning Scheme;
- 3.4.2 in the event that the Subject Land (or any part of it) is subdivided; and
- 3.4.3 in the event that the Planning Permit expires, or is cancelled.

**3.5 Notice and registration**

The Owner must bring this Agreement to the attention of all prospective purchasers, lessees, mortgagees, chargees, transferees and assigns.

**3.6 Further actions**

The Owner

- 3.6.1 must do all things necessary to give effect to this Agreement;
- 3.6.2 consents to Council applying to the Registrar of Titles to record this Agreement on the Certificate of Title of the Subject Land in accordance with the Act and agrees to do all things necessary to enable the Council to do so

including signing any further agreement, acknowledgment or document or procuring the consent to this Agreement of any mortgagee or caveator to enable the recording to be made in the Register under that section.

**3.7 Council's costs to be paid**

The Owner further covenants and agrees that the Owner will immediately pay to Council the reasonable costs and expenses of and incidental to the preparation, review, execution and registration of this Agreement which are and until paid will remain a debt due to the Council by the Owner.

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**4. Agreement under section 173 of the Act**

This Agreement is made as a deed in accordance with Section 173 of the Act.

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**5. Owner's warranties**

The Owner warrants that apart from the Owner and any other person who has consented in writing to this Agreement, no other person has any interest, either legal or equitable, in the Subject Land which may be affected by this Agreement.

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**6. Successors in Title**

Without limiting the operation or effect that this Agreement has, the Owner must ensure that, until such time as a memorandum of this Agreement is registered on the title to the Subject Land, successors in title shall be required to:

6.1 give effect to and do all acts and sign all documents which will require those successors to give effect to this Agreement; and

6.2 execute a deed agreeing to be bound by the terms of this Agreement.

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**7. General matters**

**7.1 No waiver**

Any time or other indulgence granted by Council to the Owner or any variation of this Agreement or any judgment or order obtained by Council against the Owner does not amount to a waiver of any of Council's rights or remedies under this Agreement.

**7.2 Severability**

If a court, arbitrator, tribunal or other competent authority determines that any part of this Agreement is unenforceable, illegal or void then that part is severed with the other provisions of this Agreement remaining operative.

**7.3 No fettering of Council's powers**

This Agreement does not fetter or restrict Council's power or discretion to make any decision or impose any requirements or conditions in connection with the granting of any planning approval or certifying any plan which subdivides the Subject Land or relating to any use or development of the Subject Land.

**7.4 Inspection of documents**

A copy of any planning permit, document or plan referred to in this Agreement is available for inspection at Council offices during normal business hours upon giving the Council reasonable notice.

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**8. Commencement of Agreement**

This Agreement commences on the date specified on page one or if no date is specified on page one, the date the Agreement was signed on behalf of whichever party was the last to sign.

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**9. Ending of Agreement**

9.1 This Agreement will not end except in accordance with the relevant provisions of the Act.

## Signing Page

**THE COMMON SEAL** of the **WEST WIMMERA**

**SHIRE COUNCIL** was affixed by the authority

of the Council on the            day of

2017

In the presence of

\_\_\_\_\_ **Chief Executive Officer**

\_\_\_\_\_ **Councillor**

\_\_\_\_\_ **Councillor**

**SIGNED BY** the said **WILLIAM JOHN RICH** )

in the presence of:

) *Will J Rich*  
) .....  
)

*Gillian Bradburn*  
.....  
Witness

**SIGNED BY** the said **MARGERY JOY RICH** )

in the presence of:

) *Margery Rich*  
) .....  
)

*SE*

.....  
Witness

**JAMES ELLIS**  
**Agribusiness Manager**

### Mortgagee's Consent

National Australia Bank Ltd as Mortgagee of registered mortgage AM217452D consents to the Owner entering into this Agreement and in the event that the Mortgagee becomes mortgagee-in-possession, agrees to be bound by the covenants and conditions of this Agreement.

*SE*

.....  
**JAMES ELLIS**  
**Agribusiness Manager**

Signature of Witness







