

Feedback on Discussion Paper on new Public Health Act Workshop with Department of Health staff 2nd November, 2005

Principle <i>Circle your level of support ...</i>	Strongly support	Support	Opposed	Strongly opposed
Replace sanitary and nuisance provisions with a general statutory duty vested in all individuals to protect public health, backed by Local Government powers to make orders and local laws as necessary, and by policy, guidelines and licensing at State level where necessary.	6	6	1	

Comment *What will need attention in the drafting of a new Act, in relation to this principle?*

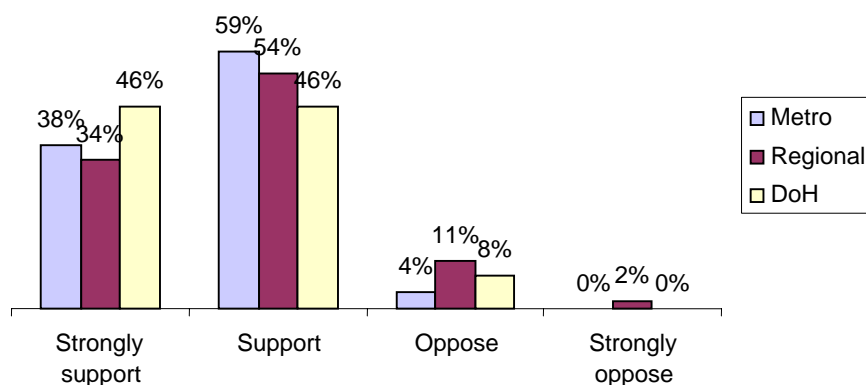
Shift to outcomes and risk management is a good approach. Risk to Public Health well defined (i.e. whether to include amenity and wellbeing). Powers need to be outcome based and focus on responsible persons demonstrating required outcomes are being achieved. Required outcomes should also involve an element of risk management. Place the onus on owner/operator to ensure a safe environment. Place the onus on owner/operator to ensure a safe environment. Outcome based. Risk based outcomes. Need education for development of policies and guidelines and educate over previous regulations. Less prescriptive requirements. New justification - risk based requirements - potential risks. Drafting of policies critical step. (in discussion...) Be clear what is covered by "General Duty" – amenity? nuisance? lifestyle diseases? "Policy" as a descriptor implies "fluffy" and is associated with Town Planning.

DoHealth should have power to influence what LG does. Ensure staff have capacity to provide advice and solutions. What powers do DOH officers have to enforce the general policy, particularly where LG may not be as willing, knowledgeable, confident in initiating prosecutions. Agreement between local government and Dept Health on the level of activities in ensuring outcomes. This agreement be achieved by Dept Health. Support General Duty so long as guidelines are provided to rein renegade councils with radical opinions i.e. ... Green Council. Some form of scrutiny to maintain a balance. (in discussion...) Devolution of responsibilities might create difficulties in assuring standards. Some auditing by DoH to meet standards we be needed. Consistency will be difficult to achieve, when only broad outcomes are specified.

Ensure there are strong local powers. Ensuring head of power still there. Adopt a new Health Act with general duties to protect Public/Enviro Health, along with enforceable codes/ Australian Standards. This legislation should include the ability to serve infringements, notices and prohibition orders plus prosecutions. Ground rules. On the spot fines. Local govt and Dept Health powers to enforce. (in discussion...) will DoH staff retain enforcement powers?

Current legislation adequate. Not sure about this. I think local govt values the ability to deal with sanitary and nuisance within its municipality. I'm not sure how another statutory vehicle could achieve this. Although I would be happy to assess another way. Local govt laws seem to be adequate.

General duty to protect public health



Principle	Local Government to have responsibility for	Strongly support	Support	Opposed	Strongly opposed
	environmental health risks	7	6		
	local plans to protect and improve public health	7	6		
	health impact assessment at local level	6	7		
	health problems of vulnerable population groups	1	12		
	prevention of lifestyle diseases		13		

Comment *What will need attention in the drafting of a new Act, in relation to this principle?*

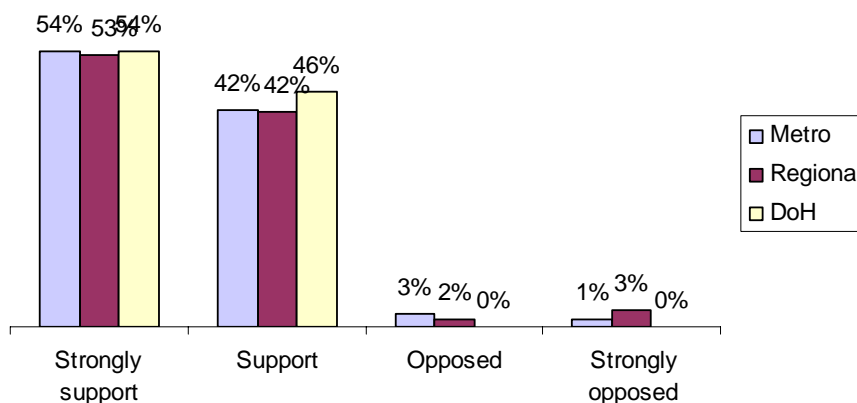
Clearly identify DoH's role, policy position and priorities. LG having responsibility not negating DOH responsibilities and guidance. Definition of DOH role. DOH would still need to provide some level of leadership in relation to items 4 & 5. Clear statement outlining the DOH's view on Environmental/Public Health aspects in WA, giving local govt. the flexibility to implement their own strategies to deal with local issues. Provide a DOH framework of key priorities of the EHD for LG to use as a guide. Provide LG with State priorities and policies. Provide stronger direction from Dept of Health. Develop policies and guidelines - specific principles - codes ... special issues.

Provide LG with models, training and support. Will need training to gain expertise in HIA. Even if assessments are contracted out the result will require implementation. Funding and possible support from State Government (points 4 and 5). General comment - it appears to be a lot of responsibility falling into LG shoulders. Possible development of a model generic plan that local govts work from. Perhaps this could be captured or called up under the new act. Local govt has indicated it wants a set of benchmarks from DOH that sets out its obligations. More resources to LG to develop Local Plans. Guidance and training from Dept of Health.

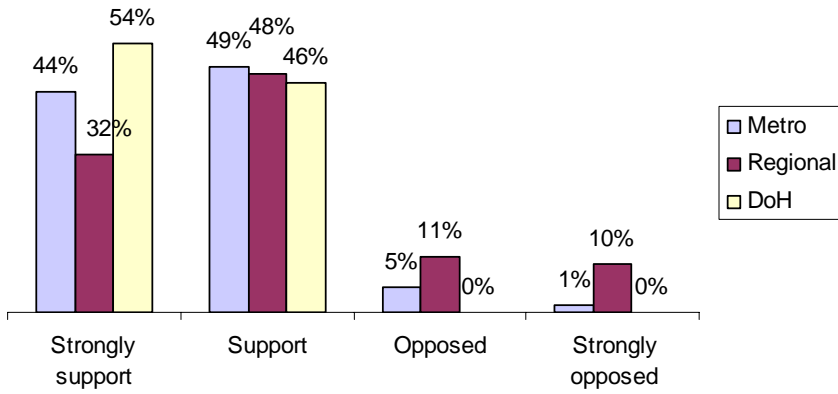
Give LG broad, not specific, responsibilities. LGA's should be required to apply the principles of the New Health Act i.e. to protect public health: LGA's should not be "limited to list". Not to provide set list of responsibilities to comply with. Local government should have an overall responsibility to manage public health issues within their districts. Specific areas could be included but only as options because to include a definitive list could be seen by some local governments as excluding other areas. These may have different appreciation and needs according to local govt. The need and activity needs to be assessed and reflected in the outcomes agreement.

Stronger penalties. Ability to issue infringement notices/improvements. What provisions we want to retain (existing act regs).

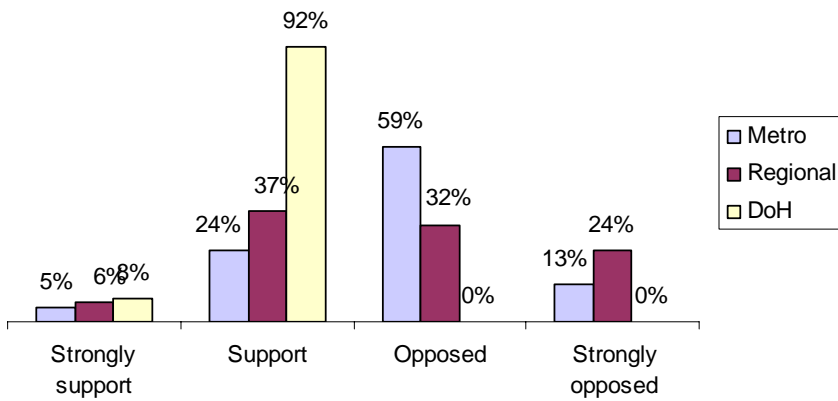
Environmental Health Risks



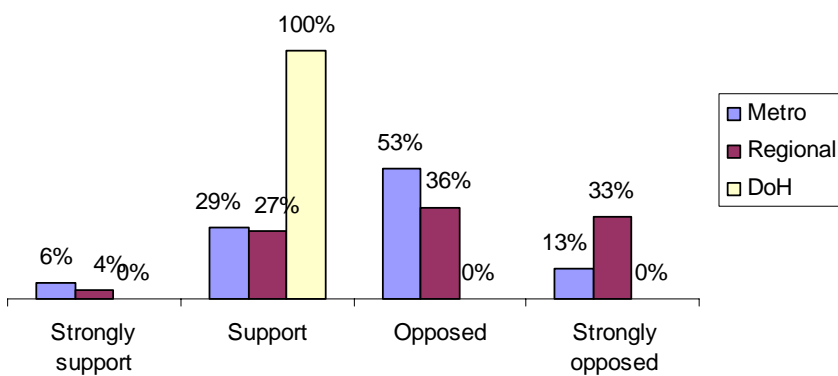
Local Plans to Protect and Improve Public Health



Health Problems of Vulnerable Population Groups



Prevention of Lifestyle Diseases



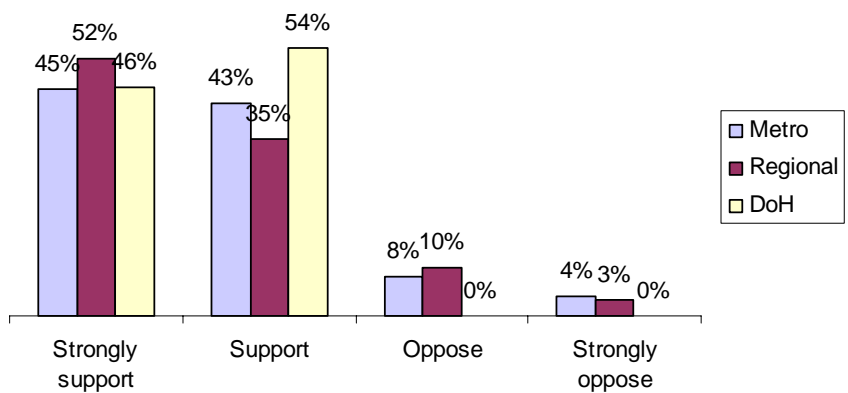
Principle	Strongly support	Support	Opposed	Strongly opposed
Local Government to have clear statutory authority under a Public Health Act to recover costs associated with its responsibilities.	6	7		

Comment *What will need attention in the drafting of a new Act, in relation to this principle?*

Local Government to have power to set own fees to recover costs. Local govt. to have the ability to set fees within certain guidelines, but this could be quite flexible dependent on the location and cost to provide the level of service to be delivered. Councils to charge fees to recover costs for inspections etc set within benchmark framework. LG should be able to recover costs associated with responsibilities to protect PH in their municipality. Power for local govts to recover costs. Emphasis on **Cost Recovery** not revenue raising. Some costs should be absorbed into general revenue of rates. Cost Recovery, not revenue raising from compulsory requirements. Recovery of costs should be restricted to actual costs of providing services. If local govt is providing a specific service in a commercial development then strongly supported. However, other activities are for the "public good" and then strongly opposed. Only fair to charge the "end user," but who will decide how and when etc. e.g. Disease outbreak - people are requested to provide samples for DOH and LG to collect, info will help the person and the authority. But there are Medicare issues, does the person pay, LG or DOH pay since we requested they submit the sample and we use that info. Open options or clearly define what councils can receive for professional health advice. Increase the fees substantially and use fines not prosecution. There will be concern with devolution of more duties to LG and provision of funding and resources and commitment by govt to allow this to happen.

Support for legal action by LG. Risk to PH is broad and unless there is clear grounds for prosecution - councils will not prosecute and be left with costs. Good prescriptive policy in key EH areas required. Legal opinions to support LG required. On spot fines for immediate action against non-compliance. Penalties to be high though to gain support from council to take offenders to court. On the spot fines. Ensure environmental health officers are encouraged to be protected in all councils.

Cost Recovery



Feedback on the workshop *Two things you've found useful about this workshop*

Opportunity to understand direction of new public Health Act. Good to be able to "voice" opinions and concerns prior to the implementation of the new Public Health Act. Good to know exactly where the Public Health Bill is at i.e. current stage. Good to know LG view point. The revised approach to legislation within the new Bill. The approach to the implementation of the Bill by the Department of Health. Additional clarification of the discussion document. Learning what direction DOH is moving towards, helps future plans. (Policy rather than practical not always good as staff need experience in order to provide advice and legal interpretations.) Direction of EH and LG and State Roles. The need to support LG in this change. Provided general overview on future legislation. Being able to raise concerns. Overview of Public Health Act. Able to compare with Food Bill. Explanation how it will happen - good luck.

Open discussion. Open discussion format. Open discussion from different perspectives. Airing of differing experiences and difficulties validated by audience thus giving clarity to the issues. Relaxed Open discussion. Ability to participate. Openness and free discussion. Ross Colliver great job. Mary Adam great job. Ability to discuss amongst group.

Other. Needed to be more staff attendance. Director at least made the time to attend. Based on risk assessment - prescriptive measures and alternatives. Measured for compliance. Working closer together DOH and LG.