



**ORDINARY COUNCIL MEETING OF  
THE HUME CITY COUNCIL**

**TUESDAY, 13 MARCH 2018**

**7.00 PM**

**HUME GLOBAL LEARNING CENTRE, CRAIGIEBURN**

**OUR VISION:**

*Hume City Council will be recognised as a leader in achieving social, environmental and economic outcomes with a common goal of connecting our proud community and celebrating the diversity of Hume.*

This meeting of the Hume City Council will be recorded and published in accordance with Council's Audio Recordings of Council Meetings Policy.



# HUME CITY COUNCIL

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**Notice of an  
ORDINARY COUNCIL MEETING OF THE HUME CITY COUNCIL**  
to be held on Tuesday, 13 March 2018  
**at 7.00 pm**  
at the Hume Global Learning Centre, Craigieburn

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To: a: Council	Cr Geoff Porter Cr Carly Moore Cr Joseph Haweil Cr Jodi Jackson Cr Drew Jessop Cr Leigh Johnson Cr Naim Kurt Cr Jack Medcraft Cr Ann Potter Cr Karen Sherry Cr Jana Taylor	Mayor Deputy Mayor
b: Officers	Mr Domenic Isola Mr Peter Waite Mr Daryl Whitfort Ms Margarita Caddick Mr Michael Sharp Ms Kylie Ezzy	Chief Executive Officer Director Sustainable Infrastructure and Services Director Corporate Services Director Community Services Acting Director Planning and Development Director Communications, Engagement and Advocacy

## **ACKNOWLEDGEMENT OF THE TRADITIONAL CUSTODIANS OF THIS LAND**

*"I would like to acknowledge that we are meeting on Gunung-Willam-Balluk land. The Gunung-Willam-Balluk of the Wurundjeri are the first and original people of this land. I would like to pay my respects to their Elders, past and present, and the Elders from other communities who may be here today."*

## **ORDER OF BUSINESS**

### **1. PRAYER**

Hume City's religious diversity strengthens and enriches community life and supports the well-being of the citizens of Hume City. Hume City Council acknowledges the importance of spiritual life and the leadership offered by the Hume City Inter Faith Leaders Network. In recognition of the religious diversity of residents in Hume City, Council has invited the Inter Faith Leaders Network to take responsibility for the opening prayer at Council meetings. This evening's prayer will be led by Mr Pradeep Chandravathy of the Kerala Hindu Society Melbourne.

*Oh God, the Protector, the basis of all life, Who is self-existent, Who is free from all pains and Whose contact frees the soul from all troubles, Who pervades the Universe and sustains all, the Creator and Energizer of the whole Universe, the Giver of happiness, Who is worthy of acceptance, the most excellent, Who is Pure and the Purifier of all, let us embrace that very God, so that He may direct our mental faculties in the right direction.*

*Amen*

**2. APOLOGIES****3. DISCLOSURE OF INTEREST**

Councillors' attention is drawn to the provisions of the Local Government Act 1989 in relation to the disclosure of conflicts of interests. Councillors are required to disclose any conflict of interest immediately before consideration or discussion of the relevant item. Councillors are then required to leave the Chamber during discussion and not vote on the relevant item.

**4. CONDOLENCE MOTIONS****5. ASSEMBLIES OF COUNCIL**

In accordance with section 80A(2) of the Local Government Act 1989, Council is required to report, as soon as practicable, to an Ordinary Meeting of Council, a record of any assemblies of Councillors held.

There are no records of assemblies to report on this section of the Agenda.

**6. CONFIRMATION OF COUNCIL MINUTES**

Minutes of the Ordinary Council Meeting of the 12 February 2018, and Ordinary Council (Town Planning) Meeting of the 26 February 2018, including Confidential Minutes.

**RECOMMENDATION:**

**THAT the Minutes of the Ordinary Council Meeting of the 12 February 2018 and the Ordinary Council (Town Planning) Meeting of the 26 February 2018, including Confidential Minutes, be confirmed.**

**7. RECEIPT OF COUNCIL AND COMMUNITY COMMITTEE MINUTES AND RECOMMENDATIONS TO COUNCIL TO BE ADOPTED**

Nil

**8. PRESENTATION OF AWARDS****8.1 Residents of the Month – Ms Fe Palmieri and Ms Di Morabito**

(Nominated by Cr Carly Moore)

**9. NOTICES OF MOTION**

Nil

**10. PUBLIC QUESTION TIME**

**NOTICE OF MEETING**

**11. OFFICER'S REPORTS**

The Mayor will ask the Councillors and gallery at the commencement of this section, which reports they wish to speak to. These reports will then be discussed in the order they appear on the notice paper. Reports not called will be dealt with in a block resolution at the end.

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**12. PETITIONS AND JOINT LETTERS**

**13. DEPUTATIONS**

**14. URGENT BUSINESS**

**15. DELEGATES REPORTS**

**16. GENERAL BUSINESS**

**17. CONFIDENTIAL MATTERS**

The Meeting may be closed to members of the public to consider confidential matters.

**RECOMMENDATION:**

**THAT the Council close the meeting to the public pursuant to Section 89(2) (sub sections as listed), of the Local Government Act 1989 to consider the following items, which are confidential for the reasons indicated:**

Report No.	Title	Reason for Confidential
COCC025	Contract - Library Collections, Furniture, Equipment and Associated Requirements	(d) contractual matters
COGE180	Contract - Provision of Training and Development Services	(d) contractual matters
COGE181	Assemblies of Council - February 2018	(h) any other matter which the Council or special committee considers would prejudice the Council or any person

**18 CLOSURE OF MEETING**

**DOMENIC ISOLA  
CHIEF EXECUTIVE OFFICER**

**8/03/2018**

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REPORT NO:	HE069
REPORT TITLE:	Hume Health and Wellbeing Plan 2017-2021
SOURCE:	Samuel Ferrier, Health and Community Wellbeing
DIVISION:	Community Services
FILE NO:	HCC17/252
POLICY:	-
STRATEGIC OBJECTIVE:	2.1 Foster a community which is active and healthy.
ATTACHMENTS:	1. <i>Partner Feedback and Response</i> 2. <i>Hume Health and Wellbeing Plan 2017-2021</i> 3. <i>Year 1 Action Plan</i>

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**1. SUMMARY OF REPORT:**

- 1.1 The draft Hume Health and Wellbeing Plan (HHWP) 2017-2021 and draft 2018-2019 Action Plan were made available for public exhibition from 13 November 2017 to 12 January 2018.
- 1.2 During this period Council staff, community members and partners were encouraged to provide feedback on the draft documents which were distributed widely across key networks and communication channels. Feedback was collected through hard-copy, face-to-face, over the phone and online surveys. The public exhibition period was the last stage of an extensive consultation process undertaken to inform development of the HHWP.
- 1.3 **Attachment 1** provides a summary of partner feedback received during the exhibition period. The Health and Community Wellbeing department's response to feedback is included in the table. Final changes have been incorporated into the final HHWP 2017-2021 (**attachment 2**) and Action Plan (**attachment 3**).

**2. RECOMMENDATION:**

**That Council adopts the Hume Health and Wellbeing Plan 2017-2021 and 2018-2019 Action Plan**

**3. LEGISLATIVE POWERS:**

- 3.1 The *Public Health and Wellbeing Act 2008* (the Act) establishes a statutory role for Council to '*protect, improve and promote public health and wellbeing within the municipal district*' (s.24).
- 3.2 To fulfill its requirements under the Act, Council is required to prepare a four year Municipal Public Health and Wellbeing Plan (MPHWP) following each general election of Council.
- 3.3 The MPHWP sets out the broad mission, goals and priorities to protect and promote public health and wellbeing within the local municipality and must:
  - 3.3.1 Include an examination of data about the health status and health determinants within the municipal district;
  - 3.3.2 provide for the involvement of people in the local community in the development, implementation and evaluation of the plan; and,
  - 3.3.3 specify how council will work in partnership with the Department of Health and other agencies undertaking public health initiatives, project and programs to accomplish the goals set out within the plan.
- 3.4 The MPHWP prepared by Council must also have regard and respond to:

**REPORT NO: HE069 (cont.)**

- 3.4.1 The Victorian Public Health and Wellbeing Plan (2015-2019);
- 3.4.2 The Climate Change Act 2010 (s.14); and,
- 3.4.3 Recommendation 94 of the Royal Commission into Family Violence – that Councils “*report on the measures they propose to take to reduce family violence and respond to the needs of victims*”.

3.5 In addition to the *Public Health and Wellbeing Act 2008*, Council operates and has delegated powers under a range of other Acts that contribute to protecting and promoting health within the municipality including the *Food Act 1984*, *Tobacco Act 1987* and *Safe Drinking Water Act 2008*.

**4. FINANCIAL IMPLICATIONS:**

- 4.1 There are no direct financial implications associated with this report. Actions included in the attached Action Plan will be achieved within existing Council budget.
- 4.2 In some instances, external funding may also be pursued to support the delivery of key action or objectives identified within the plan as well as other complementary projects and initiatives.
- 4.3 It is also possible that actions included in future action plans will require Council’s consideration for funding. These will be presented for Council consideration during the annual budget planning process.

**5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:**

- 5.1 There are no implications in relation to environmental sustainability in respect to this report.

**6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:**

- 6.1 The HHWP identifies climate change as presenting a significant threat to public health in the municipality and elsewhere. This includes the serious threats to health presented by extreme weather events, the changing spread and distribution of infectious disease, as well as future potential impacts on factors such as global food supply and potable water resources.
- 6.2 The HHWP highlights that the range of activities delivered by Council to adapt to or mitigate climate change deliver important public health benefits for the Hume community.

**7. CHARTER OF HUMAN RIGHTS APPLICATION:**

- 7.1 The HHWP is closely aligned with Hume City’s Social Justice Charter 2014 which includes the Hume Citizens’ Bill of Rights and incorporates the Charter of Human Rights and the Responsibilities Act 2006 (Vic).
- 7.2 The focus of the MPWHP is on addressing the underlying social determinants of health and responding to health inequities that exist within Hume City, thereby ensuring everyone, regardless of gender, age, culture, ability, faith, economic or social position, is afforded the same opportunities to lead healthy and fulfilling lives. This is underpinned by an implicit understanding that a fundamental right of every human being is the ‘highest attainable standard of health’.

**8. COMMUNITY CONSULTATION:**

- 8.1 The HHWP and action plan was informed by an extensive consultation and data analysis, commenced in late 2016. This included;
  - 8.1.1 Analysis of population health and socioeconomic data;
  - 8.1.2 Fourteen pop-ups consultation activities;

REPORT NO: HE069 (cont.)

- 8.1.3 Three community workshops;
  - 8.1.4 Targeted, in-depth consultation with priority groups;
  - 8.1.5 Integrated consultation alongside Population Health Unit health promotion activities; and
  - 8.1.6 The Hume Health and Wellbeing Forum 2017.
- 8.2 In addition, the HHWP and action plan drew extensively on findings of broader consultation conducted to inform the Council Plan 2017-2021, as well as key data from the 2017 Hume Community Indicators Survey.
- 8.3 The public exhibition period provided Council staff, community members and partners with a further opportunity to provide feedback on the draft HHWP and action plan. These draft documents were promoted through a range of communication channels including:
- 8.3.1 Council's YourSay webpage;
  - 8.3.2 Facebook pages;
  - 8.3.3 Grapevine Newsletter (circulated weekly to Health and Community providers operating across the Hume Whittlesea area);
  - 8.3.4 Personal email to engaged providers;
  - 8.3.5 Hume People (internal); and,
  - 8.3.6 Hume Leader and Sunbury and Macedon Ranges newspapers.

**9. DISCUSSION:**

**Public Exhibition**

- 9.1 The public exhibition period sought to gather staff, community member and partner feedback across a range of areas including;
- 9.1.1 The appropriateness of priority areas, goals and strategic objectives identified within the plan;
  - 9.1.2 Other health and wellbeing issues that could or should be considered for inclusion;
  - 9.1.3 Alignment of the draft plan and action plan with the work of partners; and,
  - 9.1.4 Readability and clarity of the plan.
- 9.2 Given the extensive involvement of staff, community members and partners throughout the plan development process, few additional comments and suggestions were received during the exhibition period. A total of 20 responses were received from;
- 9.2.1 Partners (n=4)
  - 9.2.2 Community members (n=13); and,
  - 9.2.3 Council staff/departments (n=3)
- 9.3 Feedback from partners was overwhelmingly positive, with multiple congratulating Council on developing and delivering the document:
- 9.3.1 *'Congratulations on a document that will help guide our community in its goal for better health and well-being outcomes.'* (Dianella Community Health)
  - 9.3.2 *'We are encouraged by the specifics of the document and in particular the goals set by 2025. We believe these are achievable goals if Council teams continue to work in partnership with community.'* (Sunbury Community Health).



REPORT NO: HE069 (cont.)

- 9.3.3 *“I was personally very impressed with this (MPHWP) document. I have seen great progression over the years. Well done!”* (Individual staff member, partner agency)
- 9.3.4 *“We commend Council on their stated commitment to creating a City that supports health and wellbeing of residents”* (North Western Mental Health)
- 9.4 Partners also expressed a keen desire to work with Council to fulfill the goals identified in the plan and to align efforts in order to achieve the most significant impact on population health outcomes:
- 9.4.1 *“Dianella Health commits to working in partnership with Council, aligning our priorities to achieve improvements to health and wellbeing across Hume.”* (Dianella Community Health)
- 9.4.2 *“As active enablers of Asset Based Community Development in our community, we are pleased to note the support of community led/championed health and wellbeing initiatives. We’d be keen to work with you to further develop this and other initiatives.”* (Sunbury Community Health)
- 9.5 To ensure success of the plan, several partners suggested the need for shared, short-term success measures, targets and timeframes. This would assist in aligning work programs, keep partners on track and accountable for actions.
- 9.6 The Victorian Department of Health and Human Services (DHHS) is currently undertaking a research project to determine a suite of measures that could be shared across Councils and partners for this purpose. Given this feedback from the public exhibition period and DHHS directions, Council’s Population Health Unit is currently exploring opportunities to deliver a second Health and Wellbeing Forum in early 2018 that would be used to;
- 9.6.1 Officially launch the plan;
- 9.6.2 Determine appropriate local measures for shared monitoring and reporting; and,
- 9.6.3 Explore opportunities for further alignment of work programs and actions.
- 9.7 One partner organization called on Council to feature ‘mental health’ more prominently within the plan. It was suggested that this would be best achieved by including ‘mental health’ as an additional priority area, with its own defined goals, strategic objectives and actions.
- 9.8 While the significant burden of mental ill-health is acknowledged (and documented in the plan), the HHWP adopts a holistic view of health that encompasses physical, mental and social dimensions (refer page 5). This is consistent with international definitions and best-practice.
- 9.9 The priority areas included in the plan contribute across these dimensions of health and wellbeing. For example; regular physical activity delivers physical, mental and social health and wellbeing outcomes. Therefore, including mental health as an individual priority area works against this holistic understanding of health, as well as the program logic that underpins the plan.
- 9.10 A number of comments were received from community members complimenting Council’s efforts to improve physical activity, social connections, healthy eating and unhealthy behaviors (including smoking and alcohol) in the municipality:
- 9.10.1 *‘I can see money is being spent on new facilities, which will encourage more physical activity.’*
- 9.10.2 *‘We have playgroups, social and cultural meet ups, art exhibitions and library connect activities.’*

REPORT NO: HE069 (cont.)

- 9.10.3 *'I do like that the plan emphasises the importance of fruit and vegetables and is very specific about this and doesn't just waffle on about a 'healthy diet.'*
- 9.10.4 *'I like that way that drinking alcohol on the tables on footpaths has been sectioned off from people walking by and that food areas are no smoking.'*
- 9.11 Community members also volunteered a range of actions that Council could consider for inclusion in future actions plans including:
- 9.11.1 New walking, cycling and leisure infrastructure;
- 9.11.2 Subsidized gym memberships;
- 9.11.3 Restricting supply of fast-food outlets;
- 9.11.4 Enhanced youth programs, including extended operating hours of youth centers;
- 9.11.5 Healthy eating education programs directed at mothers; and,
- 9.11.6 Advocacy to improve access and navigation through specialist and allied health services.
- 9.12 These proposed actions will be further explored by relevant Council departments.
- 9.13 Feedback received from internal departments centered on plan language, wording and reference data, ensuring consistency with current policy development/directions and newly available data sets. This included updating gambling, family violence and climate change resilience/adaptation language and data.
- 9.14 The positive feedback and strong engagement of staff, community members and partners during the exhibition period demonstrates a high level of plan buy-in and commitment. It will be critical to sustain this level of buy-in across stakeholders for effective implementation of the plan.

**Family Violence Goal**

- 9.15 It should be noted that the final HHWP has not, as yet, included a defined goal around family violence (page 24). This is a particularly difficult goal to define given that in the immediate future, reported incidents of family violence are expected to increase as a result of the increased attention and awareness of family violence following the *Royal Commission*.
- 9.16 The Victorian State government is continuing to explore appropriate targets related to family violence as well as gender equity for monitoring and reporting purposes. Additionally, an evaluation framework is currently being developed for the *Regional Prevention of Violence Against Women (PVAW) Strategy: Building a Respectful Community 2017-2021*.
- 9.17 It is proposed that an appropriate goal related to family violence be selected for the HHWP once the above State and Regional work is finalised. This will allow for alignment and consistency. It should be noted that a range of actions related to family violence are included in the action plan. These will still be progressed in absence of a goal.

**10. CONCLUSION:**

- 10.1 The extensive research and consultation conducted to develop the HHWP and Action Plan has ensured that these documents are evidenced based and accurately capture and respond to key health and wellbeing priorities for Hume City residents.
- 10.2 The positive feedback and strong involvement of community members, partners and staff throughout the development process indicates a strong level of commitment and buy in to the plan. It will be critical to sustain this commitment throughout the life of the plan in order to deliver real and meaningful impacts on Hume City health and wellbeing outcomes.

**REPORTS – HEALTHY AND SAFE****13 MARCH 2018**

Attachment 1 - Partner Feedback and Response

**ORDINARY COUNCIL MEETING OF COUNCIL**

Submission/Comment	Contributor	Response
<p>We believe that as Council is the owner and manager of sporting facilities, including aquatic centres, there is a missed opportunity to focus on reorienting these centres to provide healthier alternatives in available vending machines and 'canteens'.</p>	<p>Sunbury Community Health</p>	<p>Council has delivered a range of initiatives that to ensure healthier food and drink options are available at both Council leisure centres and other community facilities.</p> <p>Bookmark Cafes at the Broadmeadows Global Learning Centre and Splash provide healthy, tasty and seasonal food options. In operating the cafés, Kangan Tafe are required to provide a mix of 'Every Day Foods' (60%), 'Select Carefully Foods' (30%) and Occasional Foods (10%). Vending machines offering healthier snack options have also been installed at Splash.</p> <p>The traffic light system is utilised across Council's other leisure centres, ensuring there is a range of healthy cold drink and snack options available. Drink fridge displays at centres are also arranged to ensure healthier cold drinks feature more prominently.</p>
<p>We would encourage the use of the word "gambling" rather than "gaming" to reflect that this not a game and causes significant harm to local communities.</p> <p>Furthermore, terms such as 'responsible gambling' and 'responsible drinking' can be considered stigmatising in some instances, and conflicts with a public health understanding of the causes and barriers to good health. We would recommend replacing these words with a statement such as "a reduction in harms associated with the use of alcohol and gambling".</p>		<p>Change made. This is consistent with current best practice and Council's current focus on harm minimisation/reduction efforts.</p>

**REPORTS – HEALTHY AND SAFE**

**13 MARCH 2018**

Attachment 1 - Partner Feedback and Response

**ORDINARY COUNCIL MEETING OF COUNCIL**

<p>We would like to see Council refer to and involve Sunbury Community Health in regard to using a more local service for the free health checks and healthy lifestyle advice at the Sunbury Senior Citizens Centre.</p>		<p>Noted. This information has been provided to Council’s Community Support Services department who is responsible for programming and management at the seniors centres.</p>
<p>Reporting against the Action Plan is crucial for transparency and accountability. We would like to see reporting processes are as accessible as possible to community: to foster community participation in evaluation, to help determine what is working and what isn’t and ensure the community can share and celebrate successes.</p>		<p>Noted. Community participation in evaluation and reporting will be considered as the evaluation framework for the plan is finalised.</p>
<p>We applaud the strategic objectives in relation to building and enhancing community and social networks. We understand the complexities of building a goal towards reducing violence within families, home and community.</p>		<p>Noted. As described in the Council Report, an appropriate goal related to family violence is yet to be determined.</p>
<p>Having recognised the importance of partnership work in the plan, Council may choose to engage with partner organisations for discussion around joint planning and actions that could be conducted together as discussed in the Shared Vision for the North’s Outer Prevention Taskforce planning session.</p>	<p>Dianella Community Health</p>	<p>Noted. The HHWP recognises that partner involvement will be critical to achieve goals and outcomes identified in the plan.</p> <p>Staff within the Population Health Unit work closely with Dianella Community Health, other health and community partners. This includes sharing knowledge and information, joint planning and aligning efforts and work programs where appropriate.</p> <p>It is anticipated that further partnership work will be explored and delivered throughout the life of the plan.</p>
<p>To assist alignment in work programs, partners require an understanding of targets, timeframes,</p>		<p>Noted. It is acknowledged that further work is needed to determine short term indicators of</p>

<p>process and impact measures for the 2017-2021 period.</p>		<p>success that can be shared, tracked and reported on across partner organisations.</p> <p>The Victorian Department of Health and Human Services is currently undertaking research to determine a suite of indicators that could be used for this purpose. It is also proposed that a second partner Health and Wellbeing Forum be delivered by Council in order to explore opportunities for collective action and to determine appropriate shared indicators.</p>
<p>Actions led by partners not included in action plan.</p>		<p>Noted. The first action plan captures only those actions being delivered by Council. It is acknowledged, however, that many partners contribute directly and indirectly to the goals and strategic objectives included in the plan.</p> <p>The benefits and appetite for a shared Action Plan will be explored and presented for Council consideration before development of the second action plan.</p>
<p>In short, we believe that without strategies addressing mental wellbeing, there can be no health and wellbeing plan (No Health without Mental Health)</p>	<p>NorthWestern Mental Health</p>	<p>The plan adopts a holistic understanding health encompassing physical, mental and social dimensions. This is consistent with World Health Organisation definitions and understanding.</p> <p>All priority areas identified in the plan have strong links to mental health. These links are described in detail in the text accompanying each of the priority areas.</p>

<p>We believe that the plan could be significantly strengthened by:</p> <ul style="list-style-type: none"><li>• Acknowledging ‘mental wellbeing’ as integral to health, and as an important population health issue in Hume by adopting ‘mental wellbeing’ priority goal.</li><li>• Identifying a range of specific strategic to address the creation of mentally healthier community environments for all</li><li>• Identifying a range of strategies to work in partnership to build community capacity skills (inclusive of culturally and linguistically diverse sub populations and other vulnerable communities) toward achieving maximum mental health and wellbeing.</li></ul>		<p>As above.</p>
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# HUME CITY COUNCIL DRAFT HEALTH & WELLBEING PLAN 2017-2021



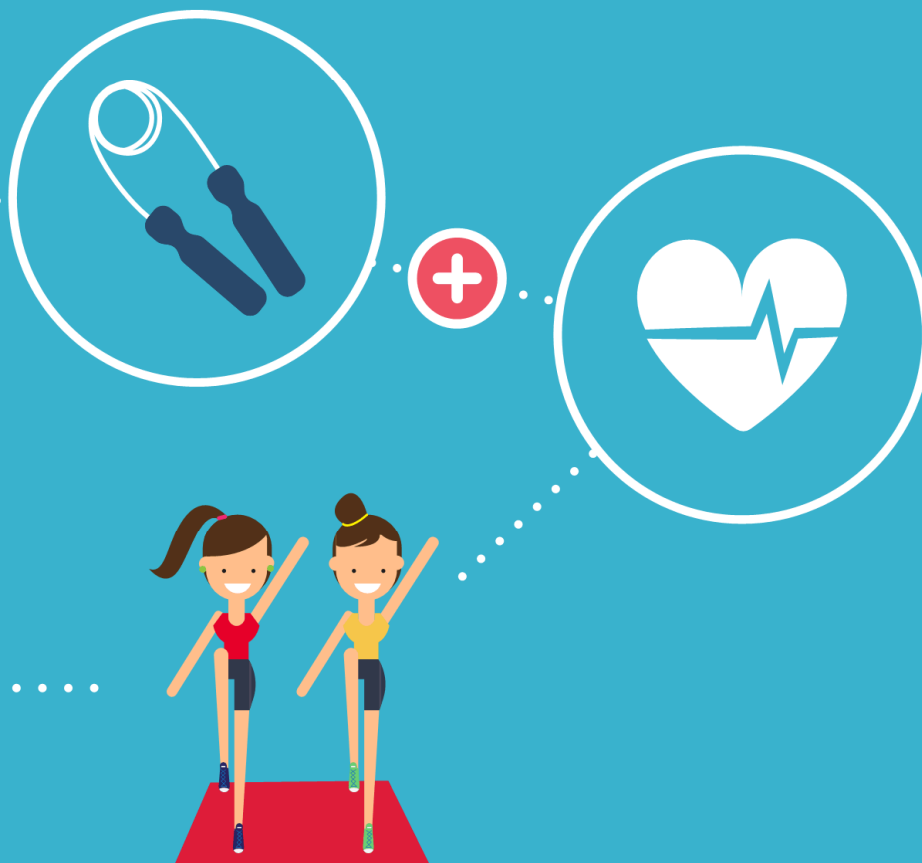




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# WELCOME TO THE 2017-2021 HUME HEALTH AND WELLBEING PLAN



*It means everything. If you don't have health  
you can't participate in the community.  
It includes exercising, having company, proper  
eating and drinking plenty of water*

*– Hume resident, Lynda Blundell  
Seniors Centre*

When we are healthy and well, our ability to work, socialise, participate and learn expands, our quality of life improves and our families and communities are safer and stronger.<sup>1</sup>

Hume City Council is committed to creating a City that supports the health and wellbeing of residents and visitors. The Hume Health and Wellbeing Plan guides how Council will achieve this; working alongside partners and community members.

Concepts of health and wellbeing mean different things to different people and cultures. The way we view health and wellbeing is also likely to change throughout life and as we transition through different ages and stages.

During the development of the plan, we asked a range of community members what health and wellbeing meant to them. The different views we heard are broadly summarised by the following statements:

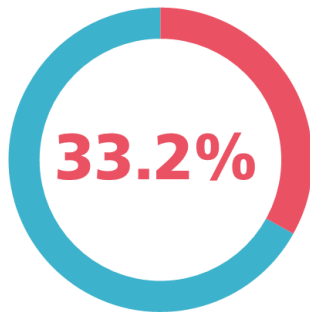
**Health:** A complete state of physical, mental and social wellbeing, not merely the absence of disease or illness<sup>2</sup>.

**Wellbeing:** The condition or state of being well, contented and satisfied with life. Wellbeing has several components, including physical, mental, social and spiritual. Wellbeing can be used in a collective sense to describe how well a society satisfies people's wants and needs<sup>3</sup>.

There are many ways that people in Hume City can remain healthy, active and connected. During consultation, people spoke about their enjoyment of local walking and cycling paths, parks and open spaces, community gardens, community facilities, sporting grounds and playgrounds – all of which contributed positively to health and wellbeing.

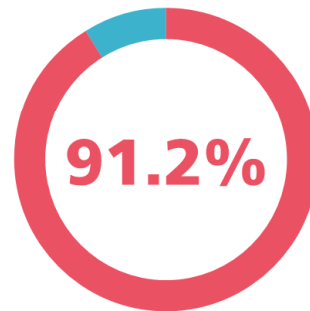
People also shared stories of things they did to look after their own health, that of their families, neighbours and community. This included things like engaging in healthy behaviours, being active and engaged in community events and activities, accessing regular health check-ups and screenings, whilst helping and encouraging others to do the same.

The plan seeks to ensure that every person in Hume City, regardless of gender, age, culture, ability, faith, economic or social position, enjoys these same opportunities to live healthy and fulfilling lives.



33.2% of people in Hume rated their health as 'excellent or very good', compared the Victorian average of 40.2%<sup>23</sup>

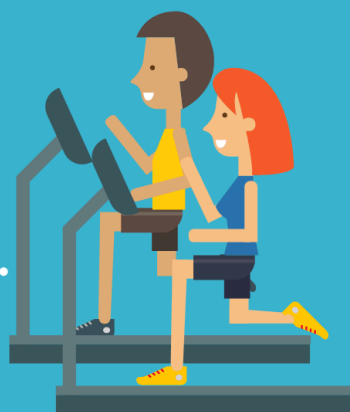
*It's about me having a healthy body and mind. Relationships with others are very important*  
– Hume resident, Craigieburn Carols by Candlelight.



91.2% report being 'satisfied' or 'very satisfied' with their lives, compared the Victorian average of 92.4%<sup>24</sup>

*For me, health is about being there for family and friends. It's about feeling well*  
– New mother, Newbury Community Hub.

# WHO'S RESPONSIBLE FOR HEALTH AND WELLBEING IN HUME?



*Getting out and enjoying yourself. It's about both mental and physical health*  
– Hume Resident,  
Gladstone Park Seniors Centre.

## Council responsibilities

Council delivers a range of services and activities that influence the health and wellbeing of people in Hume City.

This include things like managing waste, land use planning, local laws, environmental health and emergency management, as well as the delivery of a broad range of services such as families and children’s services, youth services, maternal and child health services, immunisation, aged and disability services.

Additionally, under the *Public Health and Wellbeing Act 2008*, Council has a responsibility to:

- Create environments which support the health of the community and strengthen the capacity of people to achieve better health;
- Initiate, support and manage public health planning;
- Develop and implement public health policies and programs;

- Develop and enforce up-to-date public health standards;
- Facilitate and support local agencies whose work has an impact on public health and wellbeing;
- Coordinate and provide immunisation services; and
- Ensure Hume City is maintained in a clean and sanitary condition.

Within each of these responsibilities, Council plays a range of different roles - as represented in the diagram:

## Hume City Council’s roles in health and wellbeing

Hume City Council’s Roles			
<p><b>Statutory Authority:</b> Council has a legislated responsibility under Victorian Law to protect, improve and promote health and wellbeing in Hume City.</p>	<p><b>Service Provider:</b> Council is a leading provider of services which support health and wellbeing amongst community members. Responsibility for these services is often shared with other government agencies, not-for-profit, non-government organisations and private industry.</p>	<p><b>Facilitator:</b> Council facilitates, partners and plans with a range of other agencies and service providers to support and promote health and wellbeing outcomes in Hume City.</p>	<p><b>Advocate:</b> Council plays an important role in advocating on behalf of the community to other levels of government and service providers in order to ensure local health and wellbeing needs and priorities are addressed.</p>

### Partners and Community Members'

Health and wellbeing is shaped and influenced by factors that sit outside the activities of Hume City Council. These factors include the conditions people are born in, grow up, live in, work in and age in.

This means that many people and organisations are involved and must work together to support and improve health and wellbeing within the Hume community.

This includes other levels of government, hospitals and community health services, non-government and voluntary organisations, the media, as well as private industry. Just as importantly, individuals, families and communities play a critical role in supporting and improving health and wellbeing. Everyone has a role to play.

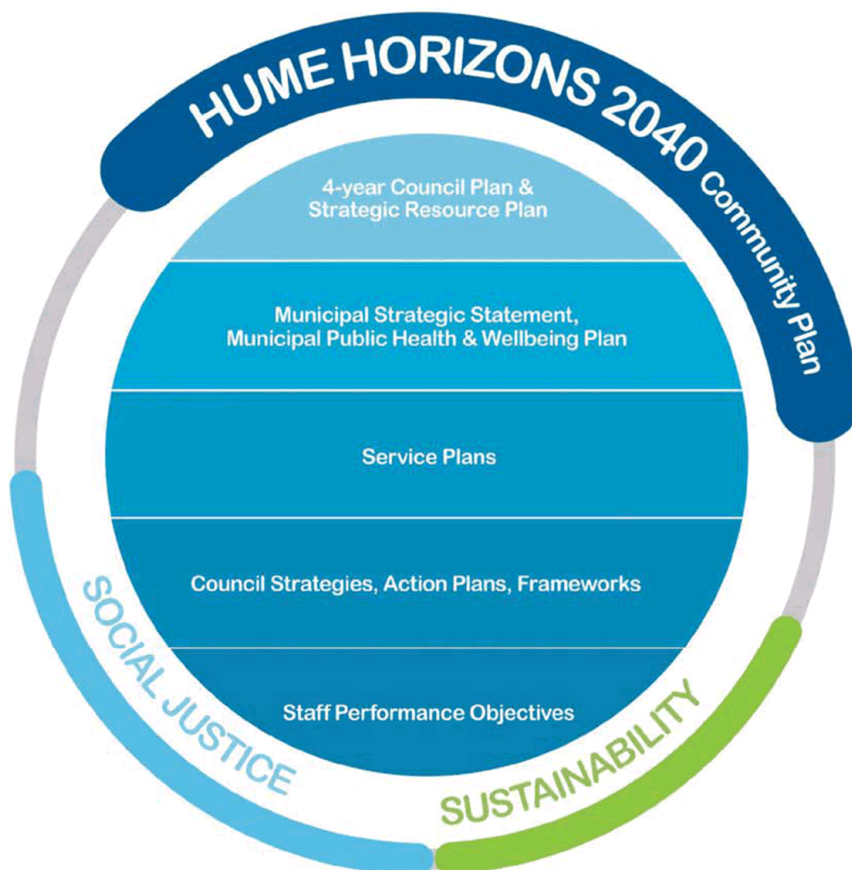
### Council's Planning Framework

The Hume Health and Wellbeing Plan is one of Council's four strategic documents that guide directions and operations at a local level. Council is required to prepare the Plan under the Public Health and Wellbeing Act 2008.

The Plan sits within Council's broader strategic planning framework that incorporates the Hume Horizons 2040 Community Plan, Hume City Council Plan 2017-2021 and the Municipal Strategic Statement. Each of these strategic documents is described in more detail in

#### Appendix 1.

The diagram below shows the relationship between the Health and Wellbeing Plan, other Council strategic documents and Council operations:

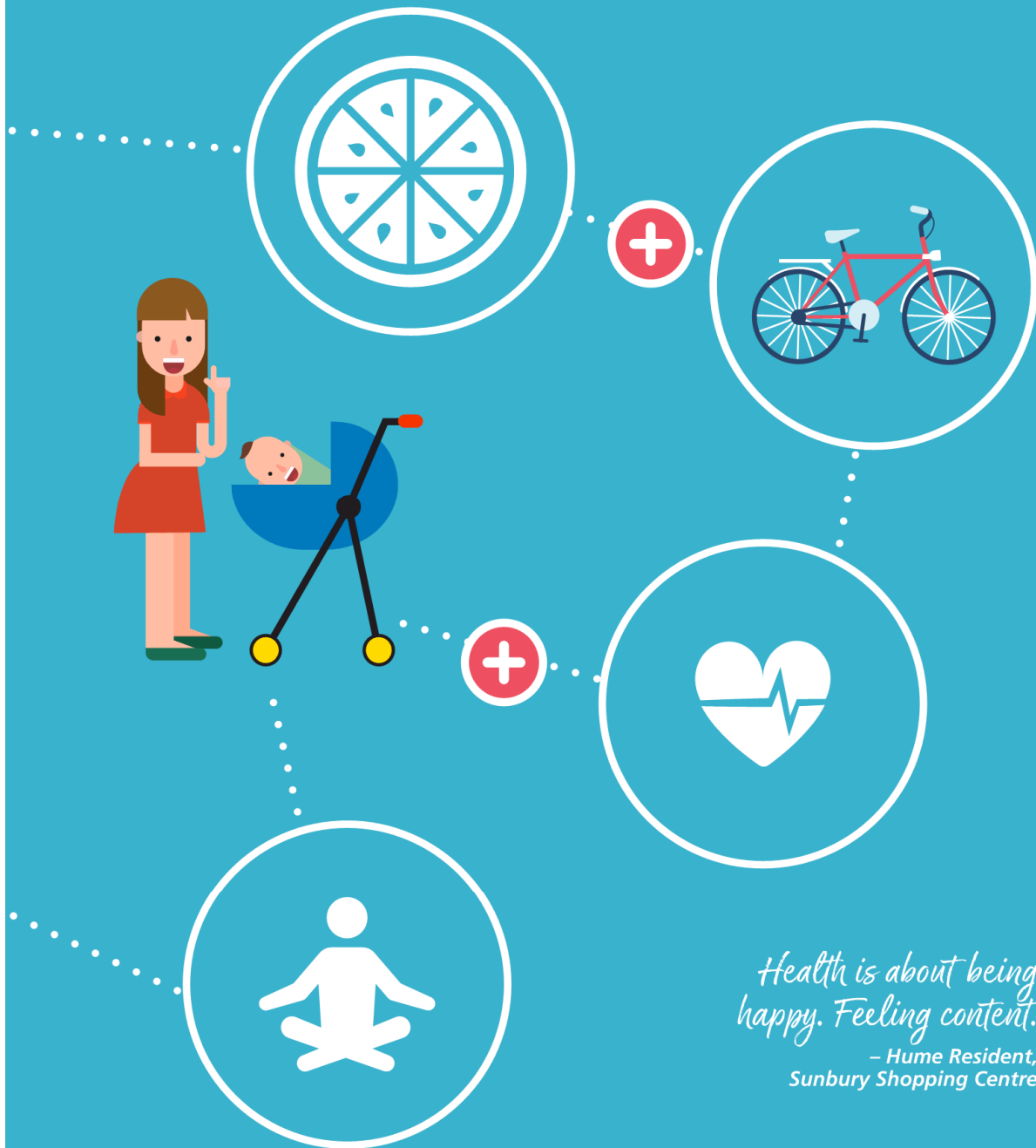




Hume City Council Draft Health & Wellbeing Plan 2017-2021

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# DEVELOPING THE PLAN



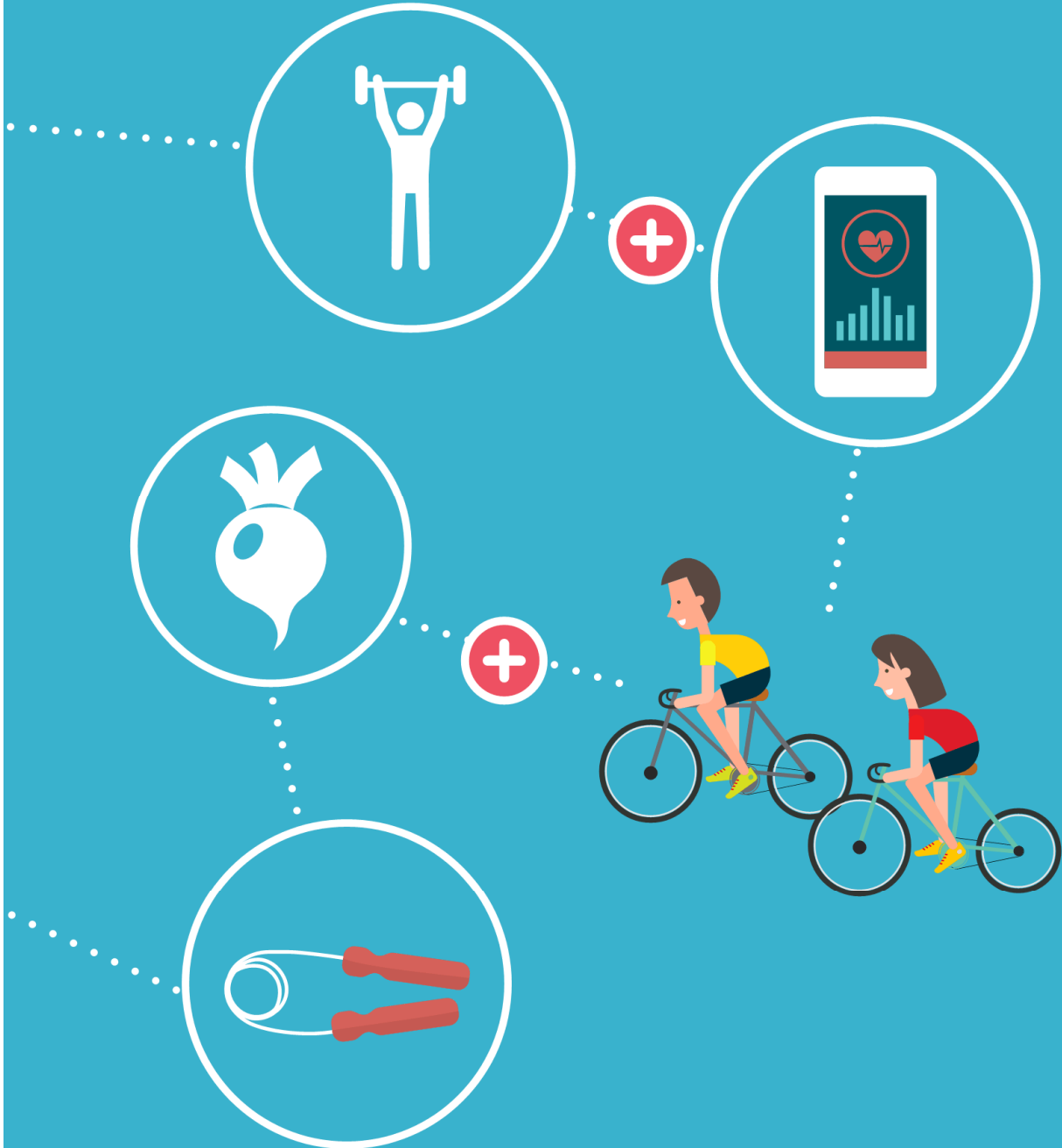
*Health is about being  
happy. Feeling content.*  
– Hume Resident,  
Sunbury Shopping Centre



The Plan has been informed by extensive research, data analysis and consultation across Council departments with partner organisations and community members. This has provided the strong evidence-base for the plan.



# PLANNING FRAMEWORKS AND PRINCIPLES



A number of important frameworks and principles have been used to develop and inform this plan. These frameworks and principles also underpin the approach Council will take to improve the health and wellbeing of residents and visitors, including selection of actions emerging from the Plan.

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## **Frameworks and Principles**

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### **Social Determinants of Health**

The plan recognises that the conditions and environments people are born in, grow up in, live in, work in and age in significantly influence their health and wellbeing. Through the plan, Council aims to create built, social, natural and economic environments that support people to achieve optimum health and adopt healthy lifestyles and behaviours.

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### **A Population Health Approach**

The plan focuses on improving health and preventing illness, disease and injury before it occurs. This means keeping healthy people well, whilst also working with those people who are at an increased risk of developing illness.

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### **Health Equity**

The plan seeks to promote fairness and opportunity for health for all people in Hume City. This is underpinned by Council's commitment to social justice. Equitable health outcomes will be achieved by delivering a combination of universal actions that change the structures and environments that cause inequities, alongside targeted actions and approaches that strengthen and support disadvantaged population groups.

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### **Life course and Place-based approaches**

The places people spend their time shape and influence health and wellbeing. Additionally, throughout life, individuals are likely to experience multiple changes in health. A deep understanding of the interaction of place and life stage on health and wellbeing will be used to design and deliver both place-based and life-stage specific initiatives.

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### **Culture of action, reflection and experimentation**

Wherever possible, actions arising from this plan will be grounded in the available evidence. However, some actions will also be experimental - providing insights and learnings where the evidence base is lacking. An ongoing process of reflection and adaptation will enable Council to learn and revise its actions and approaches accordingly.

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### **Working with partners and community members**

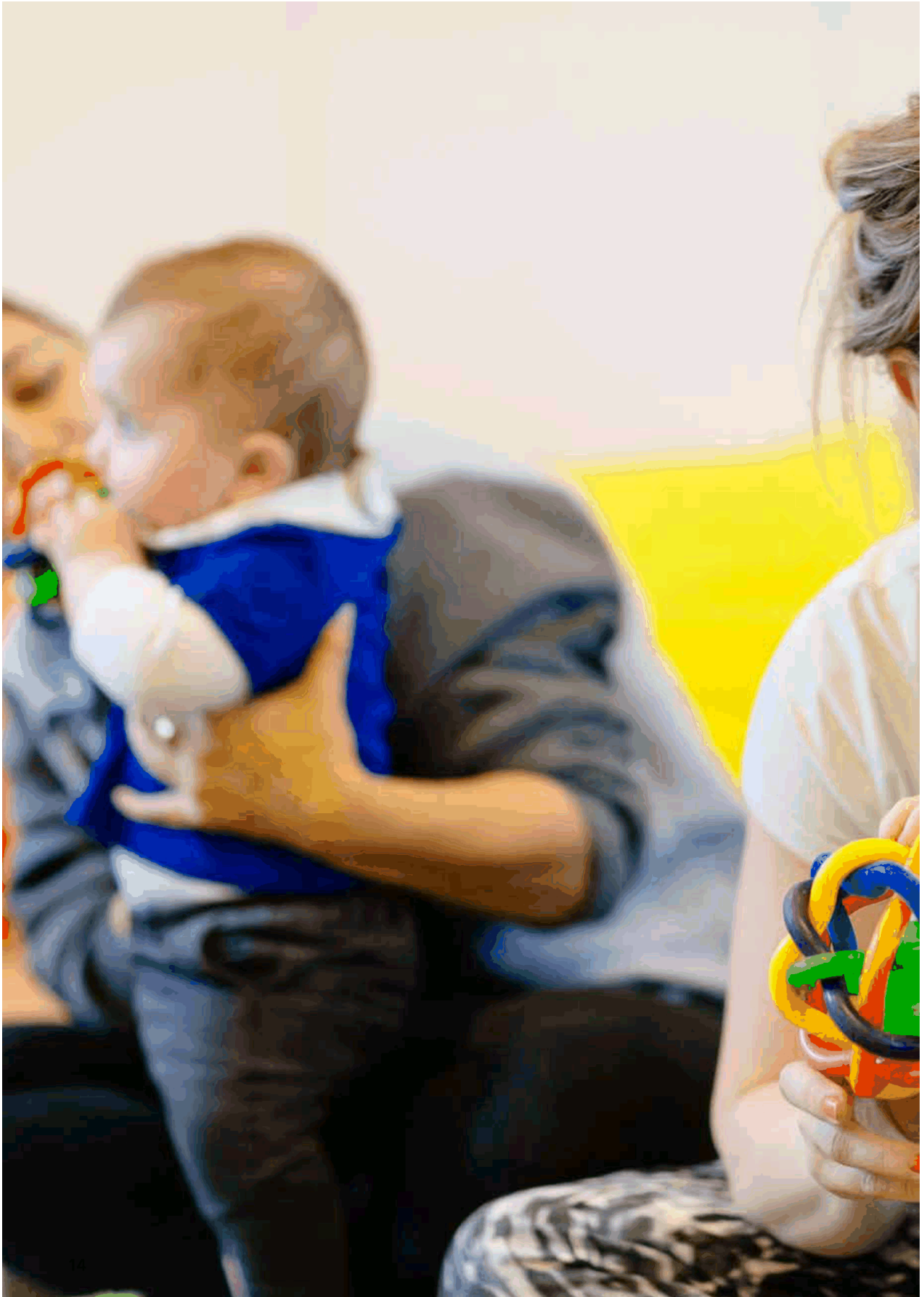
This plan seeks to support coordinated, participatory and complementary activities across Council departments, partners and the community. Doing so will enable the us to achieve the most significant impact on the health and wellbeing of people in Hume City.

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### **Outcomes focussed**

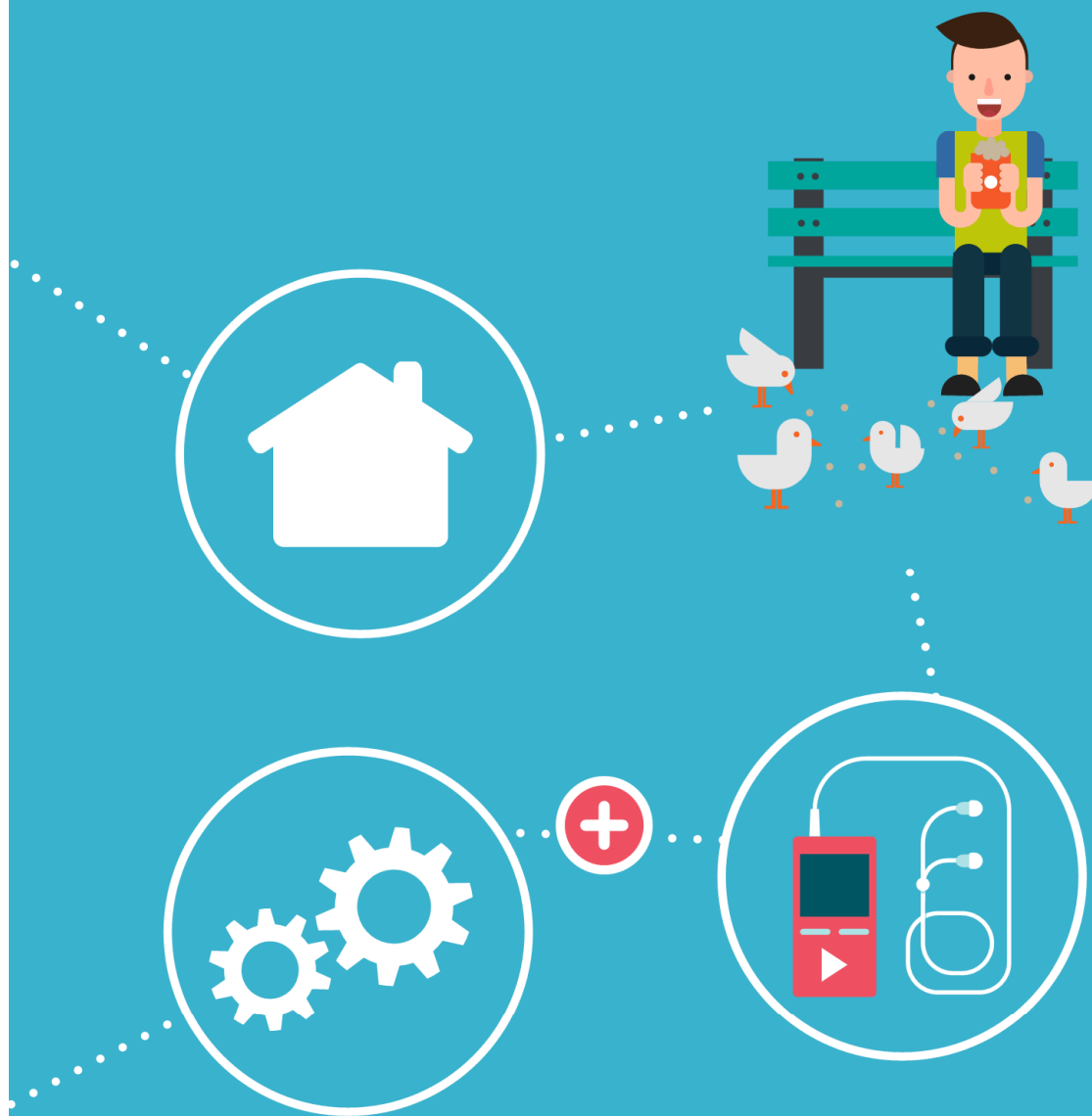
This plan focusses on achieving long-term outcomes for the Hume community. Clear, long-term goals are included in the plan to keep Council heading in the right direction. Shorter term measures of success will be used to track progress towards these goals.

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# HUME CITY



Hume City is located in Melbourne’s northern growth corridor and is one of the fastest growing and largest growth municipalities in Melbourne.

From 2017 to 2041, the population is forecast to grow from 209,777 to 362,266<sup>4</sup>. Urban growth continues to occur in the areas of Sunbury, Craigieburn, Greenvale, Mickleham and Kalkallo. Population growth will be driven through the combination of Greenfield development in these areas, as well as the regeneration and renewal of more established suburbs such as Broadmeadows, Tullamarine and Gladstone Park.

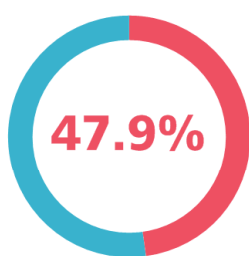
Compared to Metropolitan Melbourne, Hume City residents are relatively young in age and there is a higher proportion of family households in the area. However, the City’s population is ageing, with the population aged 65+ expected to grow by 115% or 24,024 people between 2017 (20,913) and 2041 (44,937)<sup>5</sup>.

The City is one of the most culturally diverse local government areas in Victoria. Residents come from more than 160 different countries and speak over 140 languages. Each week, 47 new migrants move to the City. Forty six per cent of Hume City residents speak a language other than English at home<sup>6</sup>. In addition to cultural diversity, Hume City is home to people of diverse socio-economic status, abilities, support needs, sexual orientation and gender identities. This diversity contributes to the rich tapestry that is Hume community life.

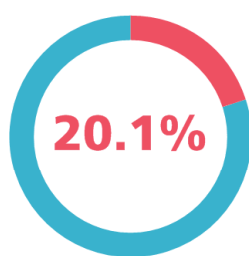
The Gunung-William-Balluk of the Wurundjeri are the Traditional Custodians of the region. There is a rich and diverse Aboriginal and Torres Strait Islander community in Hume City and in 2016, there was 1,456 Aboriginal people living in the area. This represents 0.69% of the total population of Hume City<sup>7</sup>.

There is great diversity in the health and wellbeing amongst Hume City residents. Whilst the majority of residents remain healthy and well, others experience poor mental and physical health outcomes. Alongside the rest of Australia, a rising proportion of people in Hume City are living with avoidable chronic health disease.

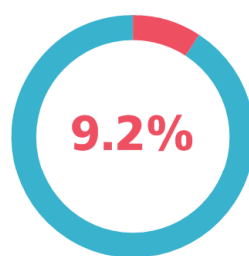
Population growth, occurring alongside population ageing, a growing burden of chronic disease and climate change presents significant challenges for Hume City. This plan, alongside the health prevention, promotion and planning effort of others seeks to respond to these challenges.



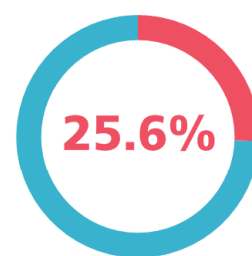
47.9% of Hume City residents are living with one or more chronic diseases <sup>25</sup>



In 2014, 20.1% of Hume City residents reported being diagnosed with anxiety or depression at some point in their lives <sup>26</sup>



9.2% of Hume City residents were living with type 2 diabetes in 2014, compared to the Victorian average of 5.3% <sup>27</sup>

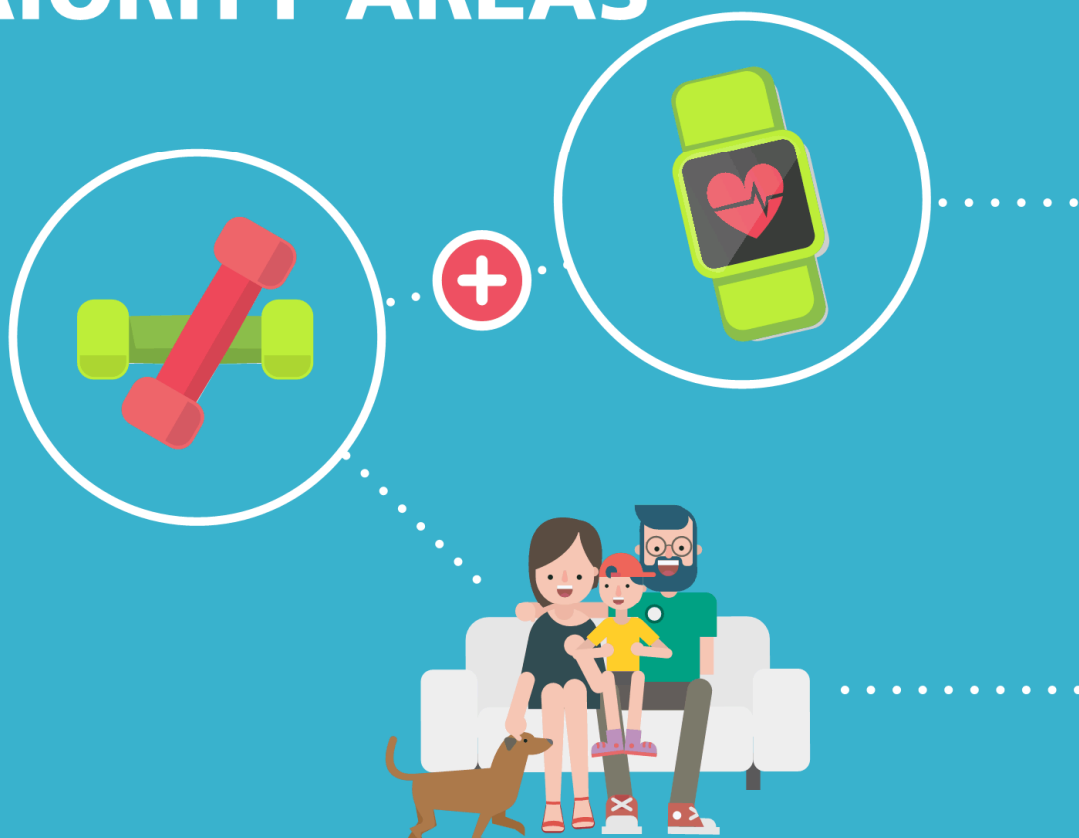


In 2014, 25.6% of Hume City residents reported ‘fair’ or ‘poor’ health status <sup>28</sup>





# HEALTH AND WELLBEING PRIORITY AREAS



The priority areas included in this plan have been selected for the significant impact they have on the health and wellbeing of Hume City community members, their amenability to change and for their alignment with priorities of state and local-level partners.

Each of the priority areas is complex and improvement across each will take time. As such, under each area we've identified ambitious 8-year goal and strategic objectives that will be worked towards in order to achieve these goals. Throughout delivery of the plan, Council will monitor its success in each area against a series of quantifiable and qualitative indicators.

# BEING ACTIVE

We can significantly improve health by moving more and sitting less.



A significantly larger proportion (30.5%) of Hume residents report engaging in no physical activity during the week compared to the rest of Victoria (18.9%)<sup>29</sup>



*'I'd like big slides and lots of trees and other things which are interesting to young people. It would be good to have art tiles and maybe school kids could make them'*

– Community Consultation, Sunbury Youth Centre

## Goal:

10% increase in sufficient physical activity amongst Hume City adults by 2025.

## Strategic Objectives:

Support the provision of land and infrastructure that encourages physical activity.

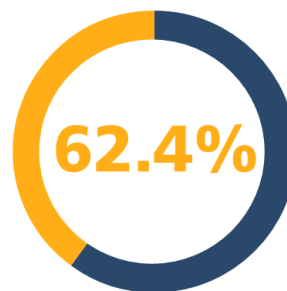
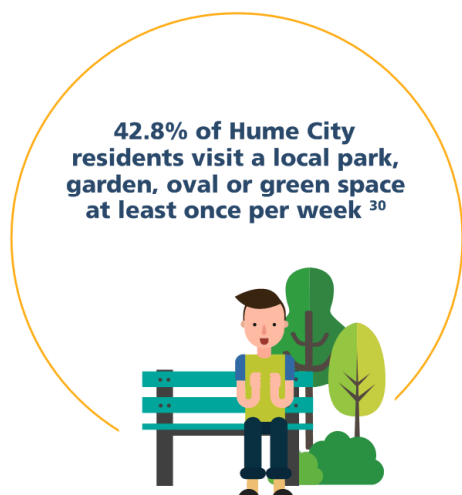
Promote and support participation in active travel, sports, active recreation and leisure.

Encourage participation in parks and open space.

Being physically active provides important benefits across the lifespan. In childhood and adolescence, physical activity contributes to mental and physical health, whilst supporting optimal growth and development. Adopting an active lifestyle early on can lay the foundation for lifelong participation. In adulthood and older age, physical activity continues to support mental and physical health, whilst reducing the risk of injury and preventing disease.

To improve physical activity, we need to promote and encourage participation in sports, exercise, active travel and other forms of recreation, whilst reducing sedentary behaviours - such as time spent sitting and screen-time. It's also necessary to tackle the barriers that make it hard for people to live an active lifestyle. This includes ensuring that people feel safe to get out and active in the community and providing a range of affordable, inclusive physical activity opportunities that work with the busy lives of individuals.

In addition to health benefits, physical activity delivers important social and economic benefits for Hume City. This includes improved social connections between people, increased productivity and positive changes to local environments (such as through reduced traffic congestion and safer neighbourhoods).

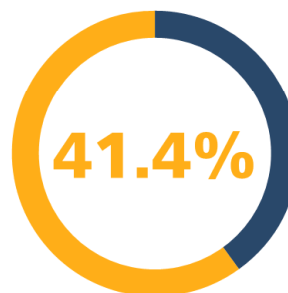


In 2013, 62.4% of children in Hume City reached the recommended amount of physical activity every day<sup>31</sup>

*'It's about supporting others to get over the initial barriers to exercise, helping people to take small steps. We need more information - because there are opportunities out there'*

*-Community Consultation, Craigieburn Resident.*

Parks and open space in the City are important public resources that provide opportunities for people of all ages to be physically active. These spaces provide opportunities to connect socially with family and friends, to meet and interact with others, connect with nature and for children to play, learn and explore. Being in these natural environments also contribute to health by reducing stress, improving concentration and productivity, and by providing a sense of connection. To make the most of these opportunities, parks and open spaces need to be accessible, safe, interesting and appealing to people of all ages and abilities.



In 2014, 41.4% of Hume City adults participated in sufficient physical activity<sup>32</sup>

# HEALTHY EATING

Most Hume residents have enough to eat and recognise the importance of healthy eating.



15.8% of Hume City adults report consuming sugar-sweetened soft drinks on a daily basis, compared to 11.2% for the rest of Victoria <sup>33</sup>



*'I cook healthily, avoid junk food and try as best I can to avoid my children being exposed to marketing and advertising of unhealthy foods. This is difficult on my own. There has to be better ways to work together*

*- Community Consultation, Supported Playgroup Broadmeadows*

## Goals:

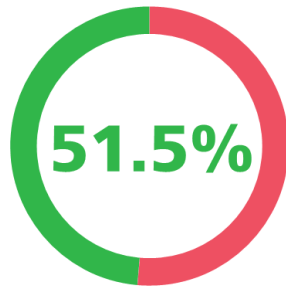
- 10% increase in Hume adults consuming the recommended dietary intake of fruit and vegetables by 2025.
- 5% decrease in the number of adults consuming sugar-sweetened drinks on a daily basis by 2025.
- 10% increase in the proportion of babies fully breastfed at 3 months of age by 2025.

## Strategic Objectives:

Promote the consumption of healthy foods.

Deliver initiatives that make healthy choices easier choices for Hume residents.

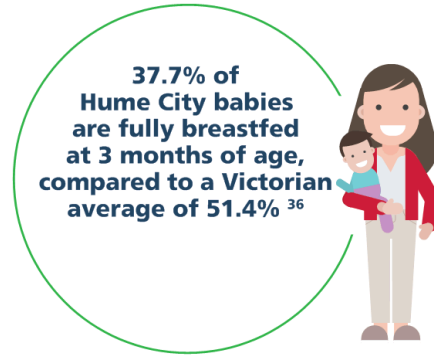
Create a secure, healthy and sustainable food system.



In 2014, 51.5% of people in Hume did not comply with fruit and vegetable consumption guidelines <sup>34</sup>

A healthy diet is central to health and wellbeing. Fruit and vegetables are the cornerstone of a healthy diet. They contribute to health by delivering essential nutrients including vitamins, minerals and dietary fibre which are needed for bodies to function at their best, whilst reducing the risk of becoming overweight or obese, heart disease and certain cancers. Unfortunately, less than half of Hume City adults achieve their recommended dietary intake of fruit and vegetables.<sup>8</sup>

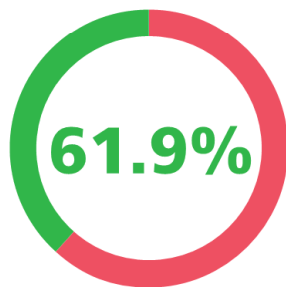
Consuming a healthy diet also means limiting foods that impact negatively on health. Discretionary foods, or 'junk foods', such as sugary drinks, takeaway foods, biscuits, cakes, confectionary and alcohol are typically high in sugar, fats and/or salt. These foods tend to be high in energy, whilst providing little nutritional value. Overconsumption of these foods contributes to weight gain, the development of chronic disease, illness and tooth decay.



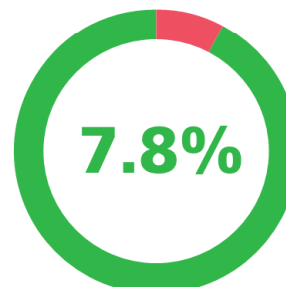
Some Hume residents experience food insecurity meaning they lack access to sufficient amounts of safe, nutritious food required for normal growth, development, active and healthy living. Council and partners can improve food security by encouraging food growing, reducing social and economic inequities and working closely with food relief providers.

For babies and infants, breastmilk is the healthiest food for the first six months of life<sup>9</sup>. During this period, breastmilk provides all the nutrients and fluid a baby needs, supports the baby's immune system whilst building loving and nurturing bonds between mother and child. Supportive workplaces, public places and spaces with suitable facilities are needed to encourage and support breastfeeding.

During consultation, many community members said they wanted a healthy diet for themselves and their families. However, there was often a gap between this aspiration and daily reality. Consuming a healthy diet was not just down to individual choice and willpower. The environments we live in influence food choices - from the availability and affordability of fresh fruit and vegetables, marketing and promotion of unhealthy options, confusing dietary information to time pressures and cultural or social norms<sup>10</sup>. A healthy food choice isn't always the easiest choice. Working together, it's possible to change this.



In 2014, 61.9% of Hume City residents were overweight or obese compared to 49.2% for the rest of Victoria <sup>35</sup>



In 2013, 7.8% of children in Hume City were living in families that ran out of food and couldn't buy more, compared to 4.9% for the rest of Victoria <sup>37</sup>

# BEING CONNECTED

The connections we share with others have a big influence on our mental health and wellbeing.



*'Around here is pretty safe.  
But I probably wouldn't  
exercise at night.'*

- Community Consultation,  
Roxburgh Park Youth and  
Recreation Centre

81.1% of people in  
Hume City agree that  
diversity is a good thing  
for society <sup>38</sup>



## Goals:

- Family violence indicator - TBC
- 5% decrease in the proportion of Hume residents who report being highly or very highly socially isolated by 2025.

## Strategic Objectives:

Develop and deliver activities and events that build and enhance community and social networks.

Promote and develop safe and gender equitable communities, cultures and organisations where relationships are equal, non-discriminatory and respectful.

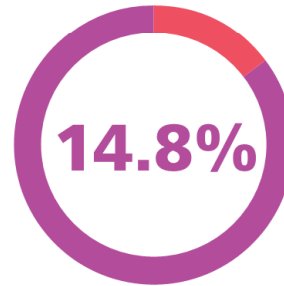
Enhance the real and perceived safety and amenity of public places and spaces.

Social connections comprise the people we know; the family we belong to, the friends we confide in and the neighbourhoods and communities we live in. Strong social networks make us feel cared for, valued and can encourage adoption of healthier lifestyles and behaviours<sup>11</sup>. Social supports can also help to overcome stressful life situations and events - such as the loss of a loved one or changes in health<sup>12</sup>. Conversely, social isolation negatively impacts on physical and mental health; leading to an increased risk of depression, anxiety, psychological distress, other illness and disease<sup>13</sup>.

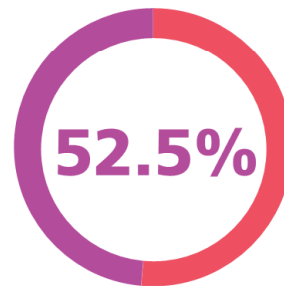
Providing opportunities for people to connect, join a group, volunteer, be heard or engaged in social, arts, cultural, community, leisure and environmental activities can enhance health and wellbeing outcomes. At an individual level, getting to know neighbours can build social networks, prevent social isolation and lead to a more connected and cohesive neighborhoods.

For people to participate in social groups and the community, they must feel welcomed and accepted. Being respectful of and establishing connections between people of different ages,

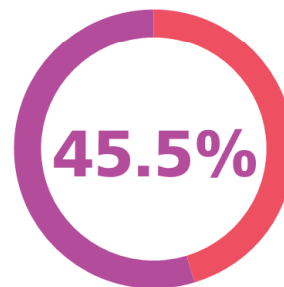
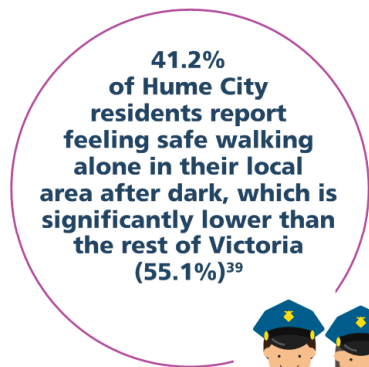
backgrounds and identities enrich individuals' lives and that of the broader community. Events, activities, community groups and spaces that bring people together foster understanding and acceptance, enhance feelings of safety and broaden social networks. Places and spaces in Hume City that are perceived as safe support community participation. The built environment, including the way we design, maintain and light these environments has a high impact on perceptions of safety.



14.8% of Hume City residents report high or very high levels of psychological distress<sup>40</sup>



52.5% of people in Hume felt they could definitely get help from family, friends of neighbours<sup>41</sup>



45.5% of people in Hume are actively involved in community, social or sporting groups<sup>42</sup>

In 2016-17, there were 1,479 reported family violence incidents in Hume per 100,000 residents, compared to 1,242 for the rest of Victoria <sup>43</sup>



*'I feel more accepted by the community here. I am a refugee and when I first arrived, I lived in [outside municipality]. People there looked at me, were racist towards me'*

*- Community Consultation, Supported Playgroup, Broadmeadows.*

Families play a critical role in supporting health and wellbeing – particularly in the early years of life. Family violence destroys families and undermines the whole of Hume City's community causing substantial physical and psychological harm. Preventing family violence requires a range of people and organisations working together. This includes all levels of government, workplaces, schools, women's health organisations, community organisations, sporting groups, individuals, families and carers. To prevent family violence, it's essential to promote respectful and non-violent relationships between individuals; to promote and normalise gender equity, and ensure there is easy access to services and supports if and when they are required.

*'Respectful behaviour and safety starts from the home.'*

*- Community Consultation, Craigieburn Shopping Centre*

In 2014, 20.5% of Hume City adults report being highly or very highly socially isolated <sup>44</sup>



*'I live by a small park and have started a weekly barbeque with my neighbours. I just knocked on their door each week and invited them to come along.'*

*- Community Consultation, Craigieburn Carols by Candlelight.*





Hume City Council Draft Health & Wellbeing Plan 2017-2021

# PROTECTING HEALTH

There are steps we can take avoid or reduce risk of ill-health.



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## Goals:

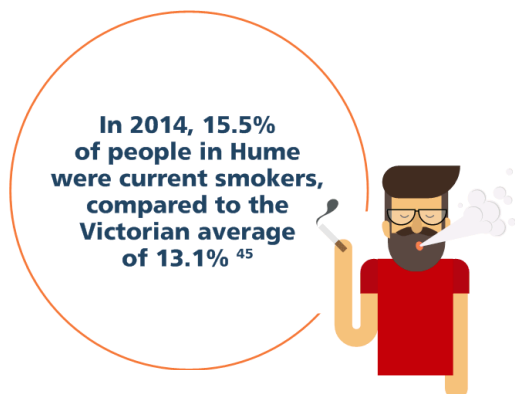
- 30% decrease in smoking by Hume City adults by 2025.
- 10% decrease in excess alcohol consumption amongst Hume City adults by 2025.
- 20% decrease in electronic gaming machine losses by 2025.
- 95% of children are 'fully immunised' at age 5 years by 2025.
- Net increase in street and park trees.

## Strategic Objectives:

Deliver activities that minimise the harms of tobacco, alcohol and gambling.

Deliver targeted initiatives and information to enhance immunisation uptake.

Enhance climate resilience of public places and spaces, infrastructure and private housing stock.

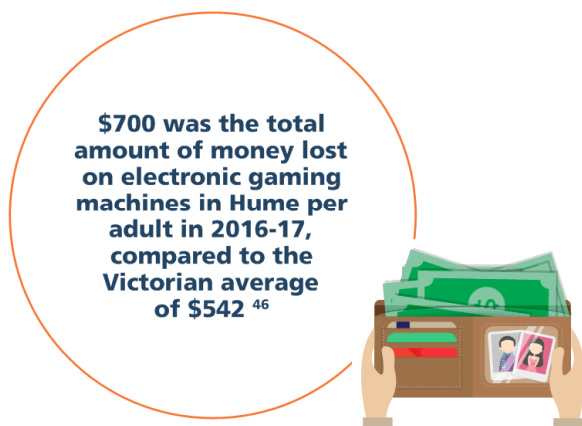


Smoking remains a major cause of preventable death and ill-health. The health risks associated with smoking increase the earlier a person takes up the habit and the longer they smoke. Therefore, we need to ensure less young people start smoking. Passive smoking, or exposure to others who smoke, also impacts negatively on health. Even small amounts of exposure to tobacco smoke is harmful. Compared with adults, children are more susceptible to the effects of second-hand smoke.

Whilst smoking rates in Hume City are declining, rates are higher than the rest of Victoria. Smoking also remains common amongst some groups within the community, such as those with lower incomes and those who have mental illness<sup>14</sup>. The less people smoke and are exposed to second-hand smoke, the greater the health gains to be made. These gains can be realised by promoting tobacco-free lifestyles, denormalising smoking behaviour, and establishing smoke-free environments. Working together, it's possible to create a tobacco-free Hume City.

In 2015, 23.4% of Hume City residents were at risk of short-term harm from alcohol<sup>15</sup>. The harms associated with excessive alcohol consumption extend beyond individuals - impacting on families and the broader community through increased street violence, sexual assault, family violence, road trauma and reduced public safety. When more alcohol is consumed on a single occasion, skills and inhibitions decrease while risky behaviours increase – leading to a greater risk of injury. Health promotion efforts around alcohol and denormalising drinking culture are important ways that the harms associated with alcohol can be minimised.

Gambling causes significant harm to individual gamblers, their families and the community. Even people gambling at 'low' or 'medium' risk levels are susceptible to these harms<sup>16</sup>. Harms from gambling include mental health issues, relationship breakdown, lowered work productivity, job loss, bankruptcy and crime. Family members of people who gamble may also experience loss of personal and household income, violence and the development of gambling problems or other addictions amongst other family members<sup>17</sup>.



Providing alternate recreation options, limiting the number and access to Electronic Gaming Machines (EGMs), advocating for improved design of EGMs and delivery of accessible services and supports for gamblers and their families are important ways that the harmful impacts associated with gambling can be minimised.

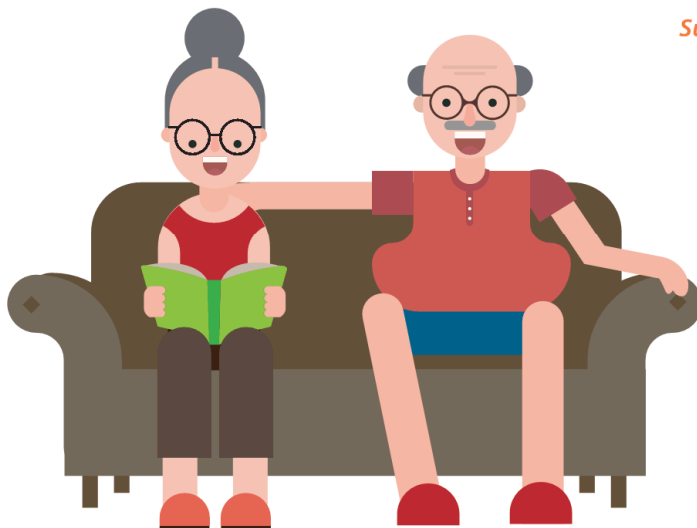
Immunisation not only protects individuals but also others in the community by minimising the spread of a range of preventable diseases and infections. Improving vaccination coverage rates requires easy access to immunisation information and services alongside proactive outreach efforts for un or under immunised groups within the population.

Already, climate change is causing illness and death by altering the distribution of infectious diseases and causing death and injury through increasing frequency and severity of weather events such as heatwaves, bushfires and thunderstorms. Into the future, climate change is expected to lead to an increase in climate refugees and impact upon global food security<sup>18</sup>.

While the impacts of climate change affect all residents, certain groups within the community are particularly vulnerable. This includes low income households, those who are socially isolated, older people, people with pre-existing medical conditions and people from culturally and linguistically diverse backgrounds. Actions led by Council and others to adapt to and mitigate climate change deliver positive health improvements for Hume City. These actions include increasing the number of trees across the City to reduce the urban heat island effect, planning and building in ways that deal with future climate conditions, retrofitting existing housing and infrastructure to improve resilience and ensuring there are robust emergency responses in place for extreme weather events.

*"I was a smoker when I first become pregnant. Adopting a positive mindset was really important. I drew on my motivation to be healthy for my baby, I got involved in more social activities and focussed on other areas of my health such as diet and exercise. I made progress. This change in mindset and focusing on the progress I'd made in other areas was the key to helping me quit."*

*- Community Consultation,  
Supported Playgroup, Broadmeadows*





Hume City Council Draft Health & Wellbeing Plan 2017-2021

# CAPABILITIES TO PARTICIPATE

Equitable access to work, education and housing promote health and wellbeing.



*'If you need housing, you shouldn't have to leave here.  
You should stay near your family and friends...'*

– Community Consultation,  
Sunbury Youth Centre

## Goals:

- 10% increase in the number of Hume residents aged 15-24 years who are engaged in fulltime employment, education or training.
- Housing diversity indicator - TBC.

## Strategic Objectives:

Support initiatives that build a strong and sustainable local economy.

Support initiatives that reduce people's barriers to meaningful employment, education and training opportunities.

Support initiatives that address housing security and affordability.

People with the lowest social and economic position in the community tend to have worse health than those in the middle, who in turn have poorer health outcomes when compared to those at the top<sup>19</sup>. While many Hume City residents enjoy a high standard of living, there are groups within the City that have fewer socio-economic resources to draw upon.

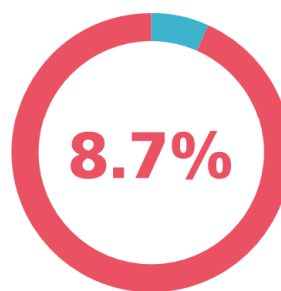
Work provides an opportunity for people to contribute to the community and enhance their skills, social networks, identity, self-esteem and sense of control. Paid work helps people to meet their everyday living expenses and afford the basic necessities required for health. The wage people earn, working conditions and work-life balance influence job satisfaction, health and wellbeing<sup>20</sup>. Therefore, improving working conditions can lead to a healthier and more productive workforce and improved productivity. Building a strong, sustainable local economy and providing local jobs for local people are important ways to enhance health and wellbeing of Hume City residents.

Education influences employment opportunities and income, which in turn influence the ability to access housing, transport and other services needed for health. During consultations, many community members spoke about their enjoyment of local schools, libraries and learning hubs. However, some community members identified barriers that prevented them from accessing learning opportunities such as transport limitations, family responsibilities, social and cultural norms and language and cultural barriers.

Education also influences health literacy levels amongst community members. Health literacy means that individuals have the ability to gain access to, understand and use information in ways that promote health<sup>21</sup>. Council and its partners can work together to improve health literacy by providing information in plain and simple language, developing translated and culturally appropriate information and making access and navigation through services as simple and easy as possible<sup>22</sup>.

Learning settings within the community, such as libraries, schools, early childhood care settings, vocational training and tertiary institutions, contribute to educational outcomes. Additionally, these settings can be used to develop healthy skills and knowledge, enhance health literacy and encourage adoption of healthy behaviours and lifestyles.

Housing satisfies people's basic need for shelter, security, privacy and dignity. The condition of housing, its proximity to amenities and services and the extent to which it meets people's needs all impact upon health and wellbeing. The cost of housing affects the amount of income a household has available to meet other needs and expenses – such as healthy food, medical expenses or opportunities to be socially active. Ensuring that all residents have access to safe, secure, thermally comfortable and affordable housing (both in terms of capital and running costs) requires there to be an adequate mix of private and social housing, diverse housing typologies that meet people's needs, located within close proximity of essential services and infrastructure.



In 2016, 8.7% of Hume residents were unemployed compared to 6.6% for the rest of Victoria <sup>47</sup>



In 2016, 50% of Hume City residents aged 15 years and over had completed year 12, compared to 59.4% for Greater Melbourne <sup>48</sup>

# IMPLEMENTATION AND EVALUATION





This plan outlines the key priority areas, goals and strategic objectives that Council will pursue to support and enhance health and wellbeing in Hume City. An action plan complements the plan and includes specific actions, responsibilities and time-frames.

The action plan will be evaluated on an annual basis to monitor progress. Reporting on the action plan will align with other Council reporting processes and be provided to Council, partners and the community.

This plan will also be reviewed and updated periodically where new data and insights become available. At the conclusion of the plan, an evaluation will be undertaken to ascertain the outcomes and areas for consideration in the 2021-2025 Hume Health and Wellbeing Plan.



## Appendix 1: Policy Context

This Plan aligns with a number of important state and regional health and wellbeing frameworks and policies.

### State

#### **Victorian Public Health and Wellbeing Plan 2015-2019**

The Public Health and Wellbeing Act 2008 requires the development of a state public health and wellbeing plan every four years to set the directions for public health and wellbeing for the state of Victoria.

The Victorian Public Health and Wellbeing Plan 2015-2019 establishes a vision for a “Victoria free of avoidable burden of disease and injury, so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age”.

The Plan identifies five priorities including:

- Healthier eating and active living
- Tobacco-free living
- Reducing harmful alcohol and drug use
- Improving mental health
- Preventing violence and injury.

The plan identifies place-based, people-centred and healthy and sustainable environments as key platforms to support action across the priority areas. Council has had regard to these priority areas and platforms for action in preparing this plan.

#### **Victorian Public Health and Wellbeing Outcomes Framework**

The Victorian Public Health and Wellbeing Plan is accompanied by the Victorian Public Health Outcomes Framework. The framework brings together a comprehensive set of indicators to track progress toward improving the health and wellbeing for Victorians.

Domains within the framework reflect both determinants of health, health status indicators and indicators related to the social, built, natural and economic environments. Council will monitor its progress against relevant indicators identified within the outcomes framework to track progress and impact.

#### **Royal Commission into Family Violence**

The Victorian Government established the Royal Commission into Family Violence in 2015 in recognition of the seriousness of family violence and its consequences for individuals, families and communities. The Victorian Government is committed to working with local government and other relevant sectors to address family violence.

Preventing family violence is a key area considered within this plan. Actions delivered by Council in response to family violence will be reported upon during annual action plan reporting.

#### **Victorian Promotion Foundation**

The Victorian Health Promotion Foundation (VicHealth) identifies 5 strategic imperatives including:

- Promoting healthy eating
- Encouraging regular physical activity
- Preventing harm from alcohol; and
- Improving mental health and wellbeing.

The 2016 Action Agenda for Health Promotion outlines priorities for 2016-19 which relate to each of the strategic imperatives, framed around three themes: Gender, Youth and Community. This Plan has been developed to align with these strategic imperatives and priorities.

## Regional

Council supports and has aligned this plan with a range of local plans and strategies including:

- Dianella Community Health – Integrated Health Promotion Plan
- Sunbury Community Health – Integrated Health Promotion Plan
- Hume Whittlesea Primary Care Partnership – Integrated Health Promotion Plan
- Shared Vision for the North Prevention Initiative
- Building a Respectful Community. Preventing Violence Against Women: A Strategy for the Northern Metropolitan Region of Melbourne, 2017-2021

## Council

### **Hume Horizons 2040**

Hume Horizons 2040 is Council's long-term community plan. Developed in partnership with the community, the plan guides Council's current and future planning for the municipality and informs the development of the Council Plan 2017-2021 and Hume Health and Wellbeing Plan 2017-2021. A Healthy and Safe Community is a key theme identified within this plan.

### **Hume Council Plan 2017-2021**

The Hume Council Plan 2017-2021 is Council's commitment to making a positive difference for those who live, work and study in Hume and is informed by Hume Horizons 2040. Health and wellbeing is strongly linked to the vision and strategic directions articulated within the Council Plan, that 'Hume City Council will be recognised as a leader in achieving social, environmental, and economic outcomes with a common goal of connecting our proud community and celebrating the diversity of Hume.'

### **Municipal Strategic Statement (MSS)**

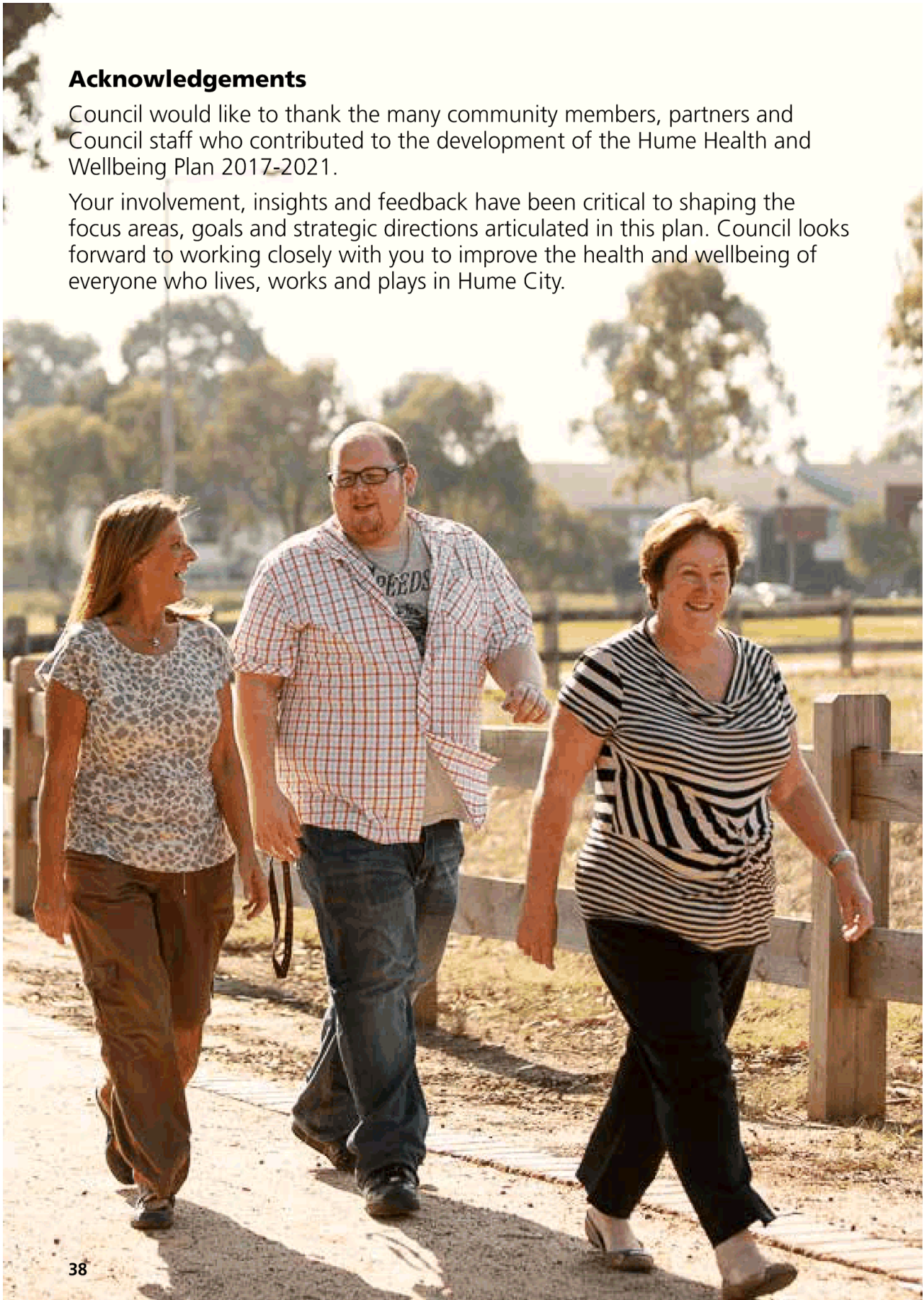
The MSS forms part of the Hume Planning Scheme and is a statement outlining the key strategic planning, land use and development objectives, strategies and actions for the municipality. The MSS supports an integrated planning approach across all areas of Council's operations. This is important as planning outcomes have significant implications for the health and wellbeing of the community.



### **Acknowledgements**

Council would like to thank the many community members, partners and Council staff who contributed to the development of the Hume Health and Wellbeing Plan 2017-2021.

Your involvement, insights and feedback have been critical to shaping the focus areas, goals and strategic directions articulated in this plan. Council looks forward to working closely with you to improve the health and wellbeing of everyone who lives, works and plays in Hume City.



## Footnotes

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We welcome  
your feedback



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## HumeLink

Hume City Council's  
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Priority Area: Physical Activity		
Action	Output	Lead
<p><b>Goal:</b> 10% increase in Hume adults participating in sufficient physical activity by 2025.</p> <p><b>Baseline:</b> In 2014, 41.4% of Hume City adults participated in sufficient physical activity.</p> <p><b>Source:</b> Victorian Population Health Survey, 2014.</p>		
<p><b>Support the provision of land and infrastructure that encourages physical activity.</b></p>		
Review and document missing links in Hume City walking and cycling networks and develop a priority list of works.	A priority list of works has been developed.	Community and Activity Centre Planning
Facilitate active travel between key City destinations and attractions through continued delivery of the Hume Bicycle Network Plan and Northern Metro Trails Strategy.	Priority routes are considered for inclusion under Council's capital works program. Construction of Stage 1 of the Meadowlink open space connection (from Seabrook Reserve to Railway Crescent) has commenced.	Community and Activity Centre Planning
<p><b>Promote and support participation in active travel, sport, active recreation and leisure.</b></p>		
Explore opportunities for a Hume Get Active App.	The feasibility of a Hume Get Active app has been determined.	Leisure Centres and Sport
Deliver programs in primary schools that promote walking amongst children and support schools to map and establish safe walking routes.	The app is developed and promoted across Hume. The 2017/18 VicHealth Funded Walk to School initiative is delivered.	Health and Community Wellbeing
Deliver inclusive programs and positive messages to increase participation in active recreation amongst women and girls.	A communications campaign targeting women and girls is delivered. A series of recreation/leisure programs targeted at women and girls are established.	Leisure Centre and Sport
Establish accessible programs that support older	A Walking Soccer program is delivered for older	Health and Community Wellbeing

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residents to become more physically and socially active.	residents and community members living with a disability.		
Complete an audit of Council sports ground lighting and develop a Sports Ground Lighting Policy to enhance safety, amenity and access.	An audit is completed. The audit is used to develop a Sport Ground Lighting Policy.		Leisure Centres and Sport
<b>Encourage participation in parks, open space and natural environments.</b>			
Undertake a scoping exercise to determine barriers to accessing parks and open space before identifying effective options to enhance participation and utilisation.	A scoping paper is developed identifying barriers and appropriate activation options. A series of Park and Open Space activation activities are delivered.		Health and Community Wellbeing
Informed by the finding of the scoping exercise, deliver a series of park and open space activation activities and/or events that connect local residents to these spaces.			
Provide adequate parks and open space, both in quantity and quality, to meet the diverse needs of current and future residents.	Findings from the Parks and Open Space service planning process are used to inform development of an Open Space Strategy. A new Parks and Open Space Service Plan is finalised and endorsed by Council.		Community and Activity Centre Planning
Undertake playspace and amenity upgrades at Council parks and reserves including:	A series of community consultation activities have been delivered to gather feedback from community members. Upgrades have commenced.		Leisure Centres and Sport
<ul style="list-style-type: none"> <li>• Peterlee Court Reserve, Craigieburn</li> <li>• Overton Close Reserve, Greenvale</li> <li>• Neil Street Reserve, Sunbury</li> <li>• Tangemere Avenue Reserve, Tullamarine</li> <li>• Eyre Street Reserve, Westmeadows</li> <li>• Kevin Delaine Reserve, Dallas</li> </ul>			



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<b>Priority Area: Healthy Eating</b>		
<b>Action</b>	<b>Output</b>	<b>Lead</b>
<p><b>Goal:</b> 10% increase in Hume adults consuming the recommended dietary intake of fruit and vegetables by 2025.</p> <p><b>Baseline:</b> In 2014, 3.6% of Hume City adults consumed the recommended dietary intake of both fruit and vegetables.</p> <p><b>Source:</b> Victorian Population Health Survey, 2014.</p> <p><b>Goal:</b> 5% decrease in the number of Hume adults consuming sugar-sweetened drinks on a daily basis by 2025.</p> <p><b>Baseline:</b> In 2014, 15.8% of Hume City adults consumed sugar-sweetened beverages on a daily basis.</p> <p><b>Source:</b> Victorian Population Health Survey, 2014.</p> <p><b>Goal:</b> 10% increase in the proportion of babies fully breastfed at 3 months of age by 2025.</p> <p><b>Baseline:</b> In 2014-15, 37.7% of Hume City infants were full breastfed at 3 months of age.</p> <p><b>Source:</b> Department of Education and Training, Maternal and Child Health Services Annual Report, 2014-2015.</p>		
<p>Support initiatives that promote water as a drink of choice including:</p> <ul style="list-style-type: none"> <li>• maximising access to water drinking and refill stations</li> <li>• delivery of sugary drink-free promotions and messaging</li> </ul> <p>Support an increase in breast feeding rates by establishing breast feeding support nursing as part of Council's Maternal and Child Health Service offering.</p>	<p><b>Promote consumption of healthy foods.</b></p> <p>At least one funding proposal is developed</p> <p>Pending outcomes of the funding proposal, water drinking initiatives are delivered.</p> <p>Council nurses receive lactation consulting training.</p> <p>A referral process is established through Maternal and Child Health services.</p>	<p>Health and Community Wellbeing</p> <p>Health and Community Wellbeing</p>

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	A lactation consulting drop in service is made available in at least two locations.	
<b>Deliver initiatives that make healthy choices, easier choices.</b>		
Work with local dining and takeaway venues to increase availability and promotion of healthier food and/or drink options through delivery of Phase 2 of the Eat Out Eat Well (EOEW) awards program.	Key learnings from Phase 1 of the EOEW awards program trial are considered.  EOEW is established in at least one dining precinct in Hume City per year.	Health and Community Wellbeing
<b>Support initiatives that create a secure and sustainable food system.</b>		
Enhance participation across Hume community garden sites.	Training focussed on governance and community leadership is delivered to garden users.  Gardener-led promotion and marketing efforts are delivered, enhancing garden membership.  At least one gardener-led event or activity is delivered per year at each community garden site.	Health and Community Wellbeing
Activate the Hume Food Policy to drive coordinated food actions and initiatives across Council.	The food policy is promoted to Council departments.  A gap analysis of Council food-related actions is conducted.  A series of food-related actions or initiatives are identified and delivered.	Health and Community Wellbeing
Support local and sustainable food projects through the Hume Enviro Champions and Live Green program.	A minimum of four community food projects are supported through the Hume Enviro Champions program and the Live Green program.  Development of the Rural Hume Integrated Growth Area Plan (HIGAP) is progressed.	Sustainable Environment
Encourage sustainable farming activities and provide opportunities for a variety of productive agricultural uses within Hume City's rural areas.	A series of community engagement activities are delivered to inform the Plan.	Strategic Planning

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**Priority Area: Being Connected**

**Goal:** Family Violence Indicator - TBC

**Baseline:** In 2016-17, there were 1,478 family violence incidents in Hume City per 100,000 residents.

**Source:** Crime Statistics Agency, Family Violence Incidents, 2017.

**Goal:** 5% decrease in the proportion of Hume residents who report being highly or very highly socially isolated by 2025.

**Baseline:** In 2014, 20.5% of Hume City adults report being highly or very highly socially isolated.

**Source:** Victorian Population Health Survey, 2014.

Action	Output	Lead
<b>Support development of activities and events that build and enhance community and social networks.</b>		
Facilitate community events that promote harmony and understanding between people of different faiths, cultures, genders and abilities.	Refugee Week, NAIDOC Week, International Women's Day, International Day of Disability, the Victorian Seniors Festival and other community and cultural occasions are supported in partnership with the community.  The Hume Interfaith Network and the Friends of Aileu partnership projects are supported.	Community Learning and Development  Health and Community Wellbeing
Support the establishment of community led/championed health and wellbeing initiatives.	A funding proposal is developed seeking required resources to support residents and community groups to plan, design and implement local ideas.  Pending the outcome of the funding proposal, Community Lead Health and Wellbeing Initiatives are established.	Health and Community Wellbeing
Promote and support local arts and cultural projects and provide opportunities for community	An arts and culture community engagement project is delivered in:	Community Development and Learning

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<p>engagement in arts and cultural activities.</p>	<ul style="list-style-type: none"> <li>• Olsen Place, Broadmeadows; and,</li> <li>• Sunbury.</li> </ul> <p>A series of social-justice themed exhibitions and activation projects are delivered across Hume City public galleries and exhibition spaces.</p>	<p>Family, Youth and Children Services</p>
<p>Promote and enhance LGBTI+ awareness and inclusion within Hume City.</p>	<p>The Craigeburn and Sunbury GLITTER social groups continue to be supported by Council.</p> <p>A funding proposal is developed to support the expansion of GLITTER groups in other Hume City locations.</p> <p>The Wear it Purple Day and other LGBTI+ awareness raising activities and events are supported in partnership with the community.</p>	
<p><b>Promote and develop safe and gender equitable communities, cultures and organisations where relationships are equal, non-discriminatory and respectful.</b></p>		
<p>Deliver family and parenting programs which promote equal and respectful relationships between men and women</p>	<p>The Baby Makes Three program is delivered in three community locations.</p> <p>An Assyrian Happy Mothers program is established in partnership with Northern Hospital and Murdoch Institute (Royal Children Hospital).</p> <p>A series of culturally safe parenting workshops are established to support local dads.</p>	<p>Family, Youth and Children Services</p>
<p>Build staff and community awareness of the prevalence and impact of violence through provision of information, education campaigns and programs.</p>	<p>Council supports promotion of Week Without Violence, the Clothesline Project and One Million Stars to End Violence campaign.</p>	<p>Community Development and Learning.</p>
<p>Provide advice and input on the development, implementation, monitoring and evaluation of the</p>	<p>Council participation in Regional PVAW Strategy Steering Group</p>	<p>Community Development and Learning</p>

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<p>Regional Prevention of Violence Against Women (PVAW) Strategy: Building a Respectful Community 2017-2021 Build a gender equitable and inclusive organisational culture and establish Hume City Council as a local leader in workplace gender equity.</p>	<p>The Regional Strategy reflects factors and approaches that are relevant to women and girls in Hume City. A Workplace Gender Equity Strategy is developed. Workplace actions and initiatives arising from the strategy have commenced.</p>	<p>Community Development and Learning Human Resources</p>
<p><b>Enhance real and perceived safety and amenity of public places and spaces.</b></p>		
<p>Provide local communities and sectors opportunities to link together and coordinate activities that contribute to creating safe, secure and injury free environments.</p>	<p>A series of activities and events are delivered as part of the 2018 Community Safety Month (October)  A Road Safety Forum is delivered with a particular focus on providing supports and resources for culturally and linguistically diverse communities.  Ongoing operation of the Hume City Community Safety Advisory Committee.</p>	<p>Community Development and Learning</p>
<p>Implement a range of programs and services to improve the safety of the built environment through Hume City Council's Community Safety Strategy 2014-2018.</p>	<p>Relevant actions in the Community Safety Strategy 2014-2018 have commenced.</p>	<p>Community Development and Learning</p>

**Priority Area: Protecting Health**

**Goal:** 30% decrease in smoking by Hume City adults by 2025.

**Baseline:** In 2014, 15.5% of Hume City adults were current smokers.

**Source:** Victorian Population Health Survey, 2014.

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<p><b>Goal:</b> 10% decrease in excess alcohol consumption amongst Hume City adults by 2025.</p> <p><b>Baseline:</b> In 2015, 23.4% of Hume City residents were at risk of short-term harm from alcohol. <b>Source:</b> VicHealth Indicators Survey, 2015.</p> <p><b>Goal:</b> 20% decrease in electronic gambling losses per Hume City adult.</p> <p><b>Baseline:</b> In 2016-17, \$700 was the total amount of money lost on electronic gaming machines per Hume City adult. <b>Source:</b> Victorian Commission for Gambling and Liquor Regulation, 2017.</p> <p><b>Goal:</b> 95% of children are 'fully immunised' at age 5 years by 2025.</p> <p><b>Baseline:</b> In 2014-15, 94.2% of Hume City children were fully immunised by 5 years of age. <b>Source:</b> Department of Education and Training, Victorian Child and Adolescent Monitoring System, 2014.</p> <p><b>Goal:</b> Net increase in street and park trees.</p> <p><b>Baseline:</b> In 2016-17, there was a net increase of 2,097 trees in Hume streets, parks, reserves and civic spaces. <b>Source:</b> Hume City Council.</p>		
Action	Output	Lead
<p><b>Support activities that minimise harms of tobacco, alcohol and gambling and lead to the adoption of healthy lifestyles.</b></p> <p>Implement Council's Gaming Policy including social impact assessments of applications for electronic gaming machines (EGMs), and support for gambling-related harm minimisation initiatives.</p> <p>Protect the community against second-hand smoke and de-normalise smoking behaviour.</p>	<p>Council delivers an advocacy program for gambling reform, relevant to the local context.</p> <p>Council continues to participate in and support relevant partnerships that address gambling-related-harms.</p> <p>The Libraries After Dark program is established providing alternate recreation options.</p> <p>The State Government's reforms to smoke-free outdoor dining areas have been implemented.</p>	<p>Community and Activity Centre Planning</p> <p>Community Development and Learning</p> <p>Governance</p> <p>Health and Community Wellbeing</p>

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	A scoping paper is developed exploring opportunities for smoke-free environment expansion such as at local sporting grounds and facilities.	
Continue to develop partnerships that support positive health and wellbeing amongst older residents.	In partnership with La Trobe University, free health checks and healthy lifestyle advice are delivered at each of Council's Senior Citizen Centres.	Health and Community Wellbeing
Encourage Hume City sporting clubs to manage alcohol responsibly and reduce alcohol related problems such as binge drinking and underage drinking.	Two Responsible Service of Alcohol (RSA) courses are delivered by Council to local Good Sports accredited sporting clubs.	Leisure Centres and Sport
Support existing and explore new partnership opportunities amongst Hume City health and community service agencies to promote collective action, collaboration and to minimise duplication.	Appropriate partnership models are explored.	Health and Community Wellbeing
	Partnership and networking opportunities around agreed health and wellbeing priority areas are established.	
	<b>Support initiatives and information provision to enhance immunisation uptake.</b>	
Enhance immunisation coverage rates amongst priority groups.	The Hume Refugee Immunisation Project is established delivering child and adult immunisations to newly arrived refugee families.	Health and Community Wellbeing
	Formal referral pathways are established between Settlement services, Council's and GP Immunisation Service.	
	Clinical education and support is provided to local GPs highlighting refugee immunisation status and appropriate catch-up schedules	
	Proactive outreach efforts are delivered to identify and immunise already settled refugee families.	
	<b>Encourage initiatives that enhance climate resilience of public places and spaces, infrastructure and private housing stock.</b>	
Reduce greenhouse gas emissions from Council's operations through energy conservation efforts	A review of the 2013-2016 Greenhouse Action Plan has been conducted.	Sustainable Environments

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and renewable energy sources.	A new Greenhouse Action Plan is developed and adopted by Council.	
Increase levels of shade in public places to reduce heat vulnerability and urban heat-island effect.	Targeted tree planting is delivered in local streets, parks, reserves and civic spaces.	Parks
Integrate Environmentally Sustainable Design (ESD) and development targets, checklists, considerations and outcomes in processes for design, construction and commissioning of new Council buildings.	An integrated urban forest approach is considered for inclusion within the Open Space Strategy. New Council buildings integrate energy and water efficiency measures in design and construction.	Sustainable Environments

**Priority Area: Capabilities to Participate**

**Goal:** 10% increase in the number of Hume residents aged 15-24 years who are engaged in full time employment, education or training.

**Baseline:** In 2016, 71.3% of Hume residents aged 15-24 years were engaged in full time employment, education or training.

**Source:** ABS, Census of Population and Housing 2016

**Goal:** Housing diversity indicator – TBC

**Baseline:** TBC

**Source:** TBC

<b>Action</b>	<b>Output</b>	<b>Lead</b>
Create supportive environments for local start-up and new businesses.	<b>Support initiatives that build a strong and sustainable economy.</b> Business incubators and co-working spaces are included in: <ul style="list-style-type: none"> <li>the redevelopment of the Broadmeadows Town</li> </ul>	Economic Development



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<p>Continue to create opportunities for economic participation by maintaining services that attract and retain businesses, support and develop local leading businesses, activate and improve activity centres and enhance tourism.</p>	<p>Hall and development of the Hume Global Learning Centre Sunbury.</p> <ul style="list-style-type: none"> <li>• development of the Hume Global Learning Centre Sunbury.</li> </ul> <p>The Hume Investment Attraction Framework is progressed.</p> <p>A program of formal and informal business networking events is delivered.</p> <p>Participation in formal networks and strategic partnerships with tourism organisations to support the visitor economy.</p> <p>Tourism promotional activities such as Postcards TV travel program, public relations and online promotions are delivered.</p>	<p>Economic Development</p>
<p><b>Support initiatives that reduce people's barriers to meaningful employment, education and training opportunities.</b></p>		
<p>Support local businesses and service providers to employ Hume residents.</p>	<p>The Local Jobs for Local People program is delivered connecting businesses with local job seekers.</p> <p>Networking opportunities and industry visits to local businesses are delivered to local jobseekers.</p>	<p>Economic Development</p>
<p>Complete design and commence construction of the Hume Global Learning Centre Sunbury.</p>	<p>Informed by community and stakeholder engagement, design for the Sunbury Global Learning Centre is finalised.</p> <p>Construction works have commenced.</p>	<p>Community Development and Learning</p>
<p>Tailor learning opportunities to population groups and growth industries to support skills development and job pathways for Hume residents.</p>	<p>A minimum of 12 targeted job search skill development workshop sessions have been delivered.</p> <p>A minimum of 12 targeted employer information sessions have been delivered to local job seekers.</p>	<p>Economic Development</p>
<p>Provide opportunities for tertiary study, skill</p>	<p>The Hume Multiversity initiative is delivered as part of</p>	<p>Community Development and Learning</p>

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development and qualifications close to home. Deliver a series of programs that support childhood literacy and learning outcomes.	the new Hume Global Learning Centre Sunbury Project. The iTots, makerspace, bilingual story time, 1000 books before school programs are delivered.	Community Development and Learning
<b>Support initiatives that address housing affordability including operational costs.</b>		
Explore options to facilitate and encourage the provision of greater housing diversity in residential areas to meet the needs of current and future residents.	A draft housing diversity strategy is endorsed for public exhibition.	Strategic Planning

<b>REPORT NO:</b>	HE070
<b>REPORT TITLE:</b>	Aged and Community Care and Community Transport Policy Review
<b>SOURCE:</b>	Samuel Ferrier, Health and Community Wellbeing
<b>DIVISION:</b>	Community Services
<b>FILE NO:</b>	HCC15/109
<b>POLICY:</b>	-
<b>STRATEGIC OBJECTIVE:</b>	2.1 Foster a community which is active and healthy.
<b>ATTACHMENTS:</b>	1. <i>Aged and Community Care Policy (revised)</i> 2. <i>Community Transport Policy (revised)</i>

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**1. SUMMARY OF REPORT:**

- 1.1 The Aged and Community Care Policy (POL/146) and Community Transport Policy (POL/156) provide broad frameworks for the management, planning, delivery and evaluation of Council's aged, disability and transport services.
- 1.2 These policies have been reviewed and updated to provide better alignment with;
  - 1.2.1 current service operational arrangements;
  - 1.2.2 changing service arrangements resulting from progressing national aged and disability reforms,
  - 1.2.3 National Home and Common Care Standards and internal Standard Operation Procedures.
- 1.3 Notable changes and revisions to the policies' are detailed in section 9 of this report. These changes do not intend to change Council position on services, nor the current scope or objectives of service delivery.
- 1.4 The revised policies to be considered by Council for adoption are included in attachments 1 and 2 of this report.

**2. RECOMMENDATION:**

- 2.1 That Council adopts the revised Aged and Community Care Policy (attachment 1).
- 2.2 That Council adopts the revised Community Transport Policy (attachment 2).

**3. LEGISLATIVE POWERS:**

- 3.1 In delivering aged, community care and community transport services, Council is required to comply with multiple program guidelines, grant agreements and standards including:
  - 3.1.1 The Commonwealth Home Support guidelines and grant agreement
  - 3.1.2 The Home and Community Care Program for Younger People grant agreement
  - 3.1.3 The Home Care Package Program Guidelines
  - 3.1.4 Community Care Common Standards (HACCPYP)
  - 3.1.5 Home Care Common Standards (CHSP and HCP)
  - 3.1.6 Aged Care Act 1997; and
  - 3.1.7 Information Privacy Act 2000.
- 3.2 Collectively, these seek to protect the rights of service recipients and ensure delivery of high quality, safe, equitable services.

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4. FINANCIAL IMPLICATIONS:

There are no financial implications associated with this report.

5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:

There are no environmental sustainability implications in respect to this report.

6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:

There are no climate change adaptation implications in respect to this report.

7. CHARTER OF HUMAN RIGHTS APPLICATION:

The rights protected in The Charter of Human Rights and Responsibilities Act 2006 were considered and it was determined that Council has acted compatibly with these rights when undertaking this policy review.

8. COMMUNITY CONSULTATION:

8.1 The revisions made to the Aged and Community Care Policy (POL/146) and Community Transport Policy (POL/156) do not intend to change Council's position on services, the scope of services provided or specific objectives.

8.2 Instead, changes have focused on ensuring policy consistency with current operational arrangements, changing service requirements, current language and terminology. Revisions to these policies are not expected to result in any changes to services or supports received by community members.

8.3 Accordingly, no community consultation was undertaken in the review of these policies or in the preparation of this report.

9. DISCUSSION:

9.1 Key changes, and the rationale for each of these, are summarized in the table below:

Aged and Community Care Policy	
Change made:	Rationale:
Section 2: Policy Statement	The policy statement has been revised and updated to make clear that services provided by Council are available to <i>eligible</i> community members - as determined by State and Federal program rules.
Section 3: Definitions and Abbreviations	This section of the policy has been amended and expanded to detail the three distinct programs through which Council receives funding to deliver services to older community members and people with a disability. Namely: the HACC Program for Younger People (HACCPYP), Commonwealth Home Support Program and Home Care Package Program.
Section 6: Hume City Council and Community Care Service provision	This section has been revised to remove references to Council's role in 'client prioritization' and 'waitlist management'. In 2015, <i>My Aged Care</i> was introduced providing a national approach to prioritization of access and waitlist management. This means that Council no longer plays a role in prioritizing access or managing waitlists for services.  In addition, a dot-point relating to Council's role in preventing duplication of services in the municipality has been removed. In reality, Council has little control over this. Instead, the types and volumes of services to be delivered locally are determined by the State

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	<p>and Federal Government through grant agreements with service providers.</p> <p>Finally, two additional services types have been added to reflect Council's current suite of service offerings. These include; Case Management services (provided to Home Care Package recipients) and Centre-based meals services.</p>
Section 8: Related Documents	The Related Documents section has been updated to reference relevant and newly developed Council strategies, plans, State and Federal program guidelines and manuals.
<b>Community Transport Policy</b>	
<b>Change made:</b>	<b>Rationale:</b>
Policy separation: Large Bus and Mini Bus Policies	<p>Council's previous Community Transport Policy was divided into two separate policies; one relating to the operation of Council large bus and the other to Council's fleet of mini-buses.</p> <p>Following review, it was determined that there is no need for this separation of policies. A single policy framework has been developed.</p>
Section 1: Policy Statement	The policy statement has been updated to provide a more succinct statement about the aims of the service and to provide differentiation between the 'community bus' and 'community bus hire' services delivered by Council.
Section 5: Policy Implementation	<p>The policy implementation section has been updated to be more concise. Operational detail has also been removed as this information is more appropriately captured in Standard Operating Procedure (SOP) documentation.</p> <p>Detail relating to client fees, hirer booking fees and charges has also been removed from the policy. Fees are reviewed annually via the budget process and requests for concessions are reviewed on a case by case basis. Given this variation, it was determined this information is more appropriately recorded in service operational documentation.</p>

**10. CONCLUSION:**

- 10.1 Several revisions have been made to Council's Aged and Community Care Policy and Community Transport Policy in order to improve alignment with current operations and to reflect changes within the service environment.
- 10.2 It should be noted that the progressing national reforms to aged and community care services may warrant additional changes to the Aged and Community Care Policy in the near future. Officer will continue to monitor these developments and inform Council should a review of the policy be required.



# AGED AND COMMUNITY CARE POLICY

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<b>Policy Reference No.</b>	POL/146
<b>File No.</b>	
<b>Strategic Objective</b>	2.1 Foster a community which is active and healthy.
<b>Adopted by Council</b>	6 December 2010
<b>Re-Adopted</b>	28 August 2017
<b>Date for Review</b>	June 2018
<b>Responsible Officer</b>	Manager Health & Community Wellbeing
<b>Department</b>	Health & Community Wellbeing

## 1 PURPOSE

- 1.1 The purpose of this Policy is to guide Council in relation to the aged and community care system and the planning, delivery and evaluation of aged and community care services to Hume residents.
- 1.1.1 This Policy describes:
  - 1.1.2 Underpinning principles;
  - 1.1.3 The aged and community care system within Hume, its influences and drivers;
  - 1.1.4 Provision of aged and community care services to Hume residents, and
  - 1.1.5 Policy implementation.

## 2 POLICY STATEMENT

Council provides aged and community care services to eligible clients who are experiencing difficulties in managing daily living and wish to continue living at home. Aged and community care services delivered by Council complement a range of services and supports offered by other agencies (including Community Service Organisations, Non-Government Organisations and Community Health Services) which contribute to broader community outcomes.

## 3 DEFINITIONS AND ABBREVIATIONS

- 3.1 **The aged and community care system:** The broader system which supports the planning, delivery and evaluation of services and programs that enable frail older people and people with disabilities to remain living in their home and their community.
- 3.2 **Hume City Council Aged and Community Care Services:** A range of services provided by Council that aim to support frail older people and people with disabilities to maintain independence, remain living at home, while improving physical, social and emotional wellbeing. These services are funded by the State and Federal Government under three distinct program streams including the;
- 3.3 **Home and Community Care Program for Younger People (HACCPYP):** Provides basic support and maintenance services to younger people with disabilities and their carers. Younger people are defined as those aged under 65 years or aged under 50 years for Aboriginal and Torres Strait Islander people.
- 3.4 **Commonwealth Home Support Program (CHSP):** Provides funding for services for older people with basic care needs and their carers. Older people are defined as those aged over 65 years or over 50 years for Aboriginal and Torres Strait Islander People.
- 3.5 **Home Care Packages Program (HCPP):** Provides funding for services for older people with complex care needs and their carers. Older people are defined as those aged over 65 and over 50 for Aboriginal and Torres Strait Islander People.

## 4 POLICY PRINCIPLES

- 4.1 **Principles which underpin and guide this Policy include:**
- A strong sense of belonging and connection to the community in which one lives;
  - Respect for all clients including those from diverse backgrounds;

- Responsiveness to disadvantage and difficulties that arise;
- A network of support systems;
- The active practice of neighbourliness and hospitality;
- A belief by the community in their capacity to influence decision makers;
- A sense of ownership and enjoyment of public space;
- Positive ageing for all individuals which includes:
  - Creating opportunities and choices for people;
  - Enabling them to maximise independence and control over their own lives;
  - Enhancing quality of life, and
  - Encouraging continued participation in all aspects of community life;
- An effective health service system which includes:
  - Access to information and culturally appropriate services to maintain wellbeing;
  - Sustainable workforce development to provide services across the continuum of care;
  - Infrastructure that supports the provision of care in the ‘best place to treat’,
  - Supportive and effective agency partnerships in the delivery of care and
  - Advocacy to address the challenges of the changing policy, social, workforce and community contexts in Hume City.

## **5 AGED AND COMMUNITY CARE SYSTEM WITHIN HUME**

The aged and community care system within Hume is characterized, influenced and driven by:

- A growing and ageing population;
- Expansion of the municipality’s population within Council boundaries;
- High rate of disadvantage and the relationship between increased level of disadvantage and poorer health outcomes;
- Level of people with a disability;
- Increasing prevalence of chronic diseases and complexity of care needs;
- Expectations of people seeking and receiving aged and community care services;
- The policy positions of Federal and State government in relation to the provision and delivery of aged and community care services, and the ability of funding received from these bodies to meet the direct and indirect costs of providing each type of service, and
- The need to support and effectively manage the diverse range of interfaces, relationships, networks, alliances and partnerships Council has with public, not-for-profit and private service systems.

Council recognises it is not responsible for the provision and delivery of the entire range of aged and community services to the Hume community. However, it will endeavour to provide leadership and foster innovation within the broader aged and community care system, utilising its organisational resources, comprehensive knowledge and understanding of the local community, experience, expertise and skills.



Council's objectives in relation to the aged and community care system within Hume are to:

- Provide aged and community care services designed and configured in ways that respond to the needs and preferences of the community, within the finite resources available;
- Ensure effective management and governance in relation to the planning, delivery and evaluation of all activities related to Council's aged and community care services;
- Engage with policy and funding agencies to advocate for adequate resources to support the provision of aged and community care services that meet community needs and expectations;
- Maintain a current and comprehensive knowledge of the aged and community care system and use this knowledge to support service innovation and demonstrate leadership within the sector;
- Maintain a current and comprehensive knowledge of demographic trends within the municipality to support effective service planning and responsible management of Council's aged and community care resources;
- Seek and utilise feedback from clients of services, their carers and the community including service providers and other agencies, to understand expectations and identify opportunities to improve service provision and delivery;
- Seek and respond to opportunities to consult, collaborate and partner with other service providers and agencies to enhance and augment aged and community care service access and service options;
- Provide relevant data and information to other agencies and services providers to assist their planning and resource management in relation to aged and community care services, and
- Evaluate the impact and effectiveness of aged and community care services to ensure effective management and support continuous improvement.

## **6 HUME CITY COUNCIL AGED AND COMMUNITY CARE SERVICE PROVISION**

Council will provide aged and community care services that:

- Are client centred, focussed on promoting client capacity, wellness and reablement, independence and positive ageing whilst contributing to improved physical, social and emotional wellbeing of clients, carers and communities;
- Recognise, embrace and respond to diversity and are accessible and easy to navigate for the wide diversity of clients.
- Are equity based and assessed on client-centred needs and individual circumstances. Services are only provided to people within the eligible group, subject to assessment and in accordance with program rules. Eligibility does not confer entitlement to service provision;
- Facilitate and support efficient transition of clients into other aged and community care services within the municipality where required, with particular attention to supporting continuity of care;
- Effectively utilise the expertise, knowledge and skills of staff who deliver aged and community care services;

Council provides the following service types:

- Assessment;
- Care coordination;
- Case management;
- Community transport;
- Delivered and centre-based meals;
- Home care;
- Home maintenance;
- Personal care;
- Policy and planning;
- Respite care, and
- Social recreation programs.

## **7 POLICY IMPLEMENTATION**

### **7.1 Service Planning**

Regular and ongoing aged and community care service planning will be undertaken to ensure Council has a current and comprehensive knowledge of:

- The Hume municipality which includes:
  - Demographics;
  - Population growth and projected growth;
  - Spread of the population within Council boundaries;
  - The cultural mix and changing diversity of the community;
  - Prevalence of chronic diseases, disability and carers within our municipality, and
  - Numbers and demographic of people within the municipality who are socio-economically disadvantaged
- Service utilisation and projected demand in relation to aged and community care services;
- Community expectations of aged and community care service offering and provision;
- Current and future plans of other service providers and agencies including other Local Government Authorities;
- Service innovations in the aged and community care environment, and
- Federal, State and Local government policy context and funding in relation to aged and community care.

Council will evaluate aged and community care service planning process to determine the effectiveness of the research methodology and approach and to inform changes to future service planning processes.

**7.2 Service options and provision**

The range of aged and community care services provided by Council will be reviewed and evaluated regularly as part of the service planning process to determine how effectively the range and provision of services are meeting the needs of the community and making best use of finite resources.

A formal business case, including service demand, establishment and operational budgets will be prepared for all proposals for new and/or alternative service options.

Opportunities to collaborate and/or partner with other agencies to develop service options not currently available will be actively sought.

**7.3 Service innovation**

Council will actively explore and investigate opportunities for service innovation within the aged and community care system. Opportunities for innovation may be initiated and driven internally or may be part of alliances, collaborations or partnerships with other agencies or services providers

**7.4 Advocacy**

Council will utilise its knowledge and breadth of expertise and resources to advocate on behalf of its community and where agreed, other agencies and services providers external to Council. Advocacy activities may include but not be limited to:

- Seeking additional funds and resources;
- Seeking access to programs;
- Service innovation and service development;
- Contributing to government policy review and/or development, and
- Advocating on behalf of community groups agencies and / or other service providers.

**7.5 Financial management**

Council receives funding for aged and community care services from Federal and State governments. Council acknowledges funds received may not cover the full cost of providing and delivering each type of aged and community care service provided by Council. Council will ensure effective and responsible financial management in relation to the provision and delivery of aged and community care services by quantifying the fully reflective cost (direct and indirect) of providing each aged and community care service.

Cost considerations may include but not be limited to:

- Indirect client hours;
- Staff induction;
- Occupational Health and Safety;
- Staff supervision, training and support;
- Meetings to support service provision;
- Consumables;
- Client administration;
- Physical infrastructure;
- Case conferencing, and
- Unplanned leave.

Undertaking a comprehensive costing exercise for any aged and community care service provided, or is proposed Council may provide, will ensure Council has a complete understanding of the financial and human resource implications of service provision and the extent to which government funding does not cover the cost of services. This information will allow Council to make informed decisions regarding service provision and internal funding requirements of existing and proposed aged and community care services.

#### **7.6 Human Resources Management**

Council will engage a workforce suitably qualified and skilled to deliver safe and appropriate aged and community care services. All staff will have a current and detailed position description.

Council will support the workforce to access targeted education and training opportunities in order to ensure services are respectful, safe and appropriate for frail older people, people with disabilities and people from diverse backgrounds within the municipality.

#### **7.7 Collaboration and partnering**

Council will seek to collaborate and partner with other service providers and agencies where there are opportunities to enhance services or ensure they are more responsive to community needs..

#### **7.8 Governance and management**

Council will implement mechanisms to support robust governance and effective management of aged and community care services. This will include:

- Reporting and accountability systems for individuals and teams;
- Procedures and guidelines to support safe and appropriate practice in relation to provision and delivery of aged and community care services;
- Information management and record keeping that is accurate, timely and secure;
- Utilisation of outcome and indicators to monitor activity, achievements and performance, and
- Responsive feedback systems for consumers of aged and community care services, staff and agencies and other services providers.

#### **7.9 Evaluation and continuous improvement**

To inform Council planning and budgeting, Council will monitor and evaluate the provision and delivery of aged and community care services using agreed outcomes and performance indicators as benchmarks which include but may not be limited to:

- Activity targets;
- Client feedback and satisfaction;
- Adverse events;
- Budget performance;
- Workforce engagement;
- Occupational Health and Safety outcomes;

- Feedback from other service providers and agencies, and
- Satisfactory achievement of accreditation processes.

A range of strategies will be employed to assess Council’s performance against agreed outcomes, targets and performance indicators. Ongoing monitoring of performance will be undertaken and reported on an annual basis. Implementation of continuous improvement strategies and initiatives will be actioned where required.

**7.10 Communication of this policy**

This policy will be communicated to all staff within Aged and Disability Services at orientation and following changes to the policy.

Interested parties / agencies / partners can access this policy through the council website or by directly contacting Aged and Disability Services.

**7.11 Policy Review**

This policy will be reviewed six months following initial ratification and every two years thereafter and as required.

**8 RELATED DOCUMENTS**

- 8.1** Aged and Disability Services Operational Guidelines
- 8.2** Hume Positive Ageing Strategy 2014-2024
- 8.3** Hume City Council Plan 2017-2021
- 8.4** Community Care Common Standards
- 8.5** Home Care Common Standards
- 8.6** Hume City Council Social Justice Charter

<b>Date Adopted</b>	6 December 2010
<b>Date Re-Adopted</b>	28 August 2017
<b>Review Date</b>	June 2018



# COMMUNITY TRANSPORT POLICY

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<b>Policy Reference No.</b>	POL/154
<b>File No.</b>	HCC15/109
<b>Strategic Objective</b>	3.1 Foster socially connected and supported communities
<b>Adopted by Council</b>	08/09/2003
<b>Re-Adopted</b>	13/03/2018
<b>Date for Review</b>	March 2023
<b>Responsible Officer</b>	Manager Health and Community Wellbeing
<b>Department</b>	Health and Community Wellbeing

**1 POLICY STATEMENT**

- 1.1 Hume City Council is committed to supporting residents to remain independent and connected with their community. Council provides a community transport service to eligible older residents, people with disabilities and other transport disadvantaged residents to achieve this end.
- 1.2 Council's community transport service includes providing services to and from social and community activities, events and settings, as well as offering a community bus hire to not-for-profit organisations and community groups. The services provided by Council aim to supplement, not replace, existing public and commercial services.

**2 PURPOSE**

- 2.1 The purpose of this policy is to guide Council in relation to the management of Council's Community Transport Service which encompass both community bus and community vehicle hire services. Currently, Council manages a fleet of 7 buses including a large (19 seater) bus and 6 mini-buses (11-12 seater). The policy describes:
  - The scope of this policy
  - Underpinning objectives; and,
  - Policy implementation.
- 2.2 This policy should be read in conjunction with Council's Standard Operation Procedure (SOP) for Program and Community Transportation Bus Use (9.02) which provides greater detail on conditions of use, service eligibility, risk and emergency management procedures.

**3 SCOPE**

- 3.1 This policy is applicable to all staff, community groups and not-for-profit organisations involved in the delivering Community Transport Services or operating community bus hire vehicles.

**4 OBJECTIVE**

- 4.1 Council provides a Community Transport Service to offer an affordable and accessible service for those in the Hume community who may not otherwise be able to participate in community life.
- 4.2 Priority access to Council's Community Transport Services is given to clients in receipt of Council aged and disability services, community members who experience restrictions to mobility, are frail or otherwise transport disadvantaged.
- 4.3 The service is delivered in a way that complements transport services provided by other stakeholders and agencies with view to improve the overall transport system in the municipality.

**5 POLICY IMPLEMENTATION**

- 5.1 Council's Community Transport Services aims to provide services to those residents who may otherwise be unable to use public or private transport as a result of one or more of the following factors:
  - a) Physical or general health limitations (e.g. disability, frail age)
  - b) Limited finances
  - c) Lack of carer support

- d) Socially or geographically isolated
  - e) A lack of transport alternatives
- 5.2 The service provides transport to Council aged and disability programs, as well as to events, facilitates and amenities such as Senior Citizens Centres and shopping centres.
- 5.3 A minimal fee toward the service is requested from all passengers using the service. The fee is reviewed and adjusted annually. These fees are discussed and agreed with clients before the service is delivered. Fees for the service are principles-based and seek to ensure those that can contribute toward the cost of their care do so, whilst protecting those who are financially vulnerable.
- 5.4 Priority use of Council vehicles is given at all times to Council's own programs. These include:
- 5.4.1 Community Transport Shopping Shuttles
  - 5.4.2 Transport to Senior Citizens Centres
  - 5.4.3 Transport to centre-based meals programs
  - 5.4.4 Leisure centres transport
  - 5.4.5 Transport to planned activity groups (PAGs)
  - 5.4.6 Community outings to local events and community facilities.
- 5.5 When not being used by Council, the community buses may be hired by locally based not-for-profit organisations and community groups.
- 5.6 Use of the community vehicles requires agreement by the hirer to comply with Council's 'Conditions of Hire and Use', payment by the hirer of Council adopted fees and charges, and approval by Council Administration. All drivers of Council's buses are required to possess a valid Victorian drivers license which must be carried at all times.
- 5.7 The CEO or nominee is delegated with the authority to deal with and make decisions pertaining to special requests and those uses of Council vehicles which are not explicitly covered in this Policy.
- 5.8 Council's Community Services Directorate, in particular Community Support Services, has responsibility for the effective implementation of this policy.

## **6 DEFINITIONS AND ABBREVIATIONS**

- 6.1 **Community Transport:** a low-cost, accessible service for those in the community who may otherwise not be able to access the community.
- 6.2 **Locally based:** pertains to organisations and community groups that conduct the majority of their activities in the municipal area and/or for the primary benefit of the Hume City community.
- 6.3 **Not-for-profit:** incorporated associations whose primary objective is to service the community, rather than to profit from the delivery of services or supports.
- 6.4 **Community bus service:** refers to a range of services delivered by Council for which buses are utilised including; Community Transport Shopping Shuttles, Transport to Senior Citizens Centres, transport to centre-based meals programs, leisure centres transport, transport to planned activity groups (PAGs), community outings to local events and community facilities.

## **7 RELATED DOCUMENTS**

- 7.1 Where appropriate, list the related documents and attach to the policy. These may include:



- 7.1.1 Local Government Act 1989
- 7.1.2 Hume City Council Standard Operating Procedure: Program and Community Transportation Bus Use (9.02)
- 7.1.3 Bus Safety Act 2009
- 7.1.4 Bus Safety Regulations 2010 (Vic)
- 7.1.5 Hume City Council Plan 2017-2021

<b>Date Adopted</b>	08/09/2003
<b>Date Re-Adopted</b>	13/08/2018 [Leave blank id N/A]
<b>Review Date</b>	March 2023

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<b>REPORT NO:</b>	HE071
<b>REPORT TITLE:</b>	National Disability Insurance Scheme - Transitional Arrangements
<b>SOURCE:</b>	Samuel Ferrier, Health and Community Wellbeing
<b>DIVISION:</b>	Community Services
<b>FILE NO:</b>	HCC17/13
<b>POLICY:</b>	-
<b>STRATEGIC OBJECTIVE:</b>	2.1 Foster a community which is active and healthy.
<b>ATTACHMENTS:</b>	Nil

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**1. SUMMARY OF REPORT:**

1.1 This report presents:

- 1.1.1 An update on the Hume Moreland area roll-out of the National Disability Insurance Scheme;
- 1.1.2 Financial and client transition arrangements; and
- 1.1.3 A recommendation on the preferred funding arrangement for Council during the transition period (1 March 2018 – 31 May 2019).

**2. RECOMMENDATION:**

**That Council**

- 2.1 proceeds with the Department of Health & Human Services' (DHHS) in-kind funding arrangement for the National Disability Insurance Scheme (NDIS) roll-out period.**
- 2.2 authorises Officers to formally advise DHHS of Council's preferred transitional funding arrangement during the NDIS roll-out period.**

**3. LEGISLATIVE POWERS:**

- 3.1 There is no specific legislative requirement for Council to engage in NDIS service provision as the scheme is made available.
- 3.2 Disability Services delivered by Council are required to comply with HACC PYP funding guidelines, grant agreement terms and conditions as well as various quality standards and reporting arrangements.

**4. FINANCIAL IMPLICATIONS:**

- 4.1 At present, Council is block funded by the State Department of Health & Human Services to deliver services to people under the age of 65 (Disability Clients) through the HACC Program for Younger People (HACC-PYP).
- 4.2 Once NDIS eligible clients transition to another service provider, associated funding will be removed from Council's HACC-PYP grant agreement and redirected to the National Disability Insurance Agency. Council will retain a portion of funding from the HACC PYP grant agreement, which will continue to support delivery of services to clients under the age of 65 ineligible for the NDIS.
- 4.3 Modelling the full financial impact of the NDIS is not possible. This is due to the inability to accurately determine the exact number of clients that will be eligible for the NDIS, or the rate at which these clients will enter the scheme and move across to an alternate provider of services. A crude estimate is that approximately \$988,000 will be eventually removed from Council's HACC-PYP grant agreement.

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**5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:**

5.1 There are no environmental sustainability implications associated with this report.

**6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:**

6.1 Climate change adaptation has been considered and recommendations of this report give no rise to any matters.

**7. CHARTER OF HUMAN RIGHTS APPLICATION:**

7.1 Council fulfils multiple functions and roles in the Hume City community that directly and indirectly impact upon the lives of residents living with a disability. These roles and function of Council are underpinned by the Social Justice Charter 2014 (SJC)

7.2 The SJC recognises that every citizen has the right to a quality of life that allows them to freely realise their potential. The SJC seeks to advance a fair and just society and to promote respect for every citizen, encourage community participation, strengthen community wellbeing and reduce the causes of disadvantage.

**8. COMMUNITY CONSULTATION:**

8.1 The planning and management of Council's Disability Services is underpinned by a sound knowledge and understanding of local community needs, preferences and demographic trends. These include:

8.1.1 The Hume Disability Profile;

8.1.2 Australian Bureau of Statistics – Disability, Ageing and Population Data;

8.1.3 Hume Community Indicators Survey;

8.1.4 Department of Health and Human Services Home and Community Care Minimum data set; and

8.1.5 Council Service utilization data.

**9. DISCUSSION:**

**Background and Hume Moreland NDIS Roll-Out**

9.1 The roll-out of the National Disability Insurance Scheme (NDIS) formally commenced in the Hume-Moreland area on the 1<sup>st</sup> March 2018.

9.2 Due to delays experienced in other roll-out areas, the NDIS will now be introduced over an extended period of 14 months, with full implementation expected by 31 May 2019.<sup>1</sup>

9.3 In early 2017, Council resolved not to register as a provider of NDIS services. Key drivers for this decision included:

9.3.1 The NDIS' lean pricing methodology, which would have necessitated Council subsidisation of services;

9.3.2 The availability of other specialist disability service providers offering more diverse and flexible service options in the local area; and

9.3.3 The opportunity for Council to focus its' efforts on providing genuine access and inclusion to people with disability in the community.

9.4 As highlighted at the time of this decision, a number of Council clients under the age of 65 will be eligible for, and transition to, the NDIS. These clients will enter the NDIS at different times over the coming 14 months, depending on the type of supports or services they currently receive.

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<sup>1</sup> It was previously proposed that the NDIS would be rolled out in the Hume-Moreland area over 9 months from 1 March 2018 to 30 November 2018.

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- 9.5 Other Council clients will not be eligible for NDIS. These clients will continue to have their service needs met by Council, supported by funding through a State government disability support program.
- 9.6 Recently, Council was provided with formal advice as to how the NDIS transition process will occur, specifically:
- 9.6.1 The funding arrangements for service providers during the roll-out period; and
- 9.6.2 The manner by which Council will be expected to support eligible clients to enter the NDIS and transition to another service provider (when required).
- 9.7 These are discussed in further detail below.

**Transitional Funding Arrangements**

- 9.8 Council currently receives funding to deliver services to people under the age of 65 years with a disability through the Victorian Department of Health and Human Services' (DHHS) Home and Community Care Program for Younger People (HACC-PYP).
- 9.9 As eligible clients transition to the NDIS, a proportion of this funding will be removed from Council's grant agreement, and redirected to the National Disability Insurance Agency (NDIA).
- 9.10 DHHS has provided Council with two options to manage HACC-PYP funds during the NDIS roll-out period. Each of these options is described and compared in the below table:

	Option 1	Option 2
	In-kind funding	Progressive cash-out
<b>Funding</b>	<p>This option provides Council with funding stability and predictability throughout the roll-out period.</p> <p>Under this arrangement, Council would continue to receive the same level of HACC-PYP funding up until 31 May 2019.</p> <p>Only once the NDIS is fully implemented (31 May 2019) would Council experience an adjustment to its' HACC PYP funding agreement.</p>	<p>This option provides Council with less funding stability throughout the roll-out period, however, a more rapid phase-out process.</p> <p>Under this arrangement, Council's HACC-PYP funding would be adjusted month by month as eligible clients transition to the NDIS.</p> <p>This adjustment would continue to occur until all eligible clients have transitioned to the NDIS, which may occur before 31 May 2019.</p>
<b>Service considerations</b>	<p>Under this arrangement, Council would <b>continue to provide services to both NDIS eligible</b> and ineligible clients up until 31 May 2019.</p> <p>During the transition period, Council would be unable to collect fees from NDIS eligible clients. This is due to an NDIS rule against charging co-payments. This</p>	<p>Under this arrangement, Council would <b>cease providing services to NDIS eligible clients</b> as soon as they have been approved for services.</p> <p>After receiving approval for an NDIS plan, clients would need to quickly find an alternate service provider to deliver their services.</p> <p>If there is a gap between the date a client has been approved for a</p>

REPORT NO: HE071 (cont.)

	<p>would result in a small, temporary loss of revenue. Council would be able to seek recompense for this loss in client fees once the NDIS is fully phased in.</p>	<p>plan and finding a suitable provider, Council may choose to provide services during this period. Council would not receive up-front funding for these services, instead, would be able to seek recompense once the NDIS is fully phased in.</p>
<p><b>Workforce considerations</b></p>	<p>Under this arrangement, it is expected the current workforce arrangements would be maintained up until the end of the transition period (31 May 2019).</p> <p>As Council would be continuing to deliver the same volumes of service under this arrangement, there would be no loss in staff hours during the transition period.</p> <p>It should be noted that reduction in staff hours could be absorbed by the current workforce and would not require redundancies.</p>	<p>Under this arrangement, staff hours would need to be gradually reduced as eligible clients move over to the NDIS and another service provider. As Council has no control over the speed at which clients will move across to the scheme, this option presents greater unpredictability.</p> <p>It should be noted that reduction in staff hours could be absorbed by the current workforce and would not require redundancies.</p>

9.11 Based on an analysis of the above options, it is recommended that Council proceed with the in-kind funding arrangement (Option 1) as this provides:

- 9.11.1 greatest continuity of care for clients;
- 9.11.2 workforce stability in the immediate term, with view to make necessary adjustment to the workforce at the conclusion of the transition period; and,
- 9.11.3 opportunities for market maturation/proliferation; ensuring that clients will be able to select from a suitable and diverse range of providers that respond to individual needs and preferences.

9.12 Throughout the roll-out period, Council will be delivering a range of additional supports to clients aimed at ensuring their smooth transition to the NDIS. These include, but are not limited to:

- 9.12.1 Encouraging new and existing clients to contact the NDIA to have their NDIS eligibility determined;
- 9.12.2 Supporting clients to prepare for their NDIS planning meeting;
- 9.12.3 Supporting clients with information and resources about the scheme, and the range of services they may consider requesting to be included as part of their package of care; and
- 9.12.4 Linking clients with the NDIA and the Local Area Coordinator (LAC) agency<sup>2</sup>

<sup>2</sup> Local Area Coordinators are funded by the National Disability Insurance Agency to assist eligible clients to navigate the NDIS. Local Area Coordinators assist with pre planning, plan development and activation as

**REPORT NO: HE071 (cont.)**

- 9.13 DHHS has advised that Council may choose to renegotiate and repurpose HACC-PYP funds to support delivery of these additional functions, if required.

**Transitional Client Arrangements**

- 9.14 Council currently provides services to 450 clients under the HACC PYP. Of these clients:
- 9.14.1 110 have already tested eligible for the NDIS;
  - 9.14.2 104 are expected to test eligible and transition to the scheme over the next 14 months; and,
  - 9.14.3 236 are expected to be ineligible for the scheme and to continue to have their service needs met under the HACC PYP.
- 9.15 Should Council proceed with the recommended, in-kind funding arrangement (option 1), Council will continue to provide the same types and volumes of services to both NDIS eligible and NDIS ineligible clients for the next 14 months, until 31 May 2019.
- 9.16 At the conclusion of the roll-out period (31 May 2019), all NDIS eligible clients will be required to move to another service provider. To facilitate this process, Council's Metro Access Officer will be working closely with clients, the National Disability Insurance Agency, Local Area Coordinators and local NDIS service providers in the intervening period.
- 9.17 For those clients who do not transition to the NDIS, they will continue to have access to the services they need under the HACC PYP, in line with current eligibility guidelines.
- 9.18 During the roll-out period, a new client intake process will be adopted. This will ensure that new clients eligible for the NDIS are directed to appropriate service providers, whilst ensuring clients with urgent care needs have services established as soon as possible. Throughout the roll-out period:
- 9.18.1 Clients requiring personal care or delivered meals services will be prioritised and services will be established immediately. Only once services have been established will clients be encouraged to contact the NDIA to test their eligibility for the NDIS.
  - 9.18.2 Clients seeking other services, such as respite care, planned activity groups (PAGs) and home modifications will be directed to contact the NDIA in the first instance to have their eligibility for the NDIS determined.
- 9.19 Arrangements for HACC PYP assessment services delivered by Council are yet to be finalised. Further guidance from DHHS is expected shortly. In the interim, Council will continue to deliver assessments for all clients under the age of 65 years

**Transition Planning and Support**

- 9.20 Officers are continuing to progress a range of actions that will support the smooth roll-out of the NDIS, while preventing disruption to clients, staff and the organisation. These actions include:
- 9.20.1 Liaising with local governments operating in the 'North Eastern Melbourne Area' to draw upon key learnings and insights;
  - 9.20.2 Ongoing meetings with the DHHS, NDIA and Local Area Coordinators;
  - 9.20.3 Providing regular updates and communication to client-facing, Direct Care Worker staff; and
  - 9.20.4 Ongoing engagement with clients and their carers.

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well as providing ongoing support to clients once their NDIS plans are implemented. The Brotherhood of St Laurence is the LAC provider for Hume City.

**REPORT NO: HE071 (cont.)**

**10. CONCLUSION:**

- 10.1 If Council proceeds with the in-kind funding arrangement (Option 1), Council will continue to deliver the same types and volumes of services to both NDIS eligible and ineligible clients throughout the roll-out period (1 March 2018- 31 May 2019) and Council's HACC PYP funding would remain unchanged for this period.
- 10.2 This provides sufficient lead time to ready eligible clients to transition to another service provider and to take steps that will minimise disruption to clients, staff and the organisation.

<b>REPORT NO:</b>	CC067
<b>REPORT TITLE:</b>	Civic Collection Policy
<b>SOURCE:</b>	Tobias Hengeveld, Curator; David Henry, Community Development Officer
<b>DIVISION:</b>	Community Services
<b>FILE NO:</b>	HCC06/205
<b>POLICY:</b>	-
<b>STRATEGIC OBJECTIVE:</b>	3.3 Strengthen community connections through local community events and the arts.
<b>ATTACHMENT:</b>	1. <i>Draft Civic Collection Policy</i>

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**1. SUMMARY OF REPORT:**

The Draft Hume City Council Civic Collection Policy (**Attachment 1**) has been prepared for Council consideration.

The Draft Civic Collection Policy provides guidance for Council's work in maintaining and developing a Civic Collection of high significance, relevance and quality, to which the Hume community has access. The Hume Civic Collection includes artworks (including public artworks) and historical objects.

**2. RECOMMENDATION:**

**That Council adopts the Draft Hume City Council Civic Collection Policy to guide the maintenance and development of Council's Civic Collection.**

**3. LEGISLATIVE POWERS:**

As specified in the Local Government Act 1989, a key function of Council is to advocate and promote proposals which are in the best interest of the local community. The Civic Collection Policy supports Council's leadership role in telling the stories that assist communities in understanding their heritage, culture and diversity. Council also acknowledges that providing access to quality artworks in public places can promote community identity and wellbeing.

**4. FINANCIAL IMPLICATIONS:**

4.1 The Civic Collection Policy does not identify any immediate costs. However, the guidelines as to methods of safe storage, conservation, digital archiving and deaccessioning of collection items will require an ongoing commitment in Council's operating budget.

**5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:**

NIL

**6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:**

NIL

**7. CHARTER OF HUMAN RIGHTS APPLICATION:**

7.1 The Draft Civic Collection Policy is underpinned by Council's Social Justice Charter (2014) and will incorporate all principles within the Charter.

7.2 The Draft Civic Collection Policy supports the Social Justice Charter in seeking to advance a fair and just society and promoting respect for every citizen, encouraging community participation, strengthening community wellbeing and reducing the causes of disadvantage.



**REPORT NO: CC067 (cont.)**

7.3 Human Rights have been taken into consideration as a motivation for the Draft Civic Collection Policy. The rights that have been considered are:

- 7.3.1 freedom of expression (section 14)
- 7.3.2 right to take part in public life (section 18)
- 7.3.3 cultural rights (section 19).

7.4 The above rights have been considered and applied in following objectives:

- 7.4.1 The Draft Civic Collection Policy will document and celebrate people, events, achievements and the changing culture and landscape of the municipality.
- 7.4.2 The Draft Civic Collection Policy demonstrates Council's support for arts and culture, acknowledging the social, health, wellbeing and economic benefits of fostering a diverse, culturally engaged and active community.

**8. COMMUNITY CONSULTATION:**

Extensive community consultation was undertaken to formulate Hume Horizons 2040 which assisted in the formulation of Hume City Council's Council Plan (2017-2021) which identified the following as a priority:

Theme 3: A culturally vibrant and connected community.

Strategic Objective 3.2: Strengthen community connections through local community events and the arts.

**9. DISCUSSION:**

**9.1 Policy Development**

- 9.1.1 To develop a coordinated approach to the management and maintenance of Council's Civic Collection, an external heritage consultant was appointed to audit the current works. A specialist consultant, with over 35 years' experience working in museums, galleries and the cultural heritage sector in Australia and the UK, was engaged for this purpose.
- 9.1.2 The audit included an initial desk-based assessment of the existing collection. This process was followed by a site-based assessment, which included an insurance valuation update and recommendations to reflect industry standards through policy development for inclusion in the Draft Civic Collection Policy.

**9.2 Policy Statement**

The Draft Civic Collection Policy:

- 9.2.1 Guides the acquisition of contemporary artworks and historical objects of significance to Council and its predecessors.
- 9.2.2 Supports the ongoing documentation of people, events, achievements and the changing culture and landscape of the municipality.
- 9.2.3 Demonstrates Council's support for arts and culture, acknowledging the social, health and wellbeing and economic benefits of fostering a diverse, culturally engaged and active community.

**9.3 Policy Objective**

- 9.3.1 The Policy positions Council to take a sustainable management approach to its existing and future Civic Collection with the objectives of:
  - 9.2.2 reflecting Hume City's rich and diverse cultural heritage
  - 9.2.3 celebrating Hume City's people, events, and achievements

**REPORT NO: CC067 (cont.)**

- 9.2.4 facilitating interpretation of Hume City's changing culture and landscape.

**9.4 Civic Collection Policy assumptions**

- 9.4.1 The Policy will directly impact the current identified collection, comprising of works of art, decorative objects, memorabilia and ephemera, housed at various locations across the City. It will further be applied to a future audit of the George Evans Museum heritage items.
- 9.4.2 Council will continue to be consulted on future acquisitions and the deaccession of items to the collections relevant.

**10. CONCLUSION:**

The Draft Civic Collection Policy will formalise Council's commitment to the development and maintenance of a collection of valuable, innovative and locally relevant artworks (including public artworks) as well as significant historical objects. This will enable Council to continue to build a distinct collection, reflecting the vibrant identity of our municipality, and celebrating the culture, heritage and history of Hume's local communities.



# CIVIC COLLECTION POLICY

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<b>Policy Reference No.</b>	POL/###
<b>File No.</b>	HCC06/231
<b>Strategic Objective</b>	3.2: Strengthen community connections through local community events and the arts
<b>Adopted by Council</b>	13/03/2018
<b>Re-Adopted Date for Review</b>	##### [LEAVE BLANK IF N/A] February 2023
<b>Responsible Officer</b>	Manager Community Development and Learning
<b>Department</b>	Community Development and Learning

## **CIVIC COLLECTION POLICY**

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### **1. POLICY STATEMENT**

- 1.1 The Civic Collection Policy guides the acquisition of contemporary artworks and historical objects of significance to Council and its predecessors.
- 1.2 The Civic Collection will document and celebrate people, events, achievements and the changing culture and landscape of the municipality.
- 1.3 The Civic Collections Policy demonstrates Council's support for arts and culture, acknowledging the social, health and wellbeing and economic benefits of fostering a diverse, culturally engaged and active community.

### **2 PURPOSE**

This Policy provides a framework for the maintenance and development of the Civic Collection based on Council Strategy and informed by sector best practice.

This Policy provides guidance for Council's work in maintaining and developing a Civic Collection of high significance, relevance and quality to which Hume City communities and others have access.

This Policy assists in delivering community expectations identified in Hume Horizons 2040 and the Council Plan 2017-21 under Theme 3: A Culturally Vibrant and Connected Community, in line with the following Strategic Objectives and Community Expectations.

- Strategic Objective 3.1: Foster socially connected and supported communities.
  - o Community expectation 3.1.3: Hume's rich and diverse cultural heritage is celebrated, creating a vibrant and inclusive community that values and welcomes people from all backgrounds and faiths.
- Strategic Objective 3.2: Strengthen community connections through local community events and the arts.
  - o Community expectation 3.2.1: Social cohesion is supported and strengthened through participation and interaction in the arts, cultural activities and local community events.

### **3 SCOPE**

Included in the scope of this Policy are all artworks and historical objects owned by Council as part of the Civic Collection including Public Artworks.

This Policy should be used in conjunction with the Art in Public Places Policy (POL/148), which refers specifically to Public Artworks.

### **4 OBJECTIVE**

- 4.1 The Policy positions Council to take a sustainable management approach to its existing and future civic collection with the objectives of:
  - 4.1.1 reflecting Hume City's rich and diverse cultural heritage
  - 4.1.2 celebrating Hume City's people, events, and achievements
  - 4.1.3 facilitating interpretation of Hume City's changing culture and landscape.

### **5 POLICY IMPLEMENTATION**

- 5.1 Council staff responsible for the Civic Collection will refer to the *National Standards for Australian Museums and Galleries*, V 1.5, September 2016 as industry best practice in the execution of their work.
- 5.2 The Policy will be implemented by the Arts and Cultural Development program staff.

## **CIVIC COLLECTION POLICY**

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- 5.3 The Civic Collection acquisition criteria ensure the development of cohesive collections. In order to be accessioned into the Civic Collection, an item must meet all of the following acquisition criteria:
- 5.3.1 be an unconditional donation, purchase or bequest which has valid and clearly verifiable legal title
  - 5.3.2 have a distinctive and verifiable connection with the heritage or culture of the municipality, or represent a unique opportunity to enrich the cultural life of the municipality
  - 5.3.3 enhance the current scope of the Civic Collection, for example filling an important thematic or geographical gap, or representing a unique voice, event or experience
  - 5.3.4 if it is an additional version of an existing Civic Collection item, that provides a better quality example than the existing item
  - 5.3.5 have the capacity to be placed on display in a Council building without hindrance to public access or safety
  - 5.3.6 have sufficient resources allocated by Council for its storage and conservation
  - 5.3.7 be safe and pose no threat to people or other collection items.
- 5.4 Council staff with responsibility for the Civic Collection may nominate a collection item for de-accession and disposal, based on the following criteria:
- 5.4.1 it does not meet the Civic Collection's current Acquisition Criteria
  - 5.4.2 it is in poor condition and is considered of insufficient merit for allocation of conservation resources
  - 5.4.3 it cannot be displayed due to its properties and is not suitable for research
  - 5.4.4 it is a duplicate that serves no specific function
  - 5.4.5 it is irreparably damaged or destroyed
  - 5.4.6 it is stolen without hope of return.
- 5.5 The Policy will be monitored in alignment with current and future strategic planning to support arts and cultural development and integrated into periodic reporting to Council.
- 5.6 Acquisition of new works into the Civic Collection will be assessed based on the acquisition criteria outlined in 5.3. The decision-making process will be governed according to the value of the acquisition as follows:
- 5.6.1 Up to \$10,000 – approval by Director City Communities
  - 5.6.2 \$10,000 to \$20,000 – approval by CEO
  - 5.6.3 Over \$20,000 – approval by Council

## **6 DEFINITIONS AND ABBREVIATIONS**

- 6.1 **Artworks:** All media including, but not restricted to: contemporary and historical works, works on paper, sculpture, paintings, photographs, digital media.
- 6.2 **Civic Collection:** All artworks and historical objects owned by Council and listed on a dedicated register.
- 6.3 **Acquisition:** refers to process by which artworks and historical items are formally introduced into the Civic Collection including how they are sourced (including donations), assessed, procured, and documented.
- 6.4 **Deaccession:** refers to the process by which artworks and historical items are formally removed from the Civic Collection including how they are identified and assessed as no longer of high significance, and how alternate re-location or destruction is undertaken.

**CIVIC COLLECTION POLICY**

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**7 RELATED DOCUMENTS**

- 7.1 *National Standards for Australian Museums and Galleries*, V 1.5, September 2016
- 7.2 Hume City Council, *Hume Horizons 2040*, May 2014
- 7.3 Art in Public Places Policy, 10 August 2015, POL/148
- 7.4 Hume City Council Civic Collection Management Plan. (2017)

<b>Date Adopted</b>	13/03/2018
<b>Date Re-Adopted</b>	##/##/#### [Leave blank if N/A]
<b>Review Date</b>	13/03/2023

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<b>REPORT NO:</b>	CC068
<b>REPORT TITLE:</b>	Hume City Council Reconciliation Action Plan 2018 -2022
<b>SOURCE:</b>	Julie Andrews, Community Capacity Building Coordinator
<b>DIVISION:</b>	Community Services
<b>FILE NO:</b>	HCC11/55
<b>POLICY:</b>	-
<b>STRATEGIC OBJECTIVE:</b>	3.1 Foster socially connected and supported communities.
<b>ATTACHMENT:</b>	1. <i>Hume City Council Reconciliation Action Plan 2018-2022</i>

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**1. SUMMARY OF REPORT:**

- 1.1 As part of Council's commitment to Hume's Aboriginal and Torres Strait Islander community, the draft Reconciliation Action Plan 2018-2022 (RAP) adopted by Council in October has undergone extensive community consultation and has been exhibited on Council's website for comment.
- 1.2 The aim of the draft RAP (**Attachment 1**) is to progress social justice and Council's commitment to working with community to develop meaningful actions to increase participation by Hume's Aboriginal and Torres Strait Islander peoples in the educational, economic and social opportunities available in Hume City. The draft RAP seeks to help close the gap on areas of identified disadvantage.
- 1.3 To facilitate the community consultation Council engaged the services of an Aboriginal social enterprise to consult with members of the community on the draft RAP.
- 1.4 The draft RAP details the additional actions that were developed in response to the identified issues and needs of Aboriginal and Torres Strait Islander community during the community consultation. Additional actions included in the draft RAP have resourcing implications and require Council to consider a future budget allocation to support the delivery of the draft RAP.

**2. RECOMMENDATION:**

**That Council:**

- 2.1 adopts the draft Hume City Council Reconciliation Action Plan 2018-2022 to advance social justice outcomes and reconciliation with Hume City's Aboriginal and Torres Strait Islander Community over the next four years.**
- 2.2 refers the allocation of financial resources to support the delivery of the RAP to the 2018/19 budget for consideration.**

**3. LEGISLATIVE POWERS:**

As specified in the Local Government Act 1989, a key function of Council is to advocate and promote proposals which are in the best interest of the local community. The development of the RAP will assist Council in strengthening a positive relationship and engagement with the local Aboriginal and Torres Strait Islander people and support the journey towards reconciliation.

**4. FINANCIAL IMPLICATIONS:**

- 4.1 Additional budget required to support the implementation of the RAP includes:
  - 4.1.1 \$30,000 for 2018/19, program funding to facilitate the range of actions, including the design and development of suburb storyboards, a Stolen Generation marker, Reconciliation and NAIDOC week activities, employment engagement forum and the review of Council's Aboriginal and Torres Strait Islander Recognition Policy.

REPORT NO: CC068 (cont.)

**5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:**

NIL

**6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:**

NIL

**7. CHARTER OF HUMAN RIGHTS APPLICATION:**

7.1 The RAP has been developed within the Hume City Council Social Justice Framework and considers the rights outlined in the Hume Citizen's Bill of Rights and the *Charter of Human Rights and Responsibilities Act 2006 (Vic)* (Victorian Charter).

7.2 The RAP considers how individuals and community members of Hume City's Aboriginal and Torres Strait Islander populations have been restricted in exercising their rights in the past and aims to address barriers to the rights expressed in the Victorian Charter including, freedom of expression (freedom from discrimination), equity of access (to health and wellbeing opportunities, such as education and employment), and dignity and respect (a recognition and celebration of the first people of the nation).

**8. COMMUNITY CONSULTATION:**

8.1 Community consultations led by the Aboriginal social enterprise, were held over a four month period, commencing in late October 2017 and closing in January 2018.

8.2 In total, more than 50 people were successfully engaged through the utilisation of a number of methods including group consultation sessions and one-on-one meetings.

8.3 A group consultation session was held on Wednesday 6 December, at the Indigenous Education Centre at Kangan Institute's Broadmeadows campus. The session was promoted through various community and Council networks and attracted a gathering of over 25 people.

8.4 A diverse range of Aboriginal residents participated in the one on one engagement sessions including participants of the Wandara Elders Group and Booris in Hume. Participation included: women, men, youth, council employees, service stakeholders, community leaders, traditional owners and entire families - many of whom, have lived in Hume most of their lives. Some participants recorded having limited or no knowledge or access to Council's current programs and services.

8.5 Each consultation and engagement session was jointly promoted by Hume City Council and Aboriginal community networks. The consultation sessions were held in informal local spaces, familiar to Aboriginal residents. Using an Aboriginal social enterprise to conduct the engagement sessions leveraged off existing trust relationships within the community and greatly contributed to participants feeling that their views and opinions were valued.

8.6 The RAP was placed on Council's website for comment from October 2017 to January 2018.

8.7 The draft RAP was submitted to *Reconciliation Australia* for consideration and comment.

**9. DISCUSSION:**

9.1 Aboriginal and Torres Strait Islander people living in Hume City are more disadvantaged on a range of indicators. For those 15 years and over, the unemployment rate in 2016 was 14% compared to 9% for non-Aboriginal and Torres Strait Islander people. Those 15-24 years old were twice as likely not to be engaged in employment or education (24%, compared to 12% for the non- Aboriginal and Torres Strait Islander population). Indicators of educational attainment were also lower. A greater percentage (17%) of Aboriginal and Torres Strait Islander people's level of educational attainment was year 9 or below, compared to 12% for the non-Aboriginal and Torres Strait Islander population.



REPORT NO: CC068 (cont.)

- 9.2 A higher proportion of Aboriginal and Torres Strait Islander people in Hume City have a disability. In 2016, 8.9% had a disability compared to 6.6% of non-Aboriginal and Torres Strait Islander people. The contrast was greater for people aged 20 to 64 years, with 8.8% of Aboriginal and Torres Strait Islander people in this age group recorded as having a disability in comparison to 4.9% of the non-Aboriginal and Torres Strait Islander population.
- 9.3 39% per cent of Aboriginal and Torres Strait Islander families were one parent families compared to 18% of non-Aboriginal and Torres Strait Islander families.
- 9.4 Aboriginal and Torres Strait Islander people living in Hume City had a lower median weekly income of \$517.00 compared to \$529.00 for the non-Aboriginal and Torres Strait Islander population.
- 9.5 These statistics highlight some of the factors that make up the social, health and economic gap between Aboriginal and Torres Strait Islander people and non-Aboriginal and Torres Strait Islander people residing in Hume City.
- 9.6 This RAP is a tool to assist Council to address the issues and disadvantage currently experienced by Hume City Aboriginal and Torres Strait Islander people and to build positive relationships and respect for the special contribution that Aboriginal and Torres Strait Islander peoples bring to the broader community. Importantly, the RAP provides a guide for Council and the community to progress reconciliation. The RAP has been developed within Council's Social Justice Framework and actions sit within three themes which align with the themes of Reconciliation Australia. The three themes are:
- 9.6.1 Respect / Inform – RAP organisations build respect by increasing the cultural awareness and competency of their employees.
- 9.6.2 Relationships / Access and Participation – Strong sustainable relationships between Aboriginal and Torres Strait Islander peoples and other Australians are at the heart of reconciliation.
- 9.6.3 Opportunities / Advocacy – The RAP framework provides Council with a process to convert opportunities for employment and enhanced health and wellbeing outcomes into real actions and measurable outcomes.
- 9.7 Community consultation and engagement demonstrated support for these themes, however additional actions have been identified to progress Aboriginal and Torres Strait Islander people's equality, access and participation.
- 9.8 Key areas of concern identified for Aboriginal and Torres Strait Islander communities based in Hume, reflect the systemic barriers Aboriginal and Torres Strait Islander people have faced since colonisation.
- 9.9 The key issues identified by Hume's Aboriginal and Torres Strait Islander community include:
- 9.9.1 Poor health and lack of dedicated Aboriginal services
- 9.9.2 Youth justice and prevention programs
- 9.9.3 Education and training gaps
- 9.9.4 Employment capacity, low work-skills
- 9.9.5 Lack of knowledge about service options and inability to access Aboriginal service workers
- 9.9.6 Lack of cultural recognition, respect and discrimination
- 9.9.7 Lack of cultural meeting places, business center, skill development spaces
- 9.9.8 Family violence and prevention programs
- 9.9.9 Early child-hood development
- 9.9.10 Disability/Aged care support

REPORT NO: CC068 (cont.)

- 9.9.11 Treaty campaigns and awareness
- 9.9.12 Cultural safety demonstrated by symbolic displays such as flying the Aboriginal flag, acknowledgement of traditional custodians on Council buildings and gateway treatments and, Wominjeka, welcome, in Aboriginal language, displayed in reception areas of Council buildings.
- 9.10 Additional actions arising from the community consultation include the following:
  - 9.10.1 Respect / Inform
    - (a) Investigate the development of an Aboriginal Advisory Committee with representation from community members, key stakeholders Councillors, and Council officers.
    - (b) Facilitate meetings between Hume City Council Mayor, Councillors and Aboriginal and Torres Strait Islander Community members to strengthen the sharing of information.
    - (c) Update Council's Recognition Policy to include advice on the naming of roads, buildings and suburbs, including as a first step, the addition of a Wurundjeri translation on existing suburb signs throughout Hume City.
    - (d) Include the development and permanent display of a Stolen Generation Marker to document the history of Aboriginal and Torres Strait Islander communities.
  - 9.10.2 Relationships / Access and Participation
    - (a) Facilitate partnerships with Aboriginal and Torres Strait Islander organisations and the HCC youth services team.
    - (b) Council to maintain an active working relationship with the Local Aboriginal Network (LAN), a Victorian Government Initiative.
  - 9.10.3 Opportunities / Advocacy
    - (a) Partner with Aboriginal service providers to deliver one community group governance training program per year.
    - (b) Support Aboriginal and Torres Strait Islander community groups to participate in Councils Community Grants program.
    - (c) Review of Council's Recruitment Guidelines to identify areas that could be enhanced to support the recruitment of Aboriginal and Torres Strait Islander people.
    - (d) Investigate social procurement options that seek to procure goods and services from Aboriginal and Torres Strait Islander businesses through the Hume Procurement Policy review.
    - (e) Source and apply for funding to support a feasibility study to investigate the request for an Aboriginal Community Hub.
- 9.11 Throughout the consultation period community members consistently requested Council to employ a RAP Coordinator to reduce the barriers and facilitate the participation of Aboriginal and Torres Strait Islander people in Council services and programs. Currently Council employs a range of Council staff to facilitate access to services including:
  - 9.11.1 HACC Access and Support Officer<sup>1</sup>
  - 9.11.2 Aboriginal and Torres Strait Islander Parent Engagement Officer (ongoing position)
  - 9.11.3 Aboriginal and Torres Strait Islander Parent as Teacher Officer (externally funded position, with limited timeframe)

**REPORT NO: CC068 (cont.)**

9.11.4 Best Start Facilitator<sup>1</sup>

9.11.5 Maternal Child and Health Nurse<sup>1</sup>.

9.11.6 In addition to the positions noted above, Council officers regularly work with community on culturally specific programs as part of normal program and service delivery.

9.12 The additional actions included in this report are consistent with previous formal and informal consultations including the consultations conducted during the development of Council's previous RAP (2013 -2017).

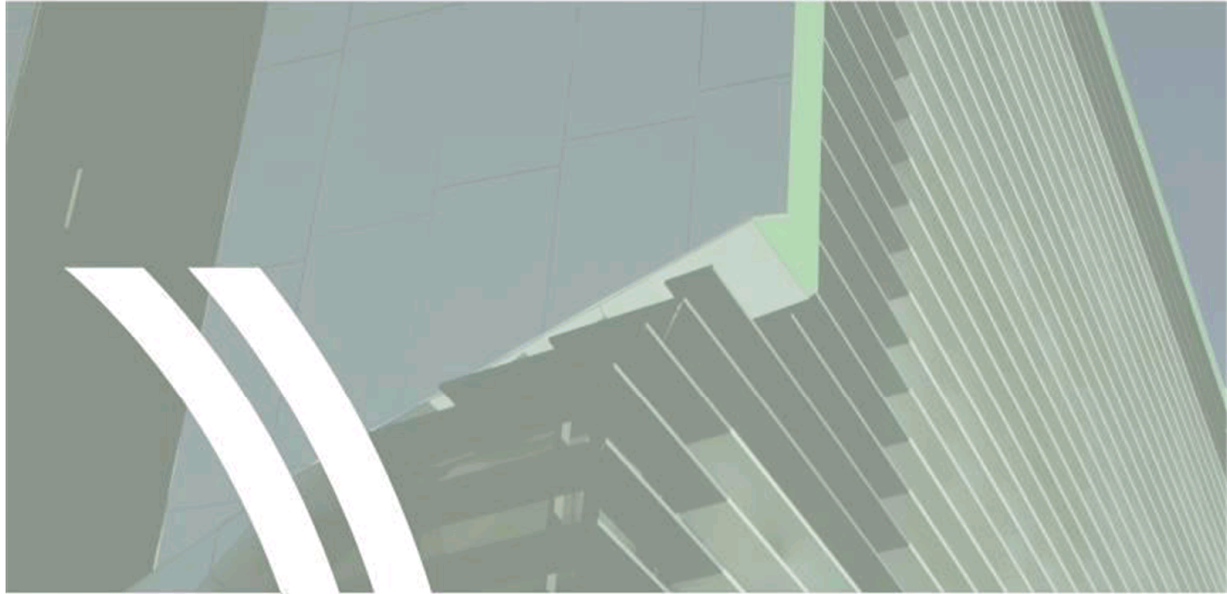
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<sup>1</sup> Engagement with Aboriginal & Torres Strait Islander residents are a target population within the appointed officers' work plans.

**10. CONCLUSION:**

10.1 The community engagement during the consultation phase indicated that stronger relationships, partnership and improved access to key services and programs need to be resourced to respond to the level of disadvantage experienced by Hume City Aboriginal and Torres Strait Islander people.

10.2 The additional actions included in the final draft of the RAP aim to advance social justice outcomes and reconciliation. The community consultation and engagement results have highlighted further opportunities where Council can continue to build the relationship between Council and Aboriginal and Torres Strait Islander community members residing in Hume City.



# HUME CITY COUNCIL

## RECONCILIATION ACTION PLAN 2018 - 2022



## **Hume City Council – Reconciliation Action Plan 2018-2022**

### Acknowledgement of Traditional Owners

Hume City Council recognises the rich Aboriginal heritage within the municipality and acknowledges the Gunung-Willam-Balluk of the Wurundjeri as the Traditional Custodians of this land. Council embraces Aboriginal living culture as a vital part of Australia's identity and recognises, celebrates and pays respect to the existing family members of the Gunung-Willam-Balluk and to Elders past and present.

### 'Indigenous Australians' or 'Aboriginal and Torres Strait Islander people'?

Today, the term 'Indigenous Australian' is used to encompass both Aboriginal people and Torres Strait Islander people. However many Aboriginal and Torres Strait Islander people do not like to be referred to as 'Indigenous' as the term is considered too generic.

Many people prefer to be called Aboriginal or Torres Strait Islander, rather than the generic term Indigenous Australian. It's best to find out what individuals prefer to be called, rather than making assumptions. During the community consultations that were conducted to support the development of this Reconciliation Action Plan (RAP), the consistent message was that community preferred to be referenced as Aboriginal or Torres Strait Islander people.

When used in Australia, the words Indigenous, Aboriginal and Torres Strait Islander are capitalised, as would be the name of any other group of people. The Australian Institute of Aboriginal and Torres Strait Islander Studies notes that it is best not to resort to the acronyms of ATSI or TSI and recommends using the full titles of Aboriginal and Torres Strait Islander instead.

### Hume City Aboriginal and Torres Strait Islanders Profile Summary

Located in Melbourne's northern growth corridor, Hume City is one of the fastest and largest growth municipalities in Melbourne. With an estimated population of just over 208,000 at 2017, Hume City is home to approximately 1,456 Aboriginal and Torres Strait Islander people (6.1% of Melbourne's Aboriginal and Torres Strait Islander population live in Hume City) and has the fifth largest Aboriginal and Torres Strait Islander population in metropolitan Melbourne. The suburbs of Craigieburn and Sunbury have the largest Aboriginal and Torres Strait Islander communities within Hume City.

The Aboriginal and Torres Strait Islander population of Hume City is diverse, with Traditional Owners as well as people who have relocated from other parts of Victoria and Australia for education, employment, housing and family opportunities. Aboriginal and Torres Strait Islander people have sought to develop their kinship networks within Hume City. Council currently operates a range of programs and services that facilitate the connection of Aboriginal and Torres Strait Islanders and the broader community.

### What is Reconciliation?

In its broadest sense, 'reconciliation' means coming together. In Australia it is the term used to refer to the bringing together of Aboriginal and Torres Strait Islander people and non-Aboriginal and Torres Strait Islander people. Supporting reconciliation means working to overcome the factors that cause division and inequality between Aboriginal and Torres Strait Islander people and the broader community.

The most significant areas of division and inequality are the differences in health, income and living standards of Aboriginal and Torres Strait Islander people and non-Aboriginal and Torres Strait Islander people. Causes of this inequality include; misunderstanding, prejudice and racism, as many non-Aboriginal and Torres Strait Islander people still know little about Aboriginal and Torres Strait Islander people and their history.

Reconciliation in action includes projects to combat racism and prejudice and to educate the community about the shared history, following colonisation of Aboriginal and Torres Strait Islander people, with the broader community.

Reconciliation projects aim to bring Aboriginal and Torres Strait Islander people and non-Aboriginal and Torres Strait Islander people together to learn more about each other and focus on addressing disadvantage by providing services for Aboriginal and Torres Strait Islander people.

#### Key Events in Australia's Reconciliation History

1932 - William Cooper establishes the Australian Aborigines' League. During the 1930s, Mr Cooper and other leaders of the Aborigines Progressive Association gathered 1,814 signatures on a petition calling on Prime Minister Joseph Lyons and King George VI to intervene "for the preservation of our race from extinction and to grant representation to our race in the Federal Parliament".

1938 - The Aborigines Progressive Association and the Australian Aborigines' League declare 26 January a day of mourning for Aboriginal people.

1963 - Yolngu leaders present the Yirrkala bark petitions to the Australian Parliament, protesting against the seizure of more than 300 square kilometres of Aboriginal land in Arnhem Land for mining.

1965 - University of Sydney students, including Charlie Perkins, launch the Freedom Rides, travelling around NSW by bus to draw attention to discrimination against Aboriginal people.

1966 - Aboriginal stockmen and their families stage the Wave Hill station 'walk-off' to protest against poor working conditions. The Gurindji peoples' struggle later develops into Australia's first successful Aboriginal land claim.

1967 - In a national referendum, 90.77 per cent of Australians vote 'yes' to give the Commonwealth Government the power to legislate for Aboriginal people and to include Aboriginal people in the Census.

1971 - The Gove land rights case, while denying recognition of native title, sets the intellectual framework for recognising land rights.

1971 - Neville Thomas Bonner becomes the first Aboriginal parliamentarian following his election as Senator for Queensland.

1972 - The Aboriginal Tent Embassy is established.

1972 - The Department of Aboriginal Affairs is established.

1973 - The Woodward Royal Commission into Aboriginal Land Rights is established, paving the way for the Aboriginal Land Rights Act in the Northern Territory.

1975 - Australian Parliament passes the Racial Discrimination Act 1975 (Commonwealth).

1976 - Australian Parliament passes the Aboriginal Land Rights (Northern Territory) Act, leading to the establishment of land rights legislation in most Australian States in the 1970s and 1980s.

1988 - The Barunga Statement calling for self-management and land rights is presented to Prime Minister Bob Hawke, who indicates his support for a treaty.

1990 - The Australian Government establishes the Aboriginal and Torres Strait Islander Commission (ATSIC). Dr Lowitja O'Donoghue AC, CBE, DSG is the first chairperson.

1991 - The Royal Commission report into Aboriginal Deaths in Custody is tabled.

1991 - The Council for Aboriginal Reconciliation (CAR) is established. Professor Patrick Dodson is appointed inaugural chairperson.

1992 - The High Court recognises native title in the landmark case Mabo v Queensland (No. 2).

1992 - Prime Minister Paul Keating delivers the 'Redfern Speech' recognising the history of dispossession, violence and forced removal of Aboriginal children.

1992 - The Aboriginal and Torres Strait Islander Social Justice Commissioner position is created. Professor Mick Dodson AM is appointed to the position.

1993 - Australian Parliament passes the Native Title Act 1993 (Commonwealth).

1993 - The first Week of Prayer for Reconciliation is held, which later becomes National Reconciliation Week.

1995 - The Australian Government officially recognises the Aboriginal and Torres Strait Islander flags.

1996 - The first National Reconciliation Week is celebrated.

1996 - The full High Court hands down its decision in Wik Peoples v Queensland (the 'Wik decision'), in which it determines that pastoral leases do not extinguish native title.

1997 - The National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families releases the Bringing Them Home report.

1997 - The Australian Reconciliation Convention is held in Melbourne.

1998 - The Native Title Act 1993 (Commonwealth) is amended based on Prime Minister John Howard's 10-point plan.

2000 - The Council for Aboriginal Reconciliation (CAR) delivers its final report to Prime Minister John Howard and the Australian Parliament at Corroboree 2000.

2000 - Bridge walks are held across Australia.

2000 - Reconciliation Australia is established.

2004 - ATSIC is abolished.

2006 - The Close the Gap campaign for Indigenous health equality is developed following the release of the Social Justice Report 2005.

2006 - Reconciliation Australia's Reconciliation Action Plan program begins.

2007 - The Northern Territory Emergency Response begins.

2007 - The Council of Australian Governments (COAG) commits to 'closing the gap' in life expectancy between Indigenous and non-Indigenous Australians.

2008 - Prime Minister Kevin Rudd delivers the Apology to the Stolen Generations.

2008 - COAG commits \$4.6 billion towards Closing the Gap on Indigenous Disadvantage for projects in health, housing, early childhood development, economic participation and remote service delivery.

2009 - Australia indicates its support for the United Nations Declaration on the Rights of Indigenous Peoples.

2010 - The National Congress of Australia's First Peoples is established.

2011 - The Expert Panel on Constitutional Recognition of Aboriginal and Torres Strait Islander peoples leads wide-ranging public consultations and delivers its findings in January 2012.

2012 - The campaign to recognise Aboriginal and Torres Strait Islander peoples in the Constitution begins.

2013 - The Australian Parliament passes the Aboriginal and Torres Strait Islander Peoples Recognition Act 2013 to maintain momentum towards a referendum.

*Source: The State of Reconciliation in Australia, Reconciliation Australia (2016)*

#### What is a Reconciliation Action Plan (RAP)?

A Reconciliation Action Plan (RAP) is about turning good intentions into real actions. A RAP is a business plan that uses a holistic approach to create meaningful relationships and sustainable opportunities for Aboriginal and Torres Strait Islander people.

#### Hume City Council's Journey towards Reconciliation

- Hume City Council supports the work of the Hume Aboriginal Partnership Group (APG) which is responsible for guiding the development of Aboriginal and Torres Strait Islander events that recognise achievements and celebrate culture, heritage and history. In previous years the APG have hosted a number of events including: Anniversary of the Apology, Sorry Day events, and NAIDOC week art exhibitions and cultural activities.
- The Hume City Council Access and Support Officer continues to support the building and enhancing of positive relationships between Council and the elder community.
- Hume City Council has a dedicated Maternal and Child Health Nurse, Aboriginal and Torres Strait Islander Parent Engagement Worker and Parent Support Worker to reduce the barriers to services and education.
- Hume City Council hosted an Aboriginal and Torres Strait Islander Health Intern funded by Healthy Together Victoria, to activate the Hume City Council Aboriginal



Community Profile 2016 through appropriate cultural engagement in community programs and events.

- Healthy Hume – Indigenous community garden established through the Australian Government's Healthy Communities Initiative to develop a range of projects including four community gardens and one indigenous community garden.
- Hume City Council Indigenous school holiday program inclusive of children with disability established. This program includes community based activities with community elders.
- Council has an Aboriginal and Torres Strait Islander Recognition Policy, which is implemented throughout Council activities.
  - Aboriginal flags fly at key Council offices
  - acknowledgement plaques are displayed at many community facilities
  - gateway treatments acknowledge the Wurundjeri as the traditional custodians of the land.
  - Council events and functions include a Welcome to Country performed by Traditional Owners from the Wurundjeri or an Acknowledgement of Traditional Owners.
- Council has coordinated and hosted numerous Reconciliation and NAIDOC Week activities over the years to celebrate key dates in the Aboriginal and Torres Strait Islander community calendar. These events are not just for the local Aboriginal and Torres Strait Islander community but for all community members. They aim to educate and encourage the broader community and Council staff to learn about Aboriginal and Torres Strait Islander culture and share in these significant milestones in our joint history.
- A 'Welcome Baby to Country' ceremony, introduced in 2012 and conducted annually, welcomes local children under the age of 12 months to the lands of the Gunung-Willam-Balluk Wurundjeri people by an Elder of the community.
- Art masterclass and exhibition held to showcase works created by the local community through a series of art masterclasses led by an Aboriginal artist and mosaic specialist offered in 2017.
- 'Boorais in Hume', an early parenting program, provides education and support for families with young children. This program is offered by Hume City Council's Family and Children's Services with the support of Victorian Aboriginal Childcare Agency.
- 'Boorais and Beyond' is a comprehensive, culturally safe support program for Aboriginal families, working with community elders. It collaborates with families to engage them in a huge range of early childhood services. This program is offered by Hume City Council in partnership with the Hume Early Years Partnership and Broadmeadows Valley Primary School. In 2015 this program was acknowledged by winning the Early Years Award – Better Access to Child and Family Support, Health Services, Schools and Early Education and Care Services.

#### Policy Framework

The RAP has been developed within the framework of Commonwealth, State and Local Government policy and legislation.

#### Hume City Council Social Justice Policy Framework

In 2001, Hume City Council was the first local jurisdiction to adopt a Social Justice Charter.

In 2007, Council implemented the updated Charter incorporating The Charter of Human Rights and Responsibilities Act 2006 (Vic).

Council adopted the revised Social Justice Charter in 2014 and developed a Social Justice Charter Implementation Guide to support the advancement of social justice outcomes across Council.

The Hume Social Justice Charter 2014 recognises that:

- Human and participatory rights are universal rights
- The realisation of these rights can be limited by economic and social disadvantage
- Disadvantage can be the ongoing result of past injustice
- Self-determination is a fundamental component of social justice
- Council has an active role in increasing participation and the exercise of human rights through practical strategies to reduce and eliminate systemic disadvantage.

The presence of three Social Justice Action Plans in 2016, including the Reconciliation Action Plan, further embed Council's commitment to advancing respect, participation and wellbeing of Aboriginal and Torres Strait Islander people.

Victorian Government Policy Framework

- Racial and Religious Tolerance Act 2001
- The Charter of Human Rights and Responsibilities Act 2006 (Vic)
- Equal Opportunity Act 2010
- Victorian Government Aboriginal Inclusion Framework
- Victorian Aboriginal Affairs Framework

Commonwealth Government policy Framework

- Racial Discrimination Act 1975
- Australians Human Rights Framework
- National Anti-Racism Strategy

#### Hume City Council RAP Journey

In February 2012, Hume City Council commenced the development of the Hume City Council Reconciliation Action Plan 2013-2017. The development of the RAP was an important step in continuing Council's commitment to increasing its engagement with and service delivery needs to the local Aboriginal and Torres Strait Islander people. Key stakeholders, Council staff and the local community were invited to participate in the consultations guided by the Reconciliation Australia "Framework for Action".

In May 2017, Hume City Council commenced a review of the Hume City Council Reconciliation Action Plan 2013 - 2017. The review considered the outcomes and achievements of the past four years and highlights areas that will continue to evolve to ensure relevant and meaningful engagement and service provision for Aboriginal and Torres Strait Islander communities. The development of the RAP 2018 - 2022 included the current actions that are being delivered within existing resources, budget and external funding. In October 2017 Council adopted the draft RAP 2018 - 2022 for community consultation.

This Reconciliation Action Plan 2018 - 2022 aims to build on the relationships between Council, service providers and Hume City's Aboriginal and Torres Strait Islander communities; and continue active measures to increase Aboriginal and Torres Strait Islander education, economic and community participation.

#### Hume City Council RAP Governance:

##### Hume City Council Aboriginal and Torres Strait Islander Social Inclusion Committee

The implementation of the RAP is overseen by Council's Aboriginal and Torres Strait Islander Social Inclusion Committee (SIC). The membership of this committee consists of representatives from various Council departments who have a direct or indirect responsibility for leading or supporting the delivery of RAP actions. The SIC is also responsible for monitoring the progress and contributing to HCC Social Justice Charter Annual Report that is presented to Council in August / September each year.

##### Hume Aboriginal Partnership

The Hume Aboriginal Partnership (APG) membership consists of Council staff, service providers and State Government representatives. The APG meet quarterly and lead the delivery of significant events such as Reconciliation Week, NAIDOC Week and Welcome Baby to Country. In addition, this group facilitates partnerships between key stakeholders to improve the access to services from Hume City's Aboriginal and Torres Strait Islander community.

##### Hume Aboriginal and Torres Strait Islander Advisory Committee

As part of the consultation phase in the development of this RAP, the request for a stronger RAP governance to advance the delivery of RAP actions was identified as a high priority. As part of the implementation of this RAP, Council officers will review the RAP governance and investigate ways to increase the engagement of community members, key stakeholders, Councilors and Council officers.

#### Themes for the RAP

The three themes of this RAP 2018 - 2022 are reflected in the Hume City Council Social Justice Charter 2014 and are a combined with Reconciliation Australia RAP themes.

The three themes are listed below, with a short description about what is intended by each theme.

**Respect/Inform**

Aboriginal and Torres Strait Islander cultures are among the oldest living cultures in the world and are a vital part of Australia's identity. Organisations who have committed to adopting a RAP build respect by increasing the cultural awareness and competency of their employees, celebrating National Reconciliation Week and performing Acknowledgement of Country and Welcome to Country ceremonies.

It is vital that Aboriginal and Torres Strait Islander people are informed about the RAP, consulted on its development and informed about the services and programs Council offers. In addition, this theme provides actions to increase the communication between Council and the Aboriginal and Torres Strait Islander people and improve the capacity for Aboriginal and Torres Strait Islander people to find the information they need in ways that are respectful, effective and relevant.

**Relationships/Access and Participation**

Strong, sustainable and mutually respectful relationships between Aboriginal and Torres Strait Islander people and other Australians are at the heart of reconciliation. For Aboriginal and Torres Strait Islander people to be supported in their endeavours, it is important they are able to access the services and programs available. Part of this theme focuses on ways to increase the participation of Aboriginal and Torres Strait Islander people in events, services and decision-making.

**Opportunities/Advocacy**

The RAP framework provides Council with a process to convert opportunities for employment and enhanced health and wellbeing outcomes into real actions and measurable outcomes. A key role of Council, in partnership with Aboriginal and Torres Strait Islander people, is to ensure other levels of government and relevant parties are aware of the issues faced by the communities in Hume City. This theme identifies a range of experiences, needs and issues that Council will raise with other parties including the State and Federal Governments in order to increase funding, services and improved outcomes.

An objective for each of the above themes has been developed to capture the essence of the themes and to inform the strategies and specific actions outlined in the follow sections of this plan.

**PROPOSED ACTIONS 2018 – 2022**

**Objective 1: RESPECT/INFORM**

Promote respect and recognition through enhanced communication between Council, Aboriginal and Torres Strait Islander people and the broader community. Enhanced communication between community and Council provides opportunities for increased participation by community members in Council services, events and programs. Two way communications ensure service; events and programs are relevant to current and emerging needs. It is vital that Aboriginal and Torres Strait Islander people are informed about the RAP and are informed about the services and programs Council offers.

Strategy	Action	Outcome	Responsibility	Timeline	Year 1
1.1 RAP Governance to be supported by Council, key stakeholders and community.	1.1 Investigate the development of an Aboriginal Advisory Committee with representation from community members, key stakeholders, Councillors and Council officers.	RAP Governance reviewed and recommendations implemented.  RAP actions delivered in partnership with community, Council and key stakeholders.	Lead: Community Development and Learning  Supported by: Organisational Performance and Engagement	2019/20	
1.2 Inform Council of ongoing and emerging needs of Aboriginal and Torres Strait Islander people.	1.2.1 Provide opportunities for direct service Council staff to undertake Aboriginal and Torres Strait Islander cultural awareness training, including knowledge of Traditional Owners.  1.2.2 Facilitate meetings between the Hume City Council Mayor, Councillors and Aboriginal and Torres Strait Islander Community members.	Council induction to include an introduction to cultural awareness training.  Cultural awareness training offered twice per year as part of the corporate training calendar.  Mayor and Councillors to meet with Elders and community members to provide information about the ongoing work of Council and the needs of Aboriginal and Torres Strait Islander people.  Increase communication, consultation and engagement with Wandara, the Hume Aboriginal My Time group, Kangan Indigenous Education Centre and The Elders Group.	Lead: Human Resources  Supported by: Community Development and Learning	Ongoing	March 2018 – June 2019
			Lead: Community Development and Learning	February and September annually	September 2018  February 2019

**PROPOSED ACTIONS 2018 – 2022**

<b>Strategy</b>	<b>Action</b>	<b>Outcome</b>	<b>Responsibility</b>	<b>Timeline</b>	<b>Year 1</b>
1.3 Provide and share information with the broader community about Aboriginal and Torres Strait Islander history and culture.	1.3.1 In partnership with the Hume Aboriginal Partnership Group organise community activities such as National Reconciliation and NAIDOC week events.	Two events and /or programs offered across the municipality each year to enhance community knowledge about Aboriginal and Torres Strait Islander history and culture.	Lead: Community Development and Learning Supported by: Health and Community Wellbeing; and Family, Youth and Children's Services	26 May to 14 July annually	May – July 2018 May 2019
	1.3.2 Reflect the presence of Aboriginal and Torres Strait Islander living culture through formal recognition, visual displays of art, naming of places, roads and facilities.	Council's Recognition Policy is updated to include advice on the naming of roads, buildings and suburbs.  Suburbs of Hume City translated to Aboriginal language and meaning and included on a story board to be located at significant sites of Hume City.  Symbols of recognition are displayed in and on Council buildings and gateway treatments.	Lead: Community Development and Learning	2018/19  2019  Ongoing	October 2018
	1.3.3 Ensure Council's Aboriginal and Torres Strait Islander Recognition Policy is implemented across the organisation.	Aboriginal flag protocols are adhered to.  Welcome to Country or Acknowledgement of Traditional Owners conducted at all Council events.	Lead: Community Development and Learning Supported by: Governance	Ongoing	March 2018 – June 2019
	1.3.4 In collaboration with the RAP Governance committees, document shared histories from settlement to today with the wider community to increase cross cultural understanding and to celebrate local Aboriginal and Torres Strait Islander culture.	Shared histories from settlement to today facilitated through workshops and programs are documented and included in Council's Library Collection and website.  Document history through the permanent display in the form of a Stolen Generation marker	Lead: Community Development and Learning Supported by: Communications and Events	Ongoing	Stolen Generation Marker April 2018 –June 2019

**PROPOSED ACTIONS 2018 – 2022**

**Objective 2: RELATIONSHIPS/ACCESS AND PARTICIPATION**

Building stronger relationships between Aboriginal and Torres Strait Islander people and the broader community, will strengthen community connection through shared learning of culture. Council strives to strengthen access and participation of Aboriginal and Torres Strait Islander people to support their capacity to take charge of issues that impact on them, with the intention for active engagement in the social, recreation, economic and built environment of our City. For Aboriginal and Torres Strait Islander people to be supported in their endeavours, it is important they are able to access the services and programs available. Council will work with Aboriginal and Torres Strait Islander people to identify access requirements and appropriate, culturally sensitive responses. Developing and advancing services and programs that systemically remove the barriers to participation by advancing opportunities for involvement in our City in the social, recreation, economic and built environment is a key commitment of a just society.

<b>Strategy</b>	<b>Action</b>	<b>Outcome</b>	<b>Responsibility</b>	<b>Timeline</b>	<b>Year 1</b>
2.1 Enhance health and recreation service participation for Aboriginal and Torres Strait Islander people.	2.1.1 Inform Aboriginal and Torres Strait Islander people about accessing Commonwealth Home and Community Care (HACC) Programs for young people and foster participation of Elders in accessing care services.	One community awareness raising activity delivered in partnership with stakeholders per year.	Lead: Health and Community Wellbeing	Annually	March 2018 – June 2019
	2.1.2 Continue to offer access to health and recreation services and explore further opportunities to support Aboriginal and Torres Strait Islander people.	Aboriginal and Torres Strait Islander people have access to appropriate Council health and recreation services as measured by service participation data.	Lead: Health and Community Wellbeing	Ongoing	March 2018 – June 2019
	2.1.3 Continue and expand Boorais in Hume early parenting program.	Aboriginal and Torres Strait Islander parents of early year's children are supported and resourced.	Lead: Family, Youth and Children's Services Supported by: Health and Community Wellbeing	Ongoing	March 2018 – June 2019
	2.1.4 Facilitate partnerships with Aboriginal and Torres Strait Islander organisations and the HCC youth team.	Aboriginal and Torres Strait Islander young people are supported and resourced.	Lead: Family, Youth and Children Services	Ongoing	March 2018 – June 2019

**PROPOSED ACTIONS 2018 – 2022**

<b>Strategy</b>	<b>Action</b>	<b>Outcome</b>	<b>Responsibility</b>	<b>Timeline</b>	<b>Year 1</b>
2.2 Build the capacity of Council services and programs to be accessible and culturally appropriate to support the ongoing and emerging needs of Aboriginal and Torres Strait Islander people.	2.2.1 Continue and strengthen the internal Aboriginal and Torres Strait Islander Social Inclusion Committee (SIC) to ensure Council service and programs are accessible and culturally appropriate.	All relevant Council departments are actively engaged in the internal Social Inclusion Committee (SIC).	Lead: Family, Youth and Children's Services  Supported by: Health and Community Wellbeing and Community Development and Learning	Quarterly	March 2018 – June 2019
2.3 Council will maintain a working relationship with Local Aboriginal Network (LAN).	2.3.1 Council officers to attend 4 LAN meetings per year and the LAN coordinator to attend 4 Aboriginal Partnership meetings per year.	Increase opportunities for Council and State government to deliver activities, programs and services that are relevant to the current and emerging needs.	Lead: Community Development and Learning  Supported by Family, Youth and Children Services and Health and Community Wellbeing	Quarterly	March 2018 – June 2019
	2.3.2 Support the continued development of the Hume Aboriginal Partnership Group to include Council staff and community partners.	Facilitate a collaborative review of the Terms of Reference of the Aboriginal Partnership Group.	Lead: Family, Youth and Children's Services  Supported by: Aboriginal and Torres Strait Islander Social Inclusion Committee	2018 2020 2022	March 2018 – June 2019



**PROPOSED ACTIONS 2018 – 2022**

**Objective 3: OPPORTUNITIES/ADVOCACY**

Council recognises, respects and is committed to closing the gap between Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander people in social, health and wellbeing and economic opportunities. Reducing the barriers that have prevented Aboriginal and Torres Strait Islander people from accessing services and participating in education, employment and community life has been a key focus of the previous Social Justice Action Plan. To advocate for and with Aboriginal and Torres Strait Islander people on social justice issues is a key component of the RAP in advancing a socially just community. A key role of Council, in partnership with Aboriginal and Torres Strait Islander people, is to ensure other levels of government and relevant parties are aware of issues faced by the communities in Hume City. This theme identifies a range of experiences, needs and issues that Council will raise with other parties including the State and Federal Governments, in order to increase funding, services and improved outcomes.

Strategy	Action	Outcome	Responsibility	Timeline	Year 1
3.1 Ensure timely response to issues impacting on social justice and access to choices affecting the lives of Aboriginal and Torres Strait Islander people.	3.1.2 Continue to advocate for Aboriginal and Torres Strait Islander services to have a presence in Hume City.	Increased understanding and knowledge of the service needs of Aboriginal and Torres Strait Islander people.  Services match the needs of Aboriginal and Torres Strait Islander people.  Increase participation of Aboriginal and Torres Strait Islander people into Council services and opportunities.	Lead: Community Development and Learning  Supported by: Aboriginal and Torres Strait Islander Social Inclusion Committee and the Aboriginal Partnership Group	Ongoing	March 2018 – June 2019
3.2 Engage our community and foster advocacy roles for Aboriginal and Torres Strait Islander people.	3.2.1 Provide training and community education forums to support Aboriginal and Torres Strait Islander people to obtain skills that support self-advocacy.	Partnership developed with Aboriginal service providers to deliver one training or community education forum per year to build awareness of local employment opportunities.  Partner with Aboriginal service providers to deliver one community group governance training program per year.  Aboriginal and Torres Strait Islander Community Groups participate in Council's Community Grants Program.	Lead: Economic Development  Lead: Community Development and Learning  Lead: Community Development and Learning	Annually  2019  2019	March 2018 – June 2019

**PROPOSED ACTIONS 2018 – 2022**

<b>Strategy</b>	<b>Action</b>	<b>Outcome</b>	<b>Responsibility</b>	<b>Timeline</b>	<b>Year 1</b>
3.3 Identify ongoing and emerging needs of Aboriginal and Torres Strait Islander people and the barriers that inhibit access to services	3.3.1 Continue to develop data collection systems to enhance Council's knowledge of Aboriginal and Torres Strait Islander people and their service requirements.	Council informed about the social inclusion and service requirements of Aboriginal and Torres Strait Islander people.  Greater understanding by Council about the barriers that impact on participation of Aboriginal and Torres Strait Islander people and how to remove these barriers.	Lead: Organisational Performance and Engagement  Supported by: Community Development and Learning; Family, Youth and Children's Services; Health and Community Wellbeing	Ongoing	March 2018 – June 2019
3.4 Support the recruitment and retention of Aboriginal and Torres Strait Islander staff within Hume City Council.	3.4.1 Review Council's recruitment guidelines to identify areas that could be enhanced to support the recruitment of Aboriginal and Torres Strait Islander people.	Reduced barriers to training and employment opportunities for Aboriginal and Torres Strait Islander people, measured by the number of applicants for traineeships and vacant positions.	Lead: Human Resources.  Supported by: Community Development and Learning	2019, ongoing	
3.5 Support local Aboriginal and Torres Strait Islander business.	3.5.1 Investigate social procurement options that seek to procure goods and services from Aboriginal and Torres Strait Islander businesses through the Hume Procurement Policy review.	Hume Procurement Policy reviewed to include advice on the engagement of Aboriginal and Torres Strait Islander businesses.	Lead: Finance and Property Development	2018, ongoing	June 2018
3.6 Investigate the request from community for an Aboriginal Community Hub.	3.6.1 Source and apply for funding to support a feasibility study to investigate the request for an Aboriginal Community Hub.	Funding opportunities source and applications completed.	Lead: Community Development and Learning	2019/20	

<b>REPORT NO:</b>	GE255
<b>REPORT TITLE:</b>	Local Government Act Review - Council Submission to the draft bill
<b>SOURCE:</b>	Gavan O'Keefe, Manager Governance
<b>DIVISION:</b>	Corporate Services
<b>FILE NO:</b>	HCC15/666
<b>POLICY:</b>	-
<b>STRATEGIC OBJECTIVE:</b>	5.3 Provide responsible and transparent governance, services and infrastructure which responds to and supports community needs.
<b>ATTACHMENT:</b>	1. <i>Council's Submission - Local Government Bill Exposure Draft</i>

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**1. SUMMARY OF REPORT:**

- 1.1 The State Government is conducting a comprehensive review of the *Local Government Act 1989*. The review has involved engagement with the local government sector and the Victorian community.
- 1.2 In June 2016, the State Government released a discussion paper outlining 157 potential reform directions. Council provided a submission to the discussion paper in September 2016.
- 1.3 In December 2017, The Minister for Local Government released the Local Government Bill the Exposure Draft for public consultation. This is the fourth and final stage of the public consultation process.

**2. RECOMMENDATION:**

- 2.1 That Council adopts attachment 1 as Council's Submission to the Local Government Bill Exposure Draft.
- 2.2 That the Chief Executive Officer submits Council's Submission to the Local Government Bill Exposure Draft to the Local Government Act Review Secretariat.

**3. LEGISLATIVE POWERS:**

Local Government Act 1989.

**4. FINANCIAL IMPLICATIONS:**

Not applicable.

**5. ENVIRONMENTAL SUSTAINABILITY CONSIDERATIONS:**

There are no environmental sustainability implications in respect to this report.

**6. CLIMATE CHANGE ADAPTATION CONSIDERATIONS:**

There are no climate change adaptation implications in respect to this report.

**7. CHARTER OF HUMAN RIGHTS APPLICATION:**

The Charter of Human Rights and Responsibility has been considered and the recommendations of this report give no rise to any matters.

**8. COMMUNITY CONSULTATION:**

During the Local Government Act review process, Local Government Victoria sought feedback from councils, ratepayers, the wider community and specific stakeholders.

**REPORT NO: GE255 (cont.)**

**9. DISCUSSION:**

- 9.1 In June 2016, the State Government released a discussion paper outlining 157 potential reform directions. Council provided a submission to the discussion paper on 14 September 2016. Within Council's submission were a number of responses and suggested changes to the proposals.
- 9.2 On 6 December 2017, Parliament released the Local Government Bill Exposure Draft for public consultation.
- 9.3 Some of the changes from the discussion paper stage to the Exposure Draft stage are as follows:
  - 9.3.1 Mayoral terms – one year not two.
  - 9.3.2 The option to directly elect the mayor has been removed (except for City of Melbourne).
  - 9.3.3 CEO not the mayor sets the council agenda.
  - 9.3.4 Audit and risk committee responsibilities reduced.
  - 9.3.5 No change to electoral franchise/vote counting (partial differential ruled out).
  - 9.3.6 Councillor range to remain at 5-12 (5-15 ruled out).
  - 9.3.7 Certification of a local law can be undertaken by council legal staff.
  - 9.3.8 Community engagement principles aligned to VAGO public participation principles.
  - 9.3.9 Council Plan (like budget) to be struck by 30 June, not 31 December.
- 9.4 In general, most of the suggested changes Council had made in its submission to the discussion paper were addressed.
- 9.5 It is not envisaged that the Bill presented to parliament will change in any significant way from the Exposure Draft. The opportunity provided during the current consultation period is really to highlight areas where Council has serious concerns with complying with the draft Act.
- 9.6 A copy of the Exposure Draft had been provided to relevant Council officers seeking feedback on whether they support / do not support / or are neutral the proposed legislation. Officers were requested to take into account whether the proposed Act would cause them difficulties, be impractical, unworkable or of a negative community benefit.
- 9.7 Following this internal consultation process the attached submission was drafted for councillors consideration. Councillors discussed the draft submission at a Strategy and policy Briefing on 19 February 2018.
- 9.8 There are no requirements within the Exposure Draft that are unworkable or pose a great burden on the organisation or Councillors. The submission does highlight that one of the stated aims of the review of the Act was to remove unnecessary prescription from the Act and to make councils demonstrate transparency. This removal of prescription is proposed to happen together with introducing measures to ensure consistency and fairness in council processes. These proposed 'measures to ensure consistency and fairness' are proposed to be achieved by Ministerial Guidelines and Regulations.
- 9.9 It is hoped the removal of detailed prescription from the Act is not simply transferred to Guidelines and Regulations. Creating Ministerial Guidelines and Regulations do not have the same community or industry consultation and disclosure requirements that changes to legislation have.

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- 9.10 The development of best-practice guidelines and documents and Regulations is supported on the understanding that they will be developed in conjunction with the sector and be available well in advance of respective statutory compliance dates.
- 9.11 Some of the recommended changes to the Exposure Draft and comments included in submission include:-
- 9.11.1 Council does not support the proposed restrictions on electoral structures available to Councils and supports the continuation of the current options.
  - 9.11.2 Council does not support the proposal that a mayor, subject to vote thresholds, can be voted out of office.
  - 9.11.3 Council does not support the continuation of the prohibition on Ministerial officers, Parliamentary advisors and electoral officers from standing for council.
  - 9.11.4 Council has concerns about some of the restrictions proposed to be placed on Council's via the creation of workforce plan and seeks further consultation with the local government sector in the function and operation of the proposed plan.
  - 9.11.5 Council does not support the introduction of joint council meetings.
  - 9.11.6 In regards to some of the requirements associated with Strategic Planning and Budget processes, council seeks a staged introduction and more consultation with the sector in regards to a four year budget.
  - 9.11.7 Council does not support the creation of a Local Government Advisory Panel.
  - 9.11.8 Council does not support the changes to the treatment of conflict of interest and requests the incorporation of the existing clauses into the new Act
  - 9.11.9 Council has identified some limitations in the proposed powers of Authorized Officers and requests the powers to enter land and buildings in the current Act be incorporated into the new Act.
  - 9.11.10 Council has concerns about the potential for the transfer of responsibility for drainage to Council and requests the current Act drainage provision be incorporate in the new Act.
- 9.12 Verbal advice from Local Government Victoria is that councils will not be required to undergo an electoral structure review before the 2020 election.

**10. CONCLUSION:**

Following feedback from Councillors and relevant Council officers, officers have prepared the attached submission on the Local Government Bill Exposure Draft.

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
<b>Part 1 - Preliminary</b>			
Definitions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In regards to Clause 3 i.e. Definition of Confidential Information, that within the Act that the Chief Executive Officer be able to determine, in accordance with the definition, that a document is confidential.
<b>Part 2 - Councils</b>			
1 – Role and powers of a Council	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In regards to Clause 8 (2) (f) While it might be desirable for councils to consider collaboration for some procurement and for some types of service provision to specify collaboration as an overarching governance principle is inappropriate and weights collaboration too highly. Collaboration while desirable should not be an overarching governance principle. Council seeks clarification of the intent and effect of s. 10(2)(a) on the powers of the CEO to delegate functions that have been delegated to the CEO by the Council.
2 – Constitution of a Council	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In regards to Clause 12 (4) (b) Council supports the retention of the current range of representative structures set out in the LGA 1989. The overarching objective of an electoral structure is to best reflect the local community, achieving this needs to take into account local circumstances and communities of interest. The proposed clause 12 (4) restricts the options for an electoral structure to best reflect the local community.
3 – The Mayor and Deputy Mayor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In regards to Clause 18 (2) Council does not agree that a mayor should be able to override a decision of Council in who will be a chair of a delegated committee. The appointment of chairs of council committees should be a decision of the whole council. A chair of a committee will have a deciding vote if the vote is tied. Given that delegated committees will have delegated powers from Council it is not appropriate to give the decision on who will make casting votes to the Mayor who can override a full Council resolution as to who is the chair of a delegated committee. The appointment of Committee chairs would not happen unilaterally by the chairman of the board in the corporate sector.

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Division	What changes do you propose and why / Comments (if any)		
	Yes	Support No	Neutral
4 – Election of the Mayor and Deputy Mayor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 – Councillors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 – Entitlements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 – Chief Executive Officer and members of Council staff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
			<p>contracts and other related matters needs to be addressed.</p> <p>Council seeks to have provisions 103 to 110 of the LGA 1989 retained in the new Act. These sections deal with how a complaint about the CEO alleging bullying, victimisation or harassment, including sexual harassment is to be handled.</p> <p>In regard to clause 44 Council supports the proposed provision subject to questioning the need to reference the Government of Victoria's Policy on Executive Remuneration for Public Entities. It should be up to the Council to determine how to set remuneration.</p> <p>In regard to clause 45 (4) (a)</p> <p>The proposed workforce plan would place restrictions with a Council's ability to flexibly manage its workforce in a productive and cost efficient way. A staffing structure is not always static and is always subject to external pressures and a constantly changing environment. Workforce changes should be a management prerogative and ultimately the CEO's responsibility. It is not something that should be legislated and would simply add another restrictive burden on Councils.</p> <p>In relation to the workforce plan it is requested that further consultation take place with the sector on the function and operation of the plan</p> <p>The wording in the Exposure Draft Local Government Bill and the document produced to interpret the Bill (A New Local Government Act for Victoria) is inconsistent. The Exposure Draft states in 45(4)(a) (iii) 'sets out measures to seek to ensure gender equity, diversity and inclusiveness' whereas the A New Local Government Act for Victoria document page 6 states '...CEOs must specify gender equity targets for the employment of all senior staff in their workforce plans'. Council is only supportive of the wording in the Draft Bill if 'measures' is seen to be the organisation implementing actions/ initiatives to achieve greater gender equity, diversity and inclusiveness. Such 'measures' could be:</p> <ul style="list-style-type: none"> <li>- personal information e.g., name, nationality, and gender could be removed from job applications to ensure impartiality in assessment</li> <li>- training programs for all staff responsible for recruitment.</li> </ul> <p>Implementing 'measures' as indicated above would also assist in ensuring recruitment decisions were based on merit</p> <p>Council strives to see a greater diversity in its work force but does not favour setting of any targets for recruitment, be this targets for gender, ethnic diversity or any other category of person. Targets are a harsh measurement tool and the setting of specific targets for the</p>



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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
			<p>recruitment of a particular demographic could not only be perceived as discriminatory but undermine the promotion of respectful relationships. Mandatory targets can also inhibit councils from recruiting the most appropriately skilled employees and does not take into account the pool of appropriately qualified applicants for positions that may be available at a point in time or in a particular geographic location. Council is committed to initiatives that remove barriers to any underrepresented category of person from applying for a position at Hume but does not believe mandatory targets is the only way to achieve this.</p> <p>Further consultation needs to take place with the sector on the notion of gender equity targets.</p> <p>In regards to Clause 45 (4) (c )</p> <p>The intent of other proposals in the draft bill is to remove specific clauses that relate to the employment of staff i.e. 'all staff matters should be dealt with by the application of relevant employment laws'. This is premised on the CEO managing the workforce in accordance with relevant employee related legislation and accepted management practices. It seems inappropriate to then introduce a prescriptive requirement.</p> <p>Council has received the following advice from its employment lawyers:</p> <p><i>This would provide yet another layer of bureaucracy and cuts across other legislation, namely the FW Act. It is mandatory for enterprise agreements and all modern awards (including the Victorian Local Government Award 2015) to contain a consultation clause. Victorian Local Government enterprise agreements all have extensive consultation provisions.</i></p> <p>In regards to Members of Council staff, in particular the removal of the Senior Officer designation.</p> <p>Council has received the following advice from its employment lawyers:</p> <p><i>This has significant implications for the employment of Senior Officers (including the CEO). Apart from the employment of Senior Officers, the impact of removing matters about employing council staff would be inconsequential. The current Act provides minimum regulation of staff employment, other than providing general principles on staff conduct and requiring codes of practice and 'fair treatment' processes. Specific issues on staff employment are otherwise dealt with under employment law.</i></p> <p><i>Hume City Council's enterprise agreement excludes coverage of Senior Officers and would result in the following:</i></p>

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
			<ul style="list-style-type: none"> <li>- In the case of new appointments of Senior Officers, the underpinning conditions would be the Victorian Local Government Award 2015 and the National Employment Standards (as is the case now with Senior Officers who are not covered by the Council's enterprise agreement);</li> <li>- The term of the contract would no longer be restricted by the 5 year maximum term and could be for any period up to or beyond 5 years, or could be unlimited – this is because the Victorian Local Government Award 2015 contains no restrictions on limited tenure;</li> <li>- The above point would also apply in the case of the renewal of existing Senior Officer Contracts, where the Senior Officer is not covered by the enterprise agreement – once the existing contract comes to an end;</li> <li>- The content of the contract would be unrestricted and would be solely at the discretion of the CEO, provided that the terms and conditions were consistent with the Victorian Local Government Award 2015 and the National Employment Standards</li> </ul> <p>Any conflicts between a council's obligations under the Fair Work Act and the new LGA provisions must be clarified and resolved.</p> <p>In regards to Section 47 (1), this clause should be removed as it places an unnecessary impediment on the CEO in performing his/her role and functions.</p> <p>In regards to Clause 47 (2) this clause should also include, when referencing the Evidence (Miscellaneous Provisions) Act 1958 Section 123C (1) (gc) The clause should also then reference a senior officer is someone who is, in addition to being authorised to witness Statutory Declarations, is authorised to swear and take Affidavits in Victoria.</p> <p>This would ensure inclusion of the both references in the Evidence (Miscellaneous Provisions) Act 1958 to Senior Officer as defined in the Local Government Act. This will endure the replication of the current arrangements for senior officers whereby they can witness statutory declarations and take sworn statements.</p>
8 – Audit and Risk Committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Clause 52 specifies that Audit and Risk Committees are not delegated committees. If Audit and Risk Committees were made Delegated Committees it would simplify and provide for consistency in such things as governance and meeting rules and committee members understanding of their obligations under the Act.</p>

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
<b>Part 3 – Council decision making</b>			
1 – Community accountability	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 – Procedure and Proceedings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In regards to Clause 59, and the absence of regulation elsewhere, it does not appear that it is a requirement for all councillors present to vote in the election of the mayor.
2 – Procedure and Proceedings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>In regards to Clause 58 Council supports the retention of the existing provisions for meeting rules.</p> <p>In the event that the proposals in the exposure draft proceed Council requests that safeguards be considered to prevent opportunistic changes to governance rules.</p> <p>In regards to Clause 60, Joint Council Meetings. Council does not support this clause. The need for joint meetings of Council's is questionable. Councillors of different Councils can meet to discuss issues and explore joint undertakings without a requirement to formally meet under legislation. There procedural issues in having joint meeting such as quorum requirements, uneven numbers of Councillors representing each Council, different Meeting Procedures etc.</p> <p>There is also an issue with decisions being made at joint meeting which could commit the use of Council's resources, which could be made contrary to the wishes of the majority of an individual Council's councillors.</p> <p>Where joint decisions are required the existing practice whereby Councils, following informal joint meetings each resolve an identical resolution should remain.</p> <p>Clause 63 (3) and (4) is onerous. Councils which do not have pre-arranged live video/image recording of meetings are restricted from conducting the business of the meeting when the meeting cannot remain open the public for security reasons or the inability for the meeting to proceed in an orderly manner. There should be an option to continue the meeting where the gallery or members of the public (groups) attend with the set purpose of disrupting the conduct of meeting. The limitation to only continue to conduct a meeting when the security or proper conduct of the meeting is threatened is when access to a live recording is available is onerous.</p> <p>In regards to Clause 64, It is requested that the arrangements for the appointment of a delegated committee where a quorum cannot be maintained be reviewed.</p>

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
3 – Local Laws	<input checked="" type="checkbox"/>	<input type="checkbox"/>	That clarification be sought on the status of local laws made under the provisions of the LGA 1989
4 – Good practice guidelines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The development of best-practice guidelines and documents is supported on the understanding that they will be developed in conjunction with the sector and be available well in advance of respective statutory compliance dates.</p> <p>One of the stated aims of the review of the Act is to seek to remove unnecessary prescription from the Act and to make councils demonstrate transparency, alongside measures to ensure consistency and fairness in their processes. If the detailed prescription is simply transferred to the guidelines there is no benefit achieved in removing the prescription from the Act.</p> <p>Given that the intention of clause 82 is that all Council's will comply with the good practice guideline it would be better to call the guidelines Ministerial Directions</p>
<b>Part 4 – Planning and financial management</b>			
1 – Strategic planning	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>In regards to the timing of the implementation it is requested that:-</p> <ul style="list-style-type: none"> <li>- The council plan and the annual (one year) budget existing requirements remain until 30 June 2021</li> <li>- The community vision to commence by the financial year commencing 1 July 2022.</li> </ul>
2 – Budget processes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>In regards to Clause 89 (1) specifically the four year budget, his is opposed pending further consultation with the sector.</p> <p>If it does proceed in its current form then in regards to the timing of the implementation it is requested that:-</p> <ul style="list-style-type: none"> <li>- The four year budget, financial plan, assets plan and revenue and rating plan are to commence in financial year commencing 1 July 2022</li> </ul>
3 – Reporting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 – Financial Management	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
<b>Part 5 – Rates and Charges</b>			
1 – Declaration of rates and charges	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>In regards to Clause 102 Council supports the retention of individual Councils choosing the valuation method that best suits the individuality of the municipality.</p> <p>In regards to Clause 105 Council supports this provision subject to further consultation taking place with the sector on the Ministerial guidelines. It is also proposed to request the Minister to include provision for differential rates for venues with electronic gaming machines in the guidelines.</p> <p>It would be of assistance to Councils for guidelines to be developed that clearly explain what cost elements can be included in the calculation of a Service Charge (clause 107) for either refuse or drainage.</p> <p>The introduction of new service charge and how it would interact with the Fair Go Rates System and also how Clause 127 i.e. review grounds by VCAT of a Service Charge, both need to be considered.</p>
2 – Special purpose charges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3 – Payment of municipal rates, service charges and special purpose charges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 – Recovery of municipal rates, service charges and special purpose charges	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5 – Environmental upgrade agreements	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>There is no mention of what happens when the property is sold to a new owner – presumably the debt/obligation remains with the property. Perhaps this should be included.</p> <p>In regards to Clause 137(1) and (2) Propose deletion of the words 'or a previous occupier'. This creates ambiguity in the text and could be read as if the current tenant is obliged to pay the costs because the previous tenant agrees to do so. Reference to 'occupier' should be enough to cover an occupier who signs EUA and then leaves the property without honouring their commitment.</p>

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
6 – Rate caps	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EUAs are an effective mechanism for facilitating energy efficiency upgrades particularly to overcome the barriers of: the upfront capital cost (particularly for low income households); the uncertainty/risk around seeking private finance to undertake these works independently; and the rental 'split incentive' of owners bearing the cost and benefit of the capital investment but tenants receiving the financial benefit through reduced energy bills.  Greater clarity is needed about how this would work in practice - guidance from the state government about which section of the Act will allow local government to collect funds from households participating in an EUA.  Council seeks a reconsideration of the arrangements applying to growth councils and to review and streamline the application process for a variation to the cap.
<b>Part 6 – Council operations</b>			
1 – Service performance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 – Procurement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3 – Beneficial enterprises	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 – Powers in relation to land	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5 – Carrying out works on land	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6 – Unpaid money	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7 – Land information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Part 7 – Council integrity</b>			
1 – Improper conduct	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
2 – Conflict of interest	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Council support the retention of the existing definitions for conflicts of interest within the LGA 1989 as they are understood and familiar to Councillors  If the new provisions are to be adopted as recommended in the exposure draft they should be

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
			amended to provide for the inclusion of the list of circumstances where a councillor is not taken to have a conflict of interest as per s.79C of the current Act. The arrangements for disclosure of conflicts of interest at council meeting by a councillor and for the councillor to be able to remain for discussion but leave for the vote should apply for delegated committee members.
3 – Personal interests returns	<input checked="" type="checkbox"/>	<input type="checkbox"/>	It is requested that consideration be given when drafting the Regulations for the Personal Interest Returns to have some flexibility in the Regulations to also capture information from Key Management Personnel (KMP) of the Related Parties and Related Party Transactions, as required for the preparation of Annual Financial Statements. Currently the information is captured separately to the Ordinary Returns and Councillors find the two similar information reporting processes confusing and repetitive
4 – Gifts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5 – Councillor conduct	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6 – Appointment and functions of Principal Councillor Conduct Registrar and Councillor Conduct Officers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7 – Councillor Conduct Panels and VCAT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
<b>Part 8 – Ministerial oversight</b>			
1 – Governance directions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 – Compliance exemptions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3 – Municipal Monitors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 – Chief Municipal Inspector	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5 – Commissions of Inquiry	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6 – Suspension of a Councillor or Councillors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	It should be part of the monitoring process that Councils and individual Councillors are made aware of the consequences if existing behaviours do not change or guidance is not followed. Any responses to such directions would then be considered in the period following the advice being given and form part of the final warning provided to Council that the Minister is considering dismissing the Council or suspending a Councillor.
7 – Temporary administration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Council seeks amendment of this provision to provide for the Minister to inform a council of his/her intention to appoint a temporary administrator and for the council to be given an opportunity to respond to the proposal.
8 – Restructuring Orders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Clause 249 does not appear to provide for the creation of a new municipality by removing an area from an existing Council.
<b>Part 9 – Electoral provisions</b>			
1 – Voters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2 – Voters' rolls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3 – Candidate for election	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 – Holding of general elections and by-elections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	



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Division	Support		What changes do you propose and why / Comments (if any)
	Yes	No Neutral	
5 – Conduct of elections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In regards to Clause 276 it requested that the voting method remain a decision of the individual councils.
6 – Counting of votes – single vacancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7 – Counting of votes – any election to which Division 6 does not apply	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8 – Countback process and counting of votes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9 – Electoral offences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10 – Election campaign donations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11 – Disputing the validity of an election	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>Part 10 – General Provisions</b>			
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>In regards to Clause 326 Council seeks the reinstatement of the provisions of the 1989 Act to enable an authorised officer to administer and enforce any Act which relates to the functions of a council.</p> <p>The new provisions (s. 326) restrict the administration and enforcement and the powers of the authorised officer to enter land and buildings to this act or any regulations or local law. There is no reason given for the omission of “any other Act”. As an example, the new provisions would remove the power for a Municipal Fire Prevention Officer to enter properties to conduct fire hazard inspections. Council seeks reinstatement of the provisions in the 1989 Act.</p> <p>In regards to Clause 340.</p> <p>While it is accepted that Regulations are currently a great adjunct to the existing Act. It is hoped that the detailed prescription of the current Act is not transferred to Regulations to achieve one of the stated aims of the review of the Act being to seek to remove unnecessary prescription from the Act. There is no benefit achieved if the prescription is simply moved from the Act to the Regulations.</p>

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Division	Support			What changes do you propose and why / Comments (if any)
	Yes	No	Neutral	
<b>Part 11 – Consequential amendments and repeals</b>				
1 – Repeal of City of Greater Geelong Act 1993	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2 – Amendment of City of Melbourne Act 2001	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3 – Amendment of Local Government Act 1989	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4 – Consequential amendments of other Acts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	It is requested that the drainage provisions in the LGA 1989 be transferred across to the new Act pending the outcome of the Melbourne Urban Stormwater Institutional Arrangements Project expected to be in 2019. The outcome of the Project to form the basis for consultation with the local government sector on greater prescription and the appropriateness of including provisions in the Water Act.
5 – Repeal of this Part and Schedule 1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	