

Minutes

SESLHD Board Community Partnerships Committee 18 March 2019
 3.00pm – 5.00pm Sydney / Sydney Eye Hospital
 Worrall Lecture Theatre

ITEM NO.	DESCRIPTION
A. Meeting Opening 3:03	
1	Meeting Opening – Welcome to attendees and Acknowledgement to Country – Helene Orr
1.1	Present Refer to attendance list.
1.2	Apologies Refer to attendance list.
1.3	Guests Refer to attendance list.
2	Confirmation of Minutes The minutes of the SESLHD Board Community Partnerships Committee held on 12 December 2018 were approved as an accurate record.
3	Declaration of Conflict of Interest No potential conflicts of interest were declared at the meeting.
B. Action Item from previous minutes	
4	Refer to the Action Log The action log (refer to Annex A) was noted and formed the topics considered in general and standing items. Two documents, the “ <i>Premier’s Priority: Tackling Childhood Obesity</i> ” and “ <i>My Community Project Guidelines</i> ”, were tabled (refer to Annex B). Helene Orr requested that the Committee secretariat streamline and reformat the action log to improve readability and transparency of actions arising.
C. General Business	
5	Presentation on the Healthy Urban Environment by SPHERE Health Urban Environment Clinical Academic Group (refer to Annex C)
5.1	Professor Evelyne De Leeuw, Director of UNSW’s Centre for Health Equity Training Research and Evaluation (CHETRE), presented on why collaboration is important for creating healthy urban environments, particularly in Sydney. Evelyne De Leeuw provided specific examples of the need for play spaces for children to combat childhood obesity; the opportunity to create infrastructure to enhance walkability and public transport use to increase access to services and consideration of issues such as urban heat islands. The following comments were noted: <ul style="list-style-type: none"> • The Healthy Urban Environments (HUE) Clinical Academic Group (CAG) is holding its first workshop on March 27, 2019, at the Institute for Sustainable Futures at UTS. • In terms of influencing local council plans, Kerry Kyriacou queried whether the Healthy Urban Environment Collaboratory vision could be included to promote active transport, and influence the design of housing and neighbourhoods. Professor Donald McNeill stated there was opportunity to support local councils as part of the work of the SPHERE HUE CAG’s work. • Julie Dixon asserted that collaboration has already begun and the Greater Sydney Commission has organised workshops that SESLHD has attended alongside local Councils. • Greg Levenston voiced concerns that councils may not be keen to incorporate fundamental changes to their strategic plans. One key aspect of the SPHERE’s HUE CAG

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5.2	<p>is to work in partnership with public health experts to bolster the District's ability to collaborate with local councils to put evidence into policy and action. Julie Dixon indicated herself and her teams were currently meeting with local councils regarding their strategic planning statements to advocate for the inclusion of healthy urban environment actions and discuss opportunities to collaborate to collectively improve the wellbeing of local communities.</p> <ul style="list-style-type: none"> • Gary O'Rourke asked if planning of health infrastructure was in scope and the SPHERE HUE CAG representatives confirmed that the HUE aspects of health planning are, for example, promoting walkability and public transport access to health assets. <p>Professor Jason Prior, who is an executive member of HUE, outlined the importance of targeting unhealthy urban spaces not just in terms of the physical environment but also in terms of policy, frameworks, and governance. The following comments were noted:</p> <ul style="list-style-type: none"> • Homelessness, access to housing, extreme weather events and access to regulated voluntary services that respond to these issues, such as food provision, were identified as major priorities for Sydney. • In terms of food security, living in public housing with limited access to healthy food options and unreliable and well-connected transportation, and lack of affordability were recognised as major concerns. • Taking inspiration from the Smart Cities model, which uses technology-based solutions to solve urban problems, food access issues might be alleviated with options for food delivery. • Density and location of liquor outlets were identified as harmful aspects of the urban environment and in SESLHD, applications for licenses have increased. • Barriers in policy and governance could prevent or deter the promotion of healthy initiatives, such as the difficulty of obtaining a license to set up a farmers market. • Compulsory local government targets (set by the state) for urban development can restrict the ability of Councils to promote community values into their strategic planning. • The SPHERE collaborative model aims to address urban challenges by considering the limitations of government policy, establishing innovative solutions, adapting, scaling up and systematising existing successful innovations, and collaborating with a variety of stakeholders, including private industry. • There are a plethora of existing resources such as CityViz analytics, which looks at urban big data for Sydney, which can be used to provide a context to technical issues.
5.3	<p>Health & Housing – Shane Snibson, FACS (refer to Annex C)</p> <p>The NSW Department of Family and Community Services (FACS) is responsible for influencing child protection, housing, homelessness, and community inclusion, and in terms of the urban environment, is particularly concerned with the vulnerability associated with low income. The follow comments were noted:</p> <ul style="list-style-type: none"> • Social/public housing is now being viewed as a pathway, not a destination. • While FACS is appointed to provide services, the Land and Housing Corporation is responsible for managing the NSW social housing portfolio, which means it owns and manages land, buildings and other assets in social housing, including repairs and maintenance. • There is a move towards using community housing providers, rather than FACS, to manage the housing assets however, contracts would still exist between them, as well as with the Land and Housing Corporation. The reason for this change is that community housing providers have increased flexibility to respond to the local environment. • To improve the customer experience, FACS is rolling out a program where tenants will be able to raise repair issues through a mobile phone app. • Regulations in the housing space, including those related to over-crowding, materials used, sanitation, insulation and temperature (including heat stress), have a strong link to health outcomes. • Shane Snibson indicated hoarding is a significant issue among residents of public

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	<p>housing, which presents a risk to the tenant/s, neighbours and first responder teams, particularly in terms of fires and falls. Data shows that in housing where there is hoarding, there is a 10 times increased likelihood that fires will be fatal. FACS and other community housing providers have limited strategies to combat this issue. Current referral mechanisms, whether that be to mental health services or other community services, could be strengthened.</p> <ul style="list-style-type: none"> Lexington Place in Maroubra is an example of place-based work being undertaken in partnership with FACS, SESLHD, Randwick Council and CESPHE which aims to improve community resilience and reduce inequities and provide relevant support services. <p>ACTIONS</p> <ul style="list-style-type: none"> Circulate upcoming SPHERE HUE workshop to the Committee. Hoarding, food security, better access to transport, and supporting residents to stay well through extreme weather conditions, were considered priorities for the BCPC and to be discussed for further consideration at future meetings. The Committee to assess and scope the identified issues relating to hoarding. Directorate of Planning, Population Health and Equity staff to continue meeting with local councils to identify opportunities to incorporate healthy urban environment actions into their strategic planning statements.
6	<p>Social Connectedness Action Plan – Monica Brabant</p> <p>The Social Connectedness Action Plan document was tabled and progress provided to BCPC.</p> <p>The following comments were noted:</p> <ul style="list-style-type: none"> Activity one, which focuses on enhancing first responder assessment/protocols, is being tested with 20-30 consumers over the next 2-3 months in order to validate and expand its use, and also creating communication and awareness among service providers locally. Consultations with the Health Pathways Committee are continuing to include social isolation. In terms of the Community Connectors program, scoping with the Community Partnerships Unit has commenced, utilising the place-based approach in Maroubra. <p>ACTION</p> <ul style="list-style-type: none"> The Committee agreed to invite NSW Transit to become a member of the Committee given the opportunities to collaborate on areas such as tackling social isolation and to address issues related to access to transport by some members of the community, particularly in lower socio-economic neighbourhoods.
7	<p>Committee Annual Review</p> <p>The following comments were noted:</p> <ul style="list-style-type: none"> The Charter will be revised to reflect Helene Orr as the new chair and the Board will be consulted regarding the co-chair. Due to the increasing number of projects and significant body of work between meetings, the attendees decided to have 3 meetings in 2019. The Committee review was completed with no significant revision required.
D. Standing Items	
8	<p>SESLHD Childhood Obesity Business Plan / Framework Update</p> <p>SESLHD Childhood Obesity Business Plan / Framework Update was provided.</p> <p>The following comments were noted:</p> <ul style="list-style-type: none"> A community grants program is providing funding to community groups to implement novel ideas to tackling childhood obesity.

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	<ul style="list-style-type: none"> Ninety-six vending machines and cafes managed by SESLHD have removed sugary drink options and offer more healthy food choices, as result of implementing the NSW Ministry of Healthy Food and Drink Guidelines released 8 months ago. Some schools/sporting facility cafes may still supply unhealthy vending machine choices as a result of demand, profit margins and a lack of supplier contracts. Although community members are not eligible to receive grants related to this plan / framework, SESLHD's Health Promotion Service can discuss alternative ways individuals may seek project funding related to this priority. <p>ACTION</p> <ul style="list-style-type: none"> Local councils agreed to explore opportunities to provide healthier food and drink options through their food and vending machine outlets.
9	<p>MHFAY Implementation Group Update – Amanda Justice</p> <p>The Mental Health First Aid Youth (MHFAY) program, which was a NSW Premier's award finalist, is seeking funding opportunities to provide further training and scale its impact in the community to protect vulnerable youth at risk of poor mental health.</p> <p>ACTION</p> <ul style="list-style-type: none"> CPU to contact Waverly, Sydney and Bayside Councils in relation to their offer of funding support.
10	<p>NDIS – SESLHD Update</p> <p>NDIS report tabled with no comment.</p>

E. Business Without Notice

11	In terms of poignant population health issues, The First 2000 Days Ministry of Health framework was recommended as a topic for further consideration in future BCPC meetings.
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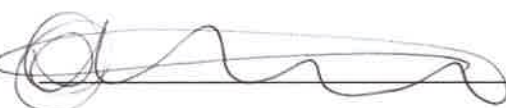
F. Meeting Close 5:07pm

Final Item	<p>Date of Next Meeting: Monday 29 July 2019</p> <p>Time: 3.00pm – 5.00pm</p> <p>Venue: Sydney / Sydney Eye Hospital, Claffy Theatre</p>
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Accepted at meeting held on: 29/7/19

CERTIFIED AS A CORRECT RECORD

Name Helene Orr (Chair)

Signature 

Date 29-7-19