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Subject: Review of the Health Act

Thank you for this opportunity to comment on the *Review of the Health Act – A Discussion Paper*. Comments made in this submission are from the perspective of an urban and regional planner with a special interest in health and are a personal view rather than the official position of the PIA. Comments are made on only those matters considered most relevant to urban planning and health i.e. issues numbered 1 to 16. The framework in the Discussion Paper, using the “Issues for Comment” has been utilised.

1. Definition - a broad view of ‘health’ is supported, as stated by the WHO (as discussed on page 5 of the Discussion Paper) and therefore a change of name e.g. The Public Health Act is considered appropriate.
3. Yes the new Act should recognise the importance of promoting public health by including health promotion in the objects and statement of intent of the new Act, by ensuring adequate information on factors affecting social, physical and cultural environments is made available and ensuring the new Act is flexible enough to deal with public health risks.
4. Yes the new Act should recognise the need to address inequalities in the health and wellbeing of disadvantaged communities by including this matter in its objects clause and ensure data on a broad range of health determinants is collected and disseminated in sufficient detail to be useful.
5. It is vital that all four provisions listed at the top of page 12 of the Discussion Paper be included in the objects clause of the new Act and in particular, *Promote public health and wellbeing through built, social, economic and natural environments*.
6. Whilst all of the suggested guiding principles on page 12 are important, key principles which should be included in the new Act are the precautionary principle, recognising community interest in public health, preventing unnecessary encroachment on individual rights, ‘polluter pays’ and recognition that promotion and protection of public health is a collaborative and intersectoral effort.

7. Yes the new Act should include a statement that the function of the Secretary is to implement policies and program to achieve the objects of the Act.

9/10. The new Act should recognise the important role local government plays in planning, advocating and providing public health programs, and developing and implementing strategies to improve public health and promote community health and wellbeing, including through the built, social, economic and natural environments.

11. The concept of partnerships between state and local government and government and the non-government sector could be acknowledged in the Act.

12. The new Act should place greater emphasis on implementing the MPHP. This could be done by including a requirement for Action Plan to be developed along with the plan including timeframes, responsibilities and costs. Annual reporting (see 15) would also help in achieving implantation.

13. It would be appropriate for councils to be required to state in their MPHP, how they intend to fulfil their statutory obligations.

14/15. A requirement to prepare a MPHP on a regular basis and annually review progress on implementation in consultation with DHS is appropriate.

16. It is appropriate for an MPHP to be required to be consistent with other Council legislated documents such as the Council Plan and the MSS and for there to be demonstrated links with and relationships between these documents. A requirement for preparation every four years is considered reasonable.

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