



6th May 2005

Hon. Alex Somlyay MP Chair Standing Committee on Health and Ageing House of Representatives Parliament House CANBERRA ACT 2600

Dear Mr Somlyay,

Parliamentary Inquiry into Health Funding

Bankstown City Council welcomes the Parliamentary Inquiry into Health Funding undertaken by the House of Representatives Standing Committee on Health and Ageing and appreciates the opportunity to comment.

Although the Inquiry's particular emphasis on hospital-based service delivery and exclusion of public health and preventative population health funding does limit the Terms of Reference, Council still supports the otherwise comprehensive scope of the Inquiry. Of particular interest to Council is the examination by the Inquiry of:

- the roles and responsibilities of the different levels of government (including local government) for health services;
- funding arrangements between different levels of government; and
- accountability to the Australian community for health service delivery.

Health in Bankstown

The City of Bankstown is situated in metropolitan Sydney, approximately 20 kilometres southwest of the Sydney CBD, and has an area of 78 square kilometres. The estimated population of the City in 2004 was 175, 428 (ABS), with over 46% of the population speaking a language other than English at home.

Bankstown City's health profile is fairly typical of NSW, except that our male residents have a life expectancy of 72.6 years and females 78.9 years, compared with 78.1 and 83.3 for NSW and 77.4 and 82.6 for Australia (2002).Bankstown has a substantially higher percentage of 70-84 years olds (9.3% vs 7.1%) than metropolitan Sydney overall. It is therefore likely that during next decade or so, there will be a substantial increase in the 85+ age groups in Bankstown.

The health infrastructure of the City includes the Bankstown-Lidcombe Hospital, several primary health care centres, diagnostic facilities, several dozen specialist chambers, more than a thousand nursing home beds and nearly 200 general practitioners from a variety of ethnic and cultural backgrounds.

Although not a legislative requirement for local government in NSW, Bankstown proactively developed and adopted its first City Health Plan in 1998, with wide ranging strategies contributing to protection and promotion of community health and wellbeing. Council is currently developing its second City Health Plan (2005-2010).

The new City Health Plan for Bankstown has regard for the National Health Priority Areas (NHPAs) and WHO Healthy Cities principles which include improvements in living and working conditions, addressing the complex effects of urbanisation on health, improved public health practices, community education and capacity building for uptake of healthy lifestyles and avoidance of preventable risk factors of major diseases to achieve population health outcomes at the local level.

The importance of public health programs

Public health programs have played a vital role in achieving the dramatic improvements in health and life expectancy that have occurred during the past century in Australia. Local government in Australia has been discharging many of the public health responsibilities that have made this achievement possible.

Waste management, immunisation, childcare, food safety, food security (eg Meals on Wheels), infectious disease control, inspection of premises (eg. food, body piercing, skin penetration, hairdressers, cooling towers), land, water, air and noise pollution control, pet control, quality of housing stock, healthy built environment, conservation of natural environment and amenity, road safety, swimming pool fencing, fall & injury prevention, sport & recreational facilities and infrastructure & programs supportive of active lifestyles and crime prevention are only a sample of the many services provided by local government that contribute to community health and wellbeing. Currently, public health programs represent a significant share of local government budgets across Australia.

Although local government public health programs have been contributing significantly to the health and wellbeing of Australians, adequate recognition and funding from other levels of government is still lacking.

The distinguishing feature of public health is its focus on health protection, health promotion and disease prevention for an entire population or community rather than the individual. Because of this, many public health activities take place outside the 'healthcare system' and often go unnoticed or unheralded unless a breakdown in the system occurs.

Cost Shifting

Local government in Australia has limited capacity to raise revenue and has experienced growing and increasingly diverse demands on its resources due to cost shifting by other levels of government and rising community expectations more generally.

Although local government is well placed to carry out various public health and preventative health programs for local communities if appropriately resourced, it receives little funding from other levels of government to carry out these roles.

As identified by the recent House of Representative's Inquiry into Cost Shifting and Local Government (the Hawker Inquiry), health and welfare, including aged care, has been one of the major areas of cost shifting onto local government. State and Federal governments have failed to keep funding apace with service or compliance costs and rising community expectation for services from local government.

Acting on a Motion lodged by this Council, the ALGA's 2004 National General Assembly of Local Government resolved 'to call upon the federal and state governments to refrain from devolution of further public health responsibilities to local government without making adequate funding provision.'

Since carriage of the above Motion, the ALGA President, Clr Paul Bell, has met with the Minister for Local Government, Territories and Roads, the Hon Jim Lloyd. In a media release dated 11th February 2005, Clr Bell and Mr Lloyd "...pledged to work together to achieve a new deal for local government over the next two years...."

In the same media release Mr Lloyd stated that, "The Australian Government will soon be delivering a formal response in Parliament to the Fair Share Report, which I believe will pave the way to a better and more secure future for all Councils..." This Council awaits with interest the release of the Federal Government's response, and will maintain a close watch over the issue in coming months.

Specific comment on the Inquiry's Terms of Reference

a) Examining the roles and responsibilities of the different levels of government (including local government) for health and related services.

- Council strongly urges the Inquiry to recommend that appropriate recognition be accorded to local government for the significant and positive contribution made by Australian councils to the health and wellbeing of local communities.
- Council considers that local government is well placed to carry out relevant, targeted, efficient public health programs for Australian communities and must be provided with the capacity and resources to carry out such programs as effectively as possible, resulting in better community outcomes, less duplication and greater cost-efficiencies.

b) Funding arrangements between governments.

• Council strongly advocates for an equitable share of national health spending to enable local government to carry out public health responsibilities and calls upon State and Federal governments to cease any further devolution of health related responsibilities without making adequate funding provision.

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- As socio-economic status is a strong determinant of health, Council advocates for a SEIFA (socio-economic index for areas)-based funding mechanism for hospitals that will take into consideration the relative socio-economic disadvantage of the population in the catchment area of a hospital.

c) Accountability to the Australian community for health service delivery.

• Council is of the opinion that local government must be provided with more genuine opportunities for involvement in helping shape public health policy and delivery. Better health outcomes require a strong partnership between stakeholders, both public and private sector. Effective and ongoing consultation among partners in formulating strategies and programs and forging partnerships for their implementation is essential.

Once again, thank you for the opportunity to comment. Enquiries regarding this submission can be directed to Council's Manager Strategy & Policy, Diane Lawrence, or Policy Analyst, Sayed Chowdhury, on 02 9707-9615.

Yours sincerely,

Richard Colley U GENERAL MANAGER

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