

CHAPTER ONE

ADMINISTERING THE *SOUTH AUSTRALIAN PUBLIC HEALTH ACT 2011 (THE ACT)*

Chapter One sets public health in its strategic context by providing the rationale for public health action that is enabled by the Act, and briefly outlines its legislative, policy and planning tools.

WHAT IS PUBLIC HEALTH?

Public health is what we do collectively as a society to create the conditions and environments that enable good health and wellbeing. It involves the combination of policies, programs and safeguards designed to protect, maintain and promote the community's health, and to prevent or reduce disease, injury or disability incidence within the community. It is what improves our wellbeing, stops us from getting sick and keeps us out of hospital.

A strong public health system is an economic enabler – the health of the economy relies on having a healthy population. A healthy population means greater workforce productivity. A healthy population is also more likely to be a population with greater consumer confidence. In tight labour markets, reducing the ill-effects of disease and poor health is a competitive advantage for any jurisdiction.

Public health also supports a more equitable society. It works to ensure that everyone in our State can enjoy clean air, clean water, safe and healthy food, and be protected from environmental risks such as chemical/toxin exposure including things such as nicotine. Public health ensures that those at risk are provided with lifesaving vaccines and that systems are in place to support screening of diseases such as breast, bowel and cervical cancer. Often unseen, public health action touches upon the lives of all South Australians on a daily basis. By preventing harm, and promoting and preserving wellbeing, public health halts the causes of illness in our population, and builds on the things that protect us and improve our health and wellbeing.

Public health monitors and responds to emerging challenges to population health such as climate change, e-cigarettes and antimicrobial resistance, and is connected with the community to enable rapid response and communication.

Building and sustaining community confidence, strong public communication and partnerships are critical ingredients to effective public health responses and strategies. Success in public health with a whole-of-population focus requires everyone to act together on a publicly stated, clear strategy. There is a community understanding of working together for the common good, rather than a focus on individual rights.

Public health in the 21st century remains focused on mitigating public health risks, such as infectious diseases and environmental health protection, while recognising that health is not only a matter of personal choice, or individual characteristics or circumstances, but is shaped by broader factors, including the social, economic, and physical environments in which people live.

Public health manages hazards and avoids harm to individuals and the community, reducing demand on the rest of the healthcare system, including primary care and hospitals.

Public health can make changes at a population level and has the potential to equitably and positively impact upon the health and wellbeing of many people. Public health is good value for money.



THE ACT'S KEY TOOLS

South Australia has a world-leading legislative and partnership framework under the *South Australian Public Health Act 2011* (the Act). Legislative intent is guided by broadly scoped objects and clear principles, and the Act has been designed as a robust, inter-dependent system of powers and functions, some of which are highlighted here.

Principles for action

Public health action is guided by principles that are enshrined in the Act and supported by Guidelines on how these principles can be applied².

The POPULATION FOCUS PRINCIPLE is fundamental to the way the Act should always be used, with the health of the wider community as its primary concern rather than the health of individuals. The PREVENTION PRINCIPLE is about maintaining the focus on risks that can be prevented and avoided, while the SUSTAINABILITY PRINCIPLE ensures that public health, social and environmental factors inform decision-making and that there is regard for the health of future generations. The importance of this principle with respect to the emerging threat of e-cigarettes and the health impacts of climate change is evident.

The PARTNERSHIP and COLLABORATION PRINCIPLES recognise that ensuring good public health is the responsibility of our whole society. No single individual, agency, or community can promote and protect population health – to improve population health everyone must work together. These principles underpin the planning system envisaged under the Act, and encourage collaboration, partnership and joint action across all levels of government, with non-government organisations (NGOs), wider stakeholders, and communities.

The PARTICIPATION PRINCIPLE recognises that public health is a shared responsibility that needs individuals and communities to take responsibility for their own health and participation in public health action. Widespread adoption of hygiene measures, physical distancing and mask-wearing to prevent community transmission of COVID-19 was a powerful example of how this principle worked in practice to protect the whole community.

The EQUITY PRINCIPLE recognises that consideration must be given to health disparities between population groups. Concerted efforts were made during the COVID-19 pandemic to work in partnership with Aboriginal communities to co-design actions. Ensuring that community engagement is key in everything we do is being expanded across the Public Health portfolio. Another example of this is the work that Wellbeing SA has undertaken in cancer screening for Aboriginal people in South Australia.

The PROPORTIONAL REGULATION PRINCIPLE ensures that risk mitigation actions are proportionate to the risks posed. For example, during the pandemic decisions about public health and social measures and border closures were continually assessed against the risks posed, and the changing risks, as more and more South Australians were being vaccinated.

The PRECAUTIONARY PRINCIPLE provides for action on a material risk to public health in the absence of full scientific certainty, rather than postponing measures to prevent, control or abate that risk until further information is available. The precautionary principle underpinned public health action on COVID-19, particularly in the earlier stages, because of the evolving research evidence.

South Australia's public health planning system

The Act and its regulations are designed to address contemporary public health issues as well as the foundational and enduring public health concerns. Guided by the Act's objects and principles, the planning system enabled by the Act provides a framework for action to sustain and improve the health and wellbeing of all South Australians. This report has been developed within the context of implementing the planning system contained in Sections 50, 51 and 52 of the Act.

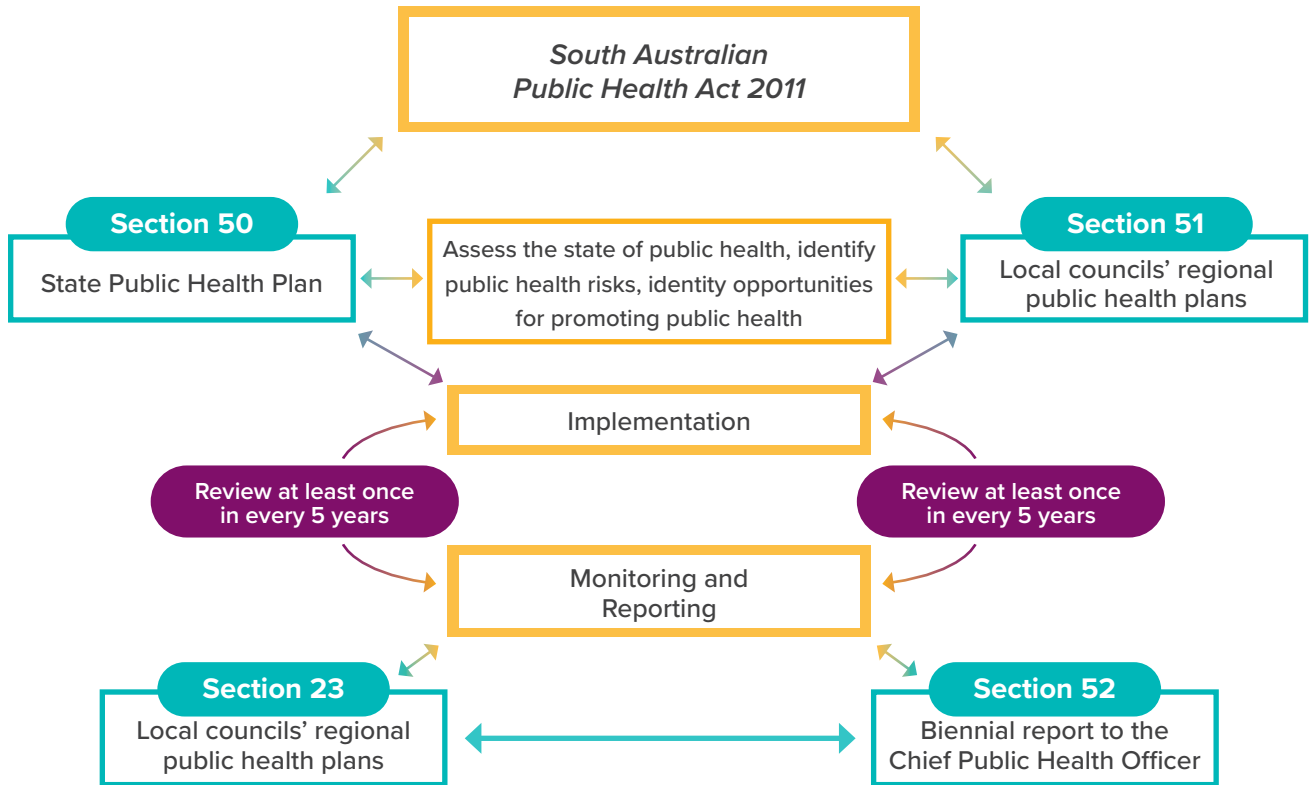
The Chief Public Health Officer, in collaboration with a broad range of public health stakeholders, sets out priorities and principles to improve the health and wellbeing of South Australians through the State Public Health Plan (the Plan).

The Plan informs local government's Regional Public Health Plans, which in turn feeds back to monitoring and reporting. This creates a circular vision and a comprehensive approach to public health that is designed to actively monitor and adapt to ensure all individuals and communities have access to the resources and services they need to achieve optimal health.

The Chief Public Health Officer's report provides an overview of the state of public health in South Australia, identifies areas of need, emerging risks and outlines strategies for addressing those needs. The report also provides recommendations for policy and program development that will help to improve the health of the population. The report is used to inform decision-making at the local, state, and federal levels. These collective efforts allow the Chief Public Health Officer to understand the health of the state and to establish a strong foundational structure within the Plan.

VISION

Figure 1: South Australian Public Health Planning System



State Public Health Plan 2019-2024

The State Public Health Plan 2019-2024 (the Plan) sets the agenda for public health planning and action across South Australia, providing a framework for local government to be involved with addressing public health challenges. It provides for consistent and coordinated action for public health across all relevant spheres and sectors of government.

The Plan and related actions respond to identified statewide public health issues, as well as public health issues of relevance that are identified by local councils. Key actors include the Commonwealth, state and local governments, NGOs, tertiary and research institutions, industry, the private sector, and the community. The Plan must be reviewed at least once in every five years, with the next review due to commence in 2023-24.

The Plan is the second State Public Health Plan and meets the requirements of Section 50 of the Act. The Plan builds on the strong foundation and achievements of the inaugural Plan, with the objects and principles of the Act at its core³.

The Plan's vision is a healthy, liveable and connected community for all South Australians.

The vision builds on four strategic priorities:

PROMOTE		Build stronger communities and healthier environments
PROTECT		Protect against public and environmental health risks, and respond to climate change
PREVENT		Prevent chronic disease, communicable disease and injury
PROGRESS		Strengthen the systems that support public health and wellbeing



Key issues, risks and challenges prioritised by the Plan include:

- > Disability inclusion
- > Ageing well
- > Addressing the increased prevalence of chronic conditions (including diabetes, heart disease, and some cancers)
- > Obesity (especially childhood obesity)
- > Mental health and wellbeing
- > Real-time prescription monitoring of drugs of dependence
- > Outbreaks and occurrences of particular infectious diseases in Aboriginal communities
- > Maintaining food safety considering changing food business models and new food technologies
- > Zoonotic, and other infectious diseases
- > Sexually transmissible infections, including the persistence of Chlamydia
- > Antimicrobial resistance
- > Climate change

Chapter Six highlights a selection of public health actions over the 2020-2022 reporting period, including examples of how they deliver on the Plan's four strategic priorities and address the issues identified above.

Regional Public Health Plans

The Act recognises the central role local councils play in protecting and promoting the health and wellbeing of their communities as the Public Health Authorities for their areas. It recognises councils' leadership and coordination of this planning effort on behalf of their communities, and their partnership with SA Health to deliver public health outcomes for their areas.

The Act requires councils to prepare, maintain, and report on a Regional Public Health Plan (RPHP) that considers the profile of the community, and identifies and responds to public health challenges specific to its local area or region. Once prepared and in place, the RPHP must be reviewed at least once every five years.

The first review of RPHPs under the Act spans the period 2018-2021, in line with differing RPHP commencement dates for councils and regions. As of 30 June 2022, 19 of 33 required plans had been reviewed and submitted for final consultation with the Chief Public Health Officer (CPHO). Of these 19 plans, six were developed by six planning groups comprising of 29 councils in total; and 13 were submitted by councils planning alone.

South Australian Public Health Council

Pursuant to Section 31 of the Act, the South Australian Public Health Council (SAPHC) supports the CPHO in meeting statutory obligations by providing assistance and advice about a broad range of public health related matters. This includes the development of plans under the Act, programs and strategies to promote public health research, and the public health workforce in South Australia. The Act also requires consultation with SAPHC on certain matters, including preparation of guidelines, and proposals to create or amend a State Public Health Policy or the State Public Health Plan. SAPHC is required to report annually on its activities.

Over the reporting period, the Governor in Executive Council appointed/re-appointed the following SAPHC Council members under Section 27 1(b) of the Act:

- > Prof Helen Marshall – re-appointed 25 November 2021
- > Dr Helen Donovan – appointed 25 November 2021
- > Mayor Ann Ferguson – appointed 26 September 2020
- > Ms Nicole Moore – appointed 23 April 2020
- > Dr Matthew McConnell – appointed 6 February 2020
- > Mr Andrew Pruszinski – appointed 6 February 2020
- > Ms Nicole Clinch – appointed 25 November 2021
- > Dr Courtney Ryder – appointed 25 November 2021
- > Dr David Cox – appointed 6 February 2020

There is currently no requirement within the Act for the SAPHC membership to include members who identify as Aboriginal. However, during the reporting period SAPHC appointed two members who identify as Aboriginal. Their expertise within Aboriginal public health and health promotion has brought significant depth to the deliberations and a strong cultural lens to the work of the SAPHC.

SAPHC met five times over the reporting period. Due to the COVID-19 pandemic, two meetings were cancelled.

Public Health Partner Authorities

Public Health Partner Authorities (PHPAs) are organisations that have entered arrangements under Section 51(23)(b) of the Act to collaborate with the Department for Health and Wellbeing, Wellbeing SA or local government on public health planning and other actions for improved population health and wellbeing. To date, PHPAs have focused on partnerships across the South Australian Government, non-government organisations and universities, and delivery on statewide policy and public health issues.

There were 25 PHPAs in place during the reporting period and declared in the South Australian Government Gazette, as provided for by the Act (six being newly established PHPAs). Since 2020, 21 PHPAs have continued to be active through the development and implementation of collaborative work plans under PHPA agreements, while four were inactive during the reporting period. PHPAs are listed in Appendix A, Table 1.

PUBLIC HEALTH LEGISLATION UPDATES 2020-2022

Whilst the *Public Health Act 2011* is the major Act which provides the legislative basis for public health activity, there is other relevant legislation assigned to the Minister for Health and Wellbeing to promote health and wellbeing and to protect health in South Australia:

- > *Controlled Substances Act 1984*
 - Vaccine Administration Code
- > *Food Act 2001*
- > *Health Care Act 2008*
- > *Public Intoxication Act 1984*
- > *Safe Drinking Water Act 2011*
- > *Tobacco and E-Cigarette Products Regulation Act 1997*
- > *Suicide Prevention Act 2021*

Other relevant Acts that have implications for public health are:

- > *Climate Change and Greenhouse Emissions Reduction Act 2007*
- > *Development Act 1993 (SA)*
- > *Disability Inclusion Act 2018*
- > *Emergency Management Act 2004 (SA)*
- > *Environmental Protection Act 1993 (SA)*
- > *Gene Technology Act 2001*
- > *Housing Improvement Act 2016*
- > *Local Government Act 1999 (SA)*
- > *National Environment Protection Council Act 1994*
- > *National Health Security Act 2007*
- > *Natural Resources Management Act 2004*
- > *Planning, Development and Infrastructure Act 2016*
- > *Primary Produce (Food Safety Schemes) Act 2004*
- > *Radiation Protection and Control Act 1982 (SA)*
- > *Biosecurity Act 2015*
- > *Therapeutic Goods Act 1989*
- > *Termination of Pregnancy Act 2021*

Public health legislation is reviewed and amended for a range of reasons, including policy changes, national legislation alignment, and in response to emerging issues.

Summaries to changes in public health legislation during 2020 to 2022 are detailed in Appendix A within Table 2.

Information about monitoring, enforcement and education action associated with administration of these Acts is provided in Chapter Six.

Five-year review of the Act

In accordance with Section 110 of the Act, the Social Development Committee of the South Australian Parliament five-year review was conducted from 2018 to 2020. There is nothing to report against this topic for the 2020-2022 reporting period.