



GOLDEN PLAINS SHIRE

# **ATTACHMENTS**

**Under Separate Cover  
Council Meeting**

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**6.00pm Tuesday 15 December 2020**



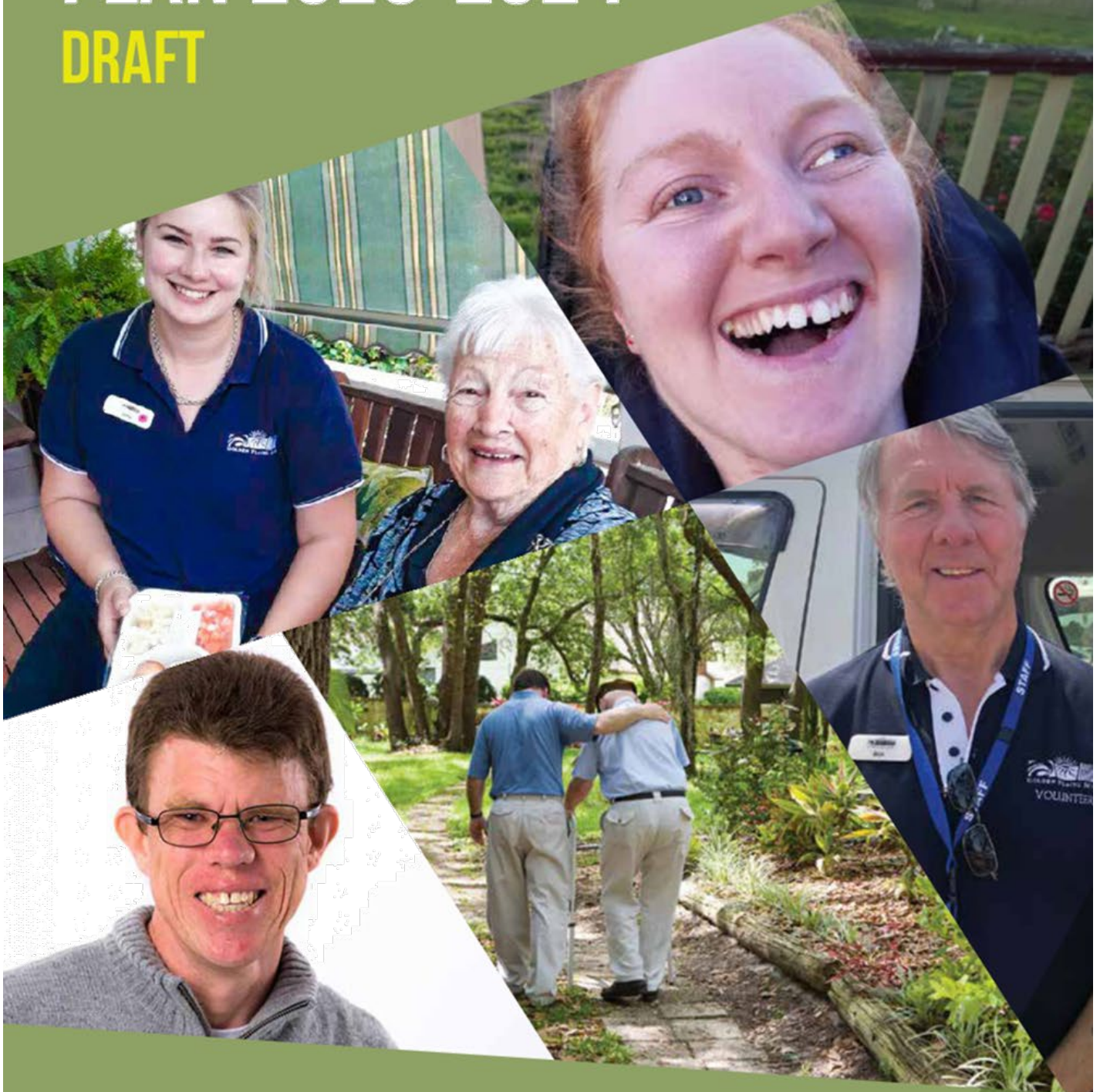
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# ACTIVE AGEING AND INCLUSION PLAN 2020-2024

**DRAFT**



# ACKNOWLEDGEMENT OF COUNTRY

Council acknowledges the traditional Wadawurrung owners of the land where we live, work and meet. Council pays its respects to Wadawurrung Elders both past and present and extends that respect to all Aboriginal and Torres Strait Islander People who are a part of Golden Plains Shire.



Sunset over Bunjil's Lookout in Maude.

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# INTRODUCTION

Golden Plains Shire Council has developed a new Active Ageing and Inclusion Plan (AAIP). This Plan provides the framework to continue to support people with disabilities and other access challenges to engage with Council and access all areas of the organisation's operations.



The Plan supports Council in meeting its obligations under the Commonwealth *Disability Discrimination Act 1992 (DDA)* and *section 38 of the Victorian Disability Act 2006*. The AAIP continues to assist Council in creating an age-friendly, inclusive municipality free from isolation and loneliness; recognising that societal attitudes, practices and structures, can restrict and prevent people with disability from economic participation, social inclusion and equality.

A key component in the development of the AAIP was consultation and engagement with the Golden Plains' community, as well as Council staff, to assist in identifying access barriers, issues, opportunities and potential priorities for access and inclusion. The specific consultation feedback and data received from this process is provided in the Community Engagement Process.

The information contained in this Plan builds on the work undertaken previously in the 'Access and Inclusion Plan 2016- 2019' and the 'Ageing Well in Golden Plains Shire Strategy and Action Plan 2012- 2016' by adding new actions, and retaining relevant ongoing actions and responsibilities in an integrated and strategic manner.

# PURPOSE

The AAIP provides the framework for Council to address disability access and inclusion issues across all areas of the organisation's operations.

The AAIP seeks to improve the overall quality of life for people living, working and visiting the Shire, by removing barriers which directly or indirectly discriminate against aged people, and people living with a disability.

The AAIP document:

- Identifies areas where there are access barriers or access opportunities;
- Outlines actions to remove barriers or realise opportunities;
- Include timeframes for actions;
- Identifies who has responsibility for ensuring actions are completed; and
- Outlines how communication, monitoring, review and evaluation of the AAIP will occur.

It is envisaged the plan will:

- Build a stronger, more vibrant community through increased participation in community life for aged residents and people with a disability;
- Demonstrate Council's leadership in the areas of access, inclusion and equality;
- Ensure facilities and services provided by Council are accessible, equitable and inclusive;
- Demonstrate Council's commitment to diversity and culture;
- Improve outcomes across Council's various roles of construction, planning, regulation and the provision of programs and services;
- Value the rich social and economic contributions people with a disability and older people make to families and communities; and
- Support independence, well-being and quality of life for all people as they age.

The AAIP will continue to guide Council into the future as it identifies the needs of older residents and people with a disability, and assist Council to improve awareness of ageing, disablement and all associated issues within the Shire, placing us in a better position to respond.





# GOLDEN PLAINS SHIRE DISABILITY ADVISORY COMMITTEE

The Golden Plains Shire Disability, Access and Inclusion Advisory Committee was established in 2009 to inform Council on issues affecting people with disabilities, including community and Council practices, which may limit access or inclusion.

The work of the Committee contributes to the achievement of Golden Plains Shire Council's four-year Council Plan, Access and Inclusion Plan and the Municipal Public Health and Wellbeing Plan, through the identification of current and emerging issues within the community and the creation of potential solutions and strategies.

The Committee consists of community representatives, people with disabilities, service providers, a Councillor, Council staff, and invited guests with expertise in specific areas. The Committee is chaired by a Councillor and meets bi-monthly in various locations across the Shire.

With the integrated approach of the new Access and Inclusion Plan, the committee has made a decision to rename the working group to the 'Active Ageing and Inclusion Group' to bring together shared knowledge, lived experience, and interests to align access and inclusion goals for older people and people living with disabilities.

"As a parent of a young person with a disability I have been involved in the Disability Advisory Group initiated by the Golden Plains Shire. This group has been a fabulous support base as well as a way to identify problems and issues which create barriers for people with disabilities and their families and endeavor to find ways to overcome these barriers, no matter how small or large they may be."

# WHO IS IMPACTED BY ACCESS AND INCLUSION IN GOLDEN PLAINS SHIRE?

Whilst the key focus of the AAIP is related to outcomes for aged people and people with a disability and the related access challenges, it is reasonable to expect that all people will be impacted by access and inclusion issues at some stage in their life.

## This could include:

People who have a permanent disability including people who are born with a disability and/or people who acquire a disability due to accident or illness	People who have a temporary disability due to accident or illness	People who are ageing, and whilst not identifying as having a disability may have reduced mobility, hearing and/or vision and cognitive functions
People from culturally and linguistically diverse communities who may have challenges with speaking and/or understanding English. This could include experiencing challenges with completing forms, reading signs and interpreting critical information impacting on daily life activities	Families including parents and grandparents who are caring for children and pushing prams and strollers	People who are using other mobility aids

# COMMUNITY PROFILE

In developing this AAIP, consideration was given to a wide range of people in the community. The following Community Profile Snapshot provides an overview of the Golden Plains Shire and its community.



AREA OF SHIRE   
**2705** KM<sup>2</sup>

**16**  TOWNSHIPS



GOLDEN PLAINS SHIRE POPULATION (20 19)

 **23,722**

**56**  COMMUNITIES

POPULATION GROWTH  
**2.61%**  
 PER ANNUM

## THE PLACE

- Golden Plains Shire is one of Victoria's fastest growing areas with 56 communities and 16 townships. Originally a small rural Shire, it has now developed into a sought-after rural living destination.
- Golden Plains Shire is located one hour's drive West of Melbourne between Geelong and Ballarat.
- Average annual growth rate of 2.64%.
- It is expected population will be 42,193 by the year 2041.

## THE PEOPLE

- Golden Plains Shire's latest official estimated resident population is 23,722 in 2019 (ABS) and in 2020 is forecast to be 24,000 (.id forecast)
- Golden Plains Shire was the sixth fastest growing regional Local Government Area in Victoria between 2018 -19 (by percentage growth rate)
- Between 2016 and 2041, the population is forecast to increase by 20,177 persons (91.65% growth)
- Average annual growth rate of 2.64%.
- It is expected population will be 42,193 by the year 2041.

## THE COMMUNITY

- Golden Plains Shire is home to 15 primary schools, 1 secondary school, 9 kindergartens, 6 family day care providers, 9 registered playgroups, 3 early learning centres, 4 occasional care facilities, and one residential aged care facility;
- There is a lack of public transport, with only 2.4% of residents living near a public transport point;
- Around 72.4% of the population travel out of the Shire each day for employment;
- More Golden Plains Shire residents worked in health care and social assistance than any other industry in 2016.
- Agriculture is the Shire's largest industry sector, with the Region producing a significant portion of Victoria's agricultural product;
- There are four district health services and four General Practices but no hospital;
- There are 18 Allied Health services including:
  - Diabetes Educator
  - Dietician
  - Hearing Services
  - Naturopathy
  - Occupational Therapy
  - Physiotherapy
  - Podiatry
  - Podiatry
  - Remedial Massage Therapy
  - Speech Pathology
  - Vision services – including Orthoptist

- There are minimal community-based service providers (including community wellbeing officers, community transport and community / district nurses).

Further data for Golden Plains Shire from the 2016 ABS Census of Population and Housing shows:

- 4.6% of residents (including people with a disability) need assistance with self-care, mobility and communication;
- 23.6% of the community undertake voluntary work;
- 12.1% of residents have no internet connection.



# HOW MANY PEOPLE HAVE A DISABILITY?

# 17%

OF VICTORIANS

# 1.08M

PEOPLE



ONE IN SIX

Extensive data in relation to the prevalence of disability is not collected systematically across Australia.

The following information from the most recent data sources provides a snapshot of numbers of people with disabilities. It highlights that people with disabilities comprise a significant customer base for Council.

State-wide disability data from the 2018 ABS 'Survey of Disability, Ageing and Carers' shows:

- 17% of Victorians are estimated to have a disability, approximately 1.08 million people, or one in six people in any one community.
- The percentage of Victorians over 65 years of age estimated to have a disability is 45.7%, whilst the percentage of Victorians over 90 years of age with a disability is 83.7%;
- 58% of Victorians with a disability require assistance.

According to the 2019 ABS "Regional Population Growth" figures, Golden Plains Shire had a population of 23,722 people.

Following the above statistics, approximately 4,033 of these Golden Plains Shire residents are likely to have a disability, 2,339 of which need assistance. Added to these figures, 6% or 1,423 residents will have a temporary impairment at any one time.

In total, we need to accommodate the needs of 5,456 residents with a disability.



# WHO ARE OUR OLDER RESIDENTS?

**3,380**  
**ESTIMATED TO BE**  
**OVER 65 IN 2020**  
**INCREASING TO**  
**6,600**  
**BY 2041**

**16%**  
**OF THE SHIRES**  
**POPULATION**

The ageing population is of particular significance when considering the impact of access and inclusion issues.

As people get older, the propensity for disability significantly increases and the incidence of access and inclusion issues occurring significantly increases.

The Australian Bureau of Statistics (ABS) estimates that by 2066, Australia’s population is projected to increase to between 37.4 and 49.2 million people, with around 21-23% being 65 years or older.

It is expected that the impact of an ageing population and the resultant access issues that develop, will also impact on the need to further ensure that equitable, dignified access is provided to all of Council’s services and operations.

For the purposes of developing the AAIP, ‘older residents’ was defined as a person aged 65 years or older however, Aboriginal and Torres Strait Islander people aged over 50 are considered ‘older’ residents so in respect to them, we have used 50 years as the benchmark.

The number of people aged 65 years and over in Golden Plains Shire was 2,800 in 2016, estimated at 3,380 in 2020 and forecast to increase to around 6,600 in 2041 representing 16% of the Shire’s population in 2041 (.id Forecast). The largest increase in persons over retirement age between 2016 and 2041 in Golden Plains Shire, is forecast to be in ages 70 to 74, which is expected to increase by 964 and account for around 5% of the Shire’s population increase of 20,177 (.id Forecast).



# WHAT IS A DISABILITY?

The term 'disability' typically includes an impairment of a physical, intellectual, neurological or sensory nature (i.e. vision and hearing), chronic medical condition (like cancers or other disabling diseases), psychiatric or neurological disability, learning disability, physical disfigurement and short-term or temporary disability. Disability can be lifelong, temporary (e.g. hip replacements etc.), acquired by accident or as part of the ageing process.

## THE SOCIAL DISABILITY MODEL

Golden Plains Shire Council supports a Social Disability Model approach. According to the social model, 'disability' is socially constructed, and the result of the interaction between people living with impairments and an environment filled with physical, attitudinal, communication and social barriers.

A social model perspective does not deny the reality of impairment nor its impact on the individual. However, it does challenge the physical, attitudinal, communication and social environment to accommodate impairment as an expected incident of human diversity.

The social model seeks to change society in order to accommodate people living with impairment; it does not seek to change persons with impairment to accommodate society. It supports inclusion, and the view that people with disability have a right to be fully participating citizens on an equal basis with others.

The social model of disability is now the internationally recognised way to view and address 'disability'. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) marks the official paradigm shift in attitudes towards people with disability and approaches to disability concerns.

People with disability are not "objects" of charity, medical treatment and social protection but "subjects" with rights, capable of claiming those rights, able to make decisions for their own lives based on their free and informed consent and be active members of society.

## THE MEDICAL DISABILITY MODEL

The Medical Model of Disability contrasts with the Social Model of Disability.

According to the medical model, 'disability' is a health condition dealt with by medical professionals. People with disability are thought to be different to 'what is normal' or abnormal. 'Disability' is seen 'to be a problem of the individual'. From the medical model, a person with disability is in need of being fixed or cured. From this point of view, disability is a tragedy and people with disability are to be pitied. The medical model of disability is all about what a person cannot do and cannot be.

# WHAT IS DISABILITY DISCRIMINATION?

Discrimination is defined as treating people with a disability less favourably than people without the disability would be treated under the same circumstances (*direct discrimination*).

Discrimination also exists where there is a condition or requirement imposed which may be the same for everyone, but which unfairly excludes or disadvantages people with a disability (*indirect discrimination*).

It is also unlawful to discriminate against a person because their associates (family, carers, partners etc.) have a disability.

Different treatment of people with a disability is not unlawful discrimination where it is reasonably intended to ensure that they have equal opportunities or to meet their specific needs.





# CHANGING ENVIRONMENT

Golden Plains Shire Council recognises that our community will continue to change into the future as the population grows, community aspirations evolve, and the prevalence of chronic health conditions increase with the ageing population. These changes will have a range of impacts on the services and facilities it provides for people with a disability and older residents.

The increasing ageing population within the Shire will have an impact on housing and public infrastructure, resources and funding. The current consumer demand for 'Ageing in Place', supporting people living within their residence as long as they are able as they age, has influenced the way the Government is thinking about supports and services that are flexible, mobile, and within the home.

The aged care and health sectors are currently experiencing unprecedented changes. Whilst some reforms are already in place (My Aged Care (MAC), Increasing Choices, Home and Community Care for Younger People (HACC PYP) and the National Disability Insurance Scheme (NDIS) the Federal Government continues to make changes in response to funding pressures, growth in demand, market failure and implementation issues.

The Royal Commission into Aged Care Quality and Safety was established on 8 October 2018. The Interim Report, entitled Neglect, was delivered on 31 October 2019 and lays the foundations for the fundamental reform and redesign of Australia's aged care system. It has found that the aged care system fails to meet the needs of our older citizens in the delivery of safe and quality care.

In this Interim Report Commissioners have identified three areas which require immediate action:

- The provision of more Home Care Packages to reduce the waiting list for higher level care at home;
- A response to the significant over-reliance on chemical restraint in aged care; and
- Stopping the flow of younger people with disability going into aged care and expediting the process of getting those younger people who are already in aged care out.

The Final Report is due to be completed by 26 February 2021 and will recommend comprehensive reform and major transformation of the aged care system in Australia. The reform will bring a clear sense of purpose and of quality, and a renewed focus on compassion and kindness.

The National Disability and Insurance Scheme (NDIS) is also implementing changes arising from the recommendations of an independent pricing review in February 2018, that assessed the National Disability Insurance Agency's (NDIA) price control strategy and approach. In March 2018, the (NDIA) gave in principle support to all of the Report's recommendations. The changes will give providers immediate support to meet challenges as they transition to the participant led NDIS, a model developed to increase the capacity of NDIS participants to exercise choice and control in directing their lives and support. The changes will also help ensure NDIS participants have access to the supports they need and greater choice and control over their supports.

Golden Plains Shire Council is not a registered NDIS service provider, but advocates on behalf of our residents to ensure they receive the best outcomes through the NDIS. As of June 2020, there were 376 people with a disability living in the Shire that are registered with the NDIS. Registered service provision is delivered from Ballarat and Geelong. Golden Plains Shire Council monitors neighbouring regions service provision to ensure residents will be well supported if there are any barriers to accessing service providers from outside agencies.

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability was established in April 2019, in response to community concern about widespread reports of violence against, and the neglect, abuse and exploitation of, people with disability. The Disability Royal Commission will investigate:

- Preventing and better protecting people with disability from experiencing violence, abuse, neglect and exploitation;
- Achieving best practice in reporting, investigating and responding to violence, abuse, neglect and exploitation of people with disability; and
- Promoting a more inclusive society that supports people with disability to be independent and live free from violence, abuse, neglect and exploitation.

The Commissioners are required to provide a final report no later than 29 April 2022.

Golden Plains Shire Council is unsure how these National policy matters will ultimately impact our local service provision; however, Council is committed to continue to advocate for the needs of the community and will respond to position papers and other opportunities for input as they arise. The actions in this Plan include a process for monitoring the impacts and potential issues associated with these changes.



# WHAT ARE THE RELEVANT FRAMEWORKS AND LEGISLATION?

## AT AN INTERNATIONAL LEVEL

### World Health Organisation (WHO) – Age Friendly Cities & Communities

The WHO Age Friendly Cities & Communities Framework highlights 8 areas that communities can address to better adapt their structures and services to the needs of older people:

- The built environment,
- Transport,
- Housing,
- Social participation,
- Respect and social inclusion,
- Civic participation and employment,
- Communication, and
- Community support and health services.

In an age friendly community, policies, services and structures support and enable people to age actively by:

- Recognising the wide range of capacities and resources among older people,
- Anticipating and responding flexibly to ageing related needs and preferences,
- Respecting their decisions and lifestyle choices,
- Protecting those who are most vulnerable, and
- Promoting their inclusion in, and contribution to all areas of community life.

### Human Rights Framework of Disability

The United Nations *Convention on the Rights of Persons with Disabilities* (UNCRPD) sets out the rights of people with disability in respect of employment. In particular, CRPD protects the right to work for people with disability. This includes:

- The right to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value;
- The right to safe and healthy working conditions; and
- The right to effective access to training.

The UNCRPD also protects the following rights:

- The right to live independently and participate fully in all aspects of life, including equal access to transport, information and communication technologies;
- The right to live in the community, with choices equal to others, and to full inclusion and participation in the community;
- The right to the greatest possible independence through personal mobility; and
- The right to an adequate standard of living.

## AT A FEDERAL LEVEL

### Disability Discrimination Act 1992 (DDA)

The DDA was enacted by the Commonwealth Government to promote fairness and equity for people with a disability and to ensure that people who have a disability have the same rights and level of access to opportunities and services as other members of the community. The DDA makes it unlawful to discriminate- in the provision of goods, services or facilities- against people on the basis that they have, or may have, a disability. It also makes it unlawful to discriminate against a person on the basis that one of their associates has, or may have, a disability.

This Commonwealth Act overrides any state act or legislation. The DDA covers everyone with a disability. It also protects relatives, friends, carers and co-workers of people with disabilities from discrimination.

The DDA specifically applies to the work of Local Government in a number of areas including: *Access to Premises (Section 23)*, *Goods, Services & Facilities (Section 24)*, *Administration of Commonwealth Laws and Programs (Section 29)*, *Harassment in Employment (Section 34)* and *Harassment in relation to goods and services (Section 39)*.

The DDA definition of disability is classified as:

- Physical
- Intellectual or learning disabilities
- Psychiatric (mental health)
- Sensory (vision or hearing)
- Neurological (e.g. autism spectrum, Multiple sclerosis etc)
- Physical disfigurement
- The presence in the body of disease-causing organisms (eg. HIV AIDS, cancer etc).

### The National Disability Insurance Scheme (NDIS)

The National Disability Insurance Scheme is an insurance support scheme of the Australian Government that funds costs associated with disability. The scheme is administered by the National Disability Insurance Agency. The NDIS in Victoria began with a trial in the Barwon area in 2013. The Victorian and Commonwealth Governments signed a bilateral agreement for transition to the NDIS in 2015. From this agreement the NDIS started a staged rollout in Victoria in 2016. Golden Plains Shire residents were able to access the NDIS from 1 January 2017.

According to the NDIS site there are 381 registered clients living in Golden Plains Shire who are serviced by a handful of registered services within the Shire, Ballarat and Geelong. Although not a registered provider, Council

continues to work in collaboration with registered services in the region, to ensure people with a disability do not 'fall through the cracks' or lack services because of remote locations or complexity of needs.

### The Charter of Aged Care Rights

In 2019, a new rights framework, The Charter of Aged Care Rights, was introduced by the Australian Government to support older people to understand what they can expect when accessing federally funded aged care services.

The Charter places the consumer at the centre of care by supporting them to express their needs and recognising their fundamental right to be treated with dignity and respect.

There are 14 rights within the Charter which state that older people have the right to:

- Safe and high-quality care and services
- Be treated with dignity and respect
- Have their identity, culture and diversity valued and supported
- Live without abuse and neglect
- Be informed about their care and services in a way they understand
- Access all information about them, including information about their rights, care and services

- Have control over and make choices about their care, and personal and social life, including where the choices involve personal risk
- Have control over, and make decisions about, the personal aspects of their daily life, financial affairs and possessions
- Their independence
- Be listened to and understood
- Have a person of their choice, including an aged care advocate, support them or speak on their behalf
- Complain free from reprisal, and to have their complaints dealt with fairly and promptly
- Personal privacy, and to have their personal information protected
- Exercise their rights without it adversely affecting the way they are treated.

### Aged Care Quality Standards

The eight Aged Care Quality Standards require all Commonwealth-subsidised aged care services to deliver care that is inclusive and does not discriminate.

From 1 July 2019, organisations will be assessed and must be able to provide evidence of their compliance with, and performance against, the Quality Standards.

Each standard is about an aspect of care that contributes to the safety, health and well-being of the consumer:

# WHAT ARE THE RELEVANT FRAMEWORKS AND LEGISLATION?

1. Consumer dignity and choice
2. Ongoing assessment and planning with consumers
3. Personal care and clinical care
4. Services and supports for daily living
5. Organisation's service environment
6. Feedback and complaints
7. Human resources
8. Organisational governance

## The Aged Care Diversity Framework

The Department of Health's Aged Care Diversity Framework was developed to provide an overarching structure for diversity in the design and delivery of federally funded aged care services.

The diversity framework:

- takes a comprehensive approach based on the recognition of human rights
- supports aged care service providers to improve care
- encourages consumers to be partners in the design of aged care services
- recognises that like our wider community, older people have diverse characteristics and life experiences and may need different approaches with the aged care services they receive

## AT A STATE LEVEL

### Disability Act 2006

The Victorian Disability Act came into force July 2007 and replaced 2 other outdated DHHS related Acts.

The Disability Act ensures a person with a disability cannot be discriminated against or treated unfairly because of their disability.

The Act provides for:

- A stronger whole-of-government and whole-of-community response to the rights and needs of people with a disability.
- A framework for the provision of high-quality services and supports for people with a disability.

The Act also includes some specific and unique aspects unseen prior to 2006:

- Establishment of the Disability Services Commissioner. The Commissioner is an independent oversight body, resolving complaints and promoting the rights of people with a disability to be free from abuse.
- Establishment of the Victorian Disability Advisory Council (VDAC). The Council provides advice to the Minister for Disability, Ageing and Carers, about policies and strategies to increase the participation and inclusion of people with disability in the Victorian

community. All members of VDAC are people with a disability and representation is from across the State. The Council has an important role in overseeing the State Disability Plan and reviewing the progress being made in different areas. The Council also works with other Community and Government advisory groups to create opportunities for all Victorians and is a useful resource for Local Government advisory committees.

- Section 38 of the Act makes it mandatory for all Government funded organisations to have a Disability Action Plan (or similar). It states:

*'A public sector body' must ensure that a Disability Action Plan is prepared for the purpose of:*

- *Reducing barriers to persons with a disability accessing goods, services and facilities;*
- *Reducing barriers to persons with a disability obtaining and maintaining employment;*
- *Promoting inclusion and participation in the community of persons with a disability;*
- *Achieving tangible changes in attitudes and practices which discriminate against persons with a disability.'*

## Victorian Charter of Human Rights and Responsibilities

Human rights are basic entitlements that belong to every one of us, regardless of our background, where we live, what we look like, what we think or what we believe.

The Charter of Human Rights and Responsibilities (the Charter) is a Victorian law that sets out the basic rights, freedoms and responsibilities of all people in Victoria. It is about the relationship between government and the people it serves.

The Charter requires public authorities, such as Victorian state and local government departments and agencies, and people delivering services on behalf of government, to act consistently with the human rights in the Charter.

Twenty fundamental human rights are protected in the Charter, and it protects human rights in Victoria in three main ways:

- Public authorities, including local government, must act in ways that are compatible with human rights and take relevant human rights into account when making decisions.
- Human rights must be taken into account when Parliament makes new laws.
- Courts and tribunals must interpret and apply all laws compatibly with human rights.

## Equal Opportunity Act 2010

Victoria's Equal Opportunity Act recognises that discrimination can cause social disadvantage, and access to opportunities is not equitably distributed through society.

The Act plays a critical role in providing a framework to recognise rights and to eliminate discrimination, sexual harassment and victimisation as much as possible. This includes identifying and eliminating the systemic causes of discrimination and promoting the progressive realisation of equality.

Under the Equal Opportunity Act it is unlawful to discriminate against a person because of a protected personal characteristic.

It is also against the law to sexually harass someone or to victimise them for speaking up about their rights, making a complaint, helping someone else make a complaint or refusing to do something that would be contrary to the Equal Opportunity Act.

The Act includes a positive duty to eliminate discrimination, sexual harassment and victimisation as far as possible. This means that, instead of simply reacting to complaints of discrimination or sexual harassment, organisations must be proactive about discrimination and take steps to prevent it from occurring.

## AT A LOCAL LEVEL - COUNCIL PLANS AND STRATEGIES

### Summary of Relevant Council Plans, Strategies and Policies

#### Key objectives of the Council Plan, which includes the Municipal Public Health and Wellbeing Plan:

1. Promoting healthy and connected communities
2. Enhancing local economies
3. Managing natural and built environments
4. Delivering good governance and leadership

#### Other strategies that already incorporate active ageing and inclusion considerations and are linked to this Plan include:

- Municipal Early Years Plan
- Paths and Trails Strategy
- Recreation Strategy
- Community Development Strategy
- Play Space Strategy 2019 – 2029.

#### Plans are underway to incorporate active ageing and inclusion components into the following strategies when they are due for review:

- Community Engagement Strategy and Action Plan
- Events, Marketing and Communications Strategy
- Environment Strategy
- Municipal Fire Management Plan
- Youth Development Strategy.