



PO Box 220 / DX 70506 19 King Edward Street Ulverstone Tasmania 7315 Tel 03 6429 8900 Fax 03 6425 1224 admin@centralcoast.tas.gov.au

CONTENTS

PURPOSE	
INTRODUCTION	1
CONTEXT	2
Global	3
State	4
Local	5
RATIONALE	6
SOCIAL PLANNING MODEL	7
Central Coast Vision	7
GUIDING PRINCIPLES	8
Making a Difference	8
Innovation	8
Collaboration	8
THE COUNCIL'S RESPONSIBILITIES AND ROLES	g
Provider	10
Facilitator	10
Advocate	10
PRIORITY AREAS FOR ACTION	11
Active	11
Engaged	11
Included	11
Learning	11
Secure	11
Healthy	11
SOCIAL PLANNING SUCCESS FACTORS	12
EVALUATION	15
CONTACTS	15
REFERENCES	16
APPENDIX - SOCIAL PLANNING FRAMEWORK OVERVIEW	17



PURPOSE

The Central Coast Social Planning Framework (the Framework) guides and informs all efforts to make positive social impact for Central Coast communities.





INTRODUCTION

The Central Coast Council (the Council) is committed to working with the community to make sure the Central Coast is a great place to live, work, play and raise a family. The aim is that everyone has the opportunity to realise their potential and fully participate in all aspects of community life.

Social inclusion means building a community where residents have the opportunity and support they need to participate fully in economic and community life, develop their own potential and be treated with dignity and respect. This means tackling the challenges and developing opportunities to build resilience and prosperity for the benefit of *all*, with a particular focus on those who, for whatever reason, are at risk of social exclusion.

The Framework provides the direction and outcomes sought to achieve improved social planning in Central Coast. It comes from, and contributes to, the realisation of the community's vision and Strategic Plan 2014-2024 that outlines the things that need to be done to achieve the preferred future. The Framework also assists the Council, stakeholders, service providers and the community to define their roles, allocate resources, make contributions, engage and communicate shared purpose, and take action.

As the needs of many individuals in our community become more complex, for example, developing effective responses relating to the Coronavirus (COVID-19) pandemic, the demand on relevant support systems and services will come under increased pressure. For Central Coast to effectively respond, all involved will need to work together to achieve local social outcomes.

More traditional public service delivery roles and responsibilities will continue, however, the emerging emphasis is on approaches based on building relationships and working collaboratively with local people, local institutions and community groups. It is these emerging approaches that the Framework will influence most.

The Framework's Guiding Principles, Priority Areas for Action and Community Outcomes articulate the Council's commitment, and their importance to social planning. This commitment will enhance the ability of the Council, service providers, stakeholder and the community to work together to achieve social impact to enable Central Coast residents to fully participate in all aspects of community life.

In developing the Framework, acknowledgement is made to the valuable contribution of Councillors, staff, community members, Service Clubs, community groups, local organisations, service agencies, neighbouring councils and peak bodies who brought their collective knowledge and experience to the strategic conversations, projects and activities below.

- . The Council's Health and Well-Being Roundtable;
- . The Council's Social Determinants of Health Workshop;
- . The Mersey-Leven Food Hub Project;
- The Local Food Security Strategy Planning Workshop;
- . Strategic Plan Review Community Meetings; and
- . Dementia-Friendly Central Coast Planning Workshops.

CONTEXT

The Central Coast Social Planning Framework guides the work and approaches of the Council, community and stakeholders towards achieving positive change for local social outcomes. The Framework emphasises health and well-being as the first step to assist Central Coast residents to enjoy active, engaged, included, secure and healthy lives, and to continue learning throughout their journeys. There will also be a range of collective efforts needed in the Framework's Priority Areas for Action in order to create positive social impact so that Central Coast residents can fully participate in all aspects of community life.

According to current data, the leading causes of the 1,086 deaths in Central Coast are coronary heart disease (12.2%), dementia including Alzheimer disease (7.1%), cerebrovascular disease (6.9%), chronic obstructive pulmonary disease (6%), and lung cancer (5.8%). Only thirty-four per cent of Central Coast residents rate their health as "excellent" or "very good" and Tasmanian residents feel healthier overall than Central Coast residents.

Physical health is connected to the psyche and taking care of your body is a powerful first step towards better mental and emotional well-being. Phycological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life. Eight per cent of adults in Central Coast have experienced high or very high levels of psychological distress, which was lower than the result of 12 per cent for Tasmania. The mind and the body are linked. When you improve your physical health, you'll experience better mental and emotional well-being.



GLOBAL

SOCIAL DETERMINANTS OF HEALTH

While there is no single definition of the social determinants of health, government and non-government organisations share common usages. The World Health Organization (WHO) describes social determinants as the circumstances in which people grow, live, work, and age, and the systems put in place to deal with illness. The health system also forms part of the definition.

The social determinants of health are mostly responsible for health inequities; the unfair and avoidable differences in health status seen within and between countries. Circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are in turn influenced by policy choices.

There is ample evidence that social factors including education, employment status, income level, gender and ethnicity have a marked influence on how healthy a person is. In all countries, whether low, middle or high-income, there are wide disparities in the health status of different social groups. The lower an individual's socio-economic position, the higher their risk of poor health. Health inequities have significant social and economic costs to individuals, communities and societies.

CORONAVIRUS PANDEMIC

Since 2019, the public health and economic effects of the Coronavirus pandemic continue to affect social planning for many global nations including Australia. There will be an increased burden of mental health related disorders among general populations as a result of COVID-19. Survivors of severe COVID-19 illness experience a significant increase in mental health problems and COVID-19 could worsen underlying Cardiovascular Disease (CVD) and even cause new cardiovascular events. Socio-economic challenges created by the COVID-19 pandemic have potential to negatively affect people's daily environment, as they influence the social determinants of health.

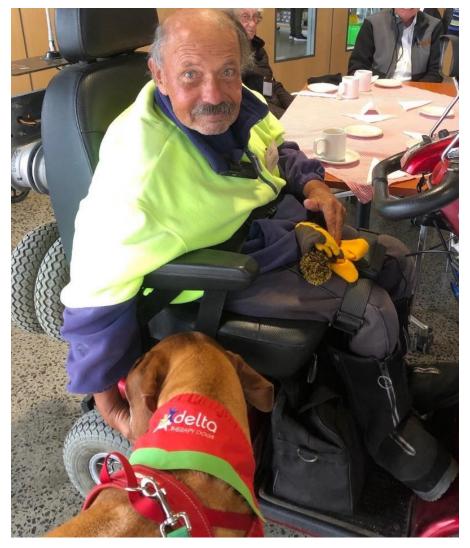
Currently, a high proportion of Tasmania's population is 'up to date' with their COVID-19 vaccinations. Hospitalisations and deaths due to COVID-19 are relatively low compared to national and global populations. However, uncertainty surrounding new coronavirus variants and potential increases in restrictive health measures may lead to greater impacts on social determinants of health disparities, as evidenced elsewhere, particularly during community peaks of COVID-19 and during the colder months.



STATE

Taking effective action in preventive health is integral to improving social planning outcomes for Tasmanian populations. The State government's Healthy Tasmania Five Year Strategic Plan 2022-2026 considers 'prevention as wellness'. The Healthy Tasmania Plan's Principles of equity, empowerment and sustainability guide the decisions and actions of governments and partners.

Four outcomes have been identified to achieve the Healthy Tasmania vision that, all Tasmanians have the opportunity to live healthy, active lives in communities that support connections to people, place and culture. Healthy Tasmania's desired outcomes are a healthier population; greater equity of health outcomes across the Tasmanian community; liveable, vibrant and healthy places; and greater social connectedness.



The Tasmanian Department of Health's Strategic Priorities identifies priorities, actions and enablers to improve outcomes for Tasmanians. The six priority areas are listed below.

- 1. Continuing to respond to the COVID-19 pandemic;
- 2. Improving access and patient flow across the health system;
- 3. Delivering care in clinically recommended times;
- 4. Reforming the delivery of care in the community;
- 5. Prioritising mental health and well-being; and
- 6. Building the infrastructure for our health future.

LOCAL

Governments at all levels have an important role to play, but they are no substitute for a community's own knowledge, networks, enterprise, institutions and other forms of social capital. This creates the context for new placed-based and collaborative approaches to community development and service delivery, which build from existing capabilities and provides the basis for engaging key local stakeholders in the development and delivery of their own meaningful solutions to identified issues.

The Framework recognises the efforts and complements the plans and initiatives that are being considered or implemented across neighbouring councils, the broader region and the State. Government boundaries may serve a useful purpose for the delivery of public infrastructure and services, however, such jurisdictions do not necessarily coincide with the various scales at which community development should occur. More collaborative, adaptable and scalable approaches may be required to address complex or shared social planning challenges.

The Council's Strategic Plan 2014-2024 is addressing a number of identified key outcomes. Those that relate specifically to the Framework are included in the list below.

- . Socio-economic well-being;
- . Economic prosperity and resilience;
- . Resilient and engaged community; and
- . Healthy community and healthy lifestyle.



RATIONALE

Social planning is closely tied to the daily environment. The following table draws on current data available to outline the Central Coast social planning profile¹.

MEASURE	DESCRIPTION	RESULT	YEAR
AGEING	Population over 50 years	46.8%	2020
AGEING	Median age (years)	47.4	2020
	Leakage from the productive section of the population (age group)	15-59 year old	2020
DIVERSITY	Population of Aboriginal and Torres Strait Islander descent	6.9%	2016
DIVERSITY	Percentage of the population that speaks a language other than English at home	1.7%	2020
DISADVANTAGE	Unemployment rate	6.9%	2020
DISADVAIVIAGE	Single parent households	913	2020
	Population receiving Disability Support Pension	1,262	2020
	Single or lone person households	27.5%	2016
	Housing stress – households with mortgage repayments <30% of household income	8.3%	2016
	Homeless persons per 10,000 persons (rate)	28.7%	2016
	Socio-Economic Indexes for Areas (SEIFA) Index Score	952	2016
EDUCATION	Population attending an educational institution	19%	2016
LDOCATION	Population completed year 10 or equivalent	37.3%	2016
	Population reporting a vocational qualification	24.3%	2016
	Population reporting a degree or diploma	19%	2016
	Population reporting being in the labour force	8,839	2020
HEALTH	Adults' consumption of alcohol at risky levels	12%	2019
HEALIN	Adults that are insufficiently active	13%	2019
	Adults consuming the recommended two pieces of fruit per day	50%	2019
	Adults consuming the recommended five pieces of vegetables per day	91%	2019
	Overweight/obese body mass index - BMI	70%	2019
	Adults that are current smokers	9%	2019
	Hospitalisations due to chronic respiratory conditions	22	2019
	Adults with high or very high psychological distress	8%	2019
	Hospitalisations due to depression	77	2019

¹ Australian Bureau of Statistics data in the Rationale table above will be updated as released. Housing costs, Aboriginal and/or Torres Strait Islander origin and education data will be released in June or October 2022 and SEIFA scores and estimates of homelessness will be released early to mid 2023.

Date of Issue: April 2022 Page: 6 of 17 Version No: 2.1

SOCIAL PLANNING MODEL

The Framework places the Central Coast Vision and Priority Areas for Action at centre of the Social Planning Model. The Vision and Priority Areas for Action are linked to the Council's Strategic Plan 2014-2024, WHOs social determinants of health and the State government's Healthy Tasmania Strategic Plan by the inner segments of the model, which represent Central Coast's place-based needs.

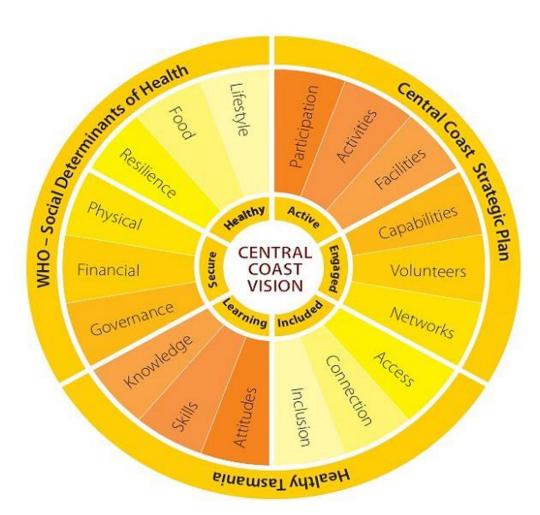


Figure 1: Social Planning Model

CENTRAL COAST VISION

The Central Coast Vision is, Central Coast - living our potential. We are a vibrant, thriving community that continues to draw inspiration and opportunities from its natural beauty, land and people and connected by a powerful sense of belonging.

The Council's Strategic Plan 2014-2024 outlines strategies and actions to help achieve the preferred future around the following strategic directions:

- . The Shape of the Place;
- A Connected Central Coast;
- Community Capacity and Creativity;
- The Environment and Sustainable Infrastructure; and
- . Council Sustainability and Governance.

GUIDING PRINCIPLES

The Framework's Principles will guide the work and approaches of the Council, community and stakeholders towards achieving positive change for local social outcomes.



MAKING A DIFFERENCE

- Transforming the systems and relationships to produce social impact and better community outcomes;
- Aligning practices, delivery systems and culture with the Central Coast Vision; and
- . Taking action; achieving by doing.

INNOVATION

- Using the Framework to align effort across policy and service domains;
- . Identifying improved and new ways of working; and
- Providing inspiration and incentives to encourage innovation to achieve agreed outcomes.





COLLABORATION

- Working together to achieve positive social outcomes;
- Using a shared vision and purpose;
- Building on existing assets and strengths;
- . Developing broad coalitions to identify and resolve key challenges; and
- Developing service agreements, partnerships and other effective collaborative models.

THE COUNCIL'S RESPONSIBILITIES AND ROLES

PROVISION OF GOODS AND SERVICES

Broadly speaking, the Council provides three kinds of goods and services.

Type of Good	Characteristics	Funded By
PUBLIC	Provided by government because there is wide community benefit, everyone has equal access and market failure exists in provision. Could be described as core business. There is an expectation that government will provide.	Taxes
MIXED	Provision can be shared between government and the private sector. It is discretionary for government; however, community demand justifies involvement. Part market failure exists for its provision.	. User charges; and . Community Service Obligations (CSO)
PRIVATE	Provided by the public sector and with no reason for government to be involved. Market forces set demand for the service. There is no market failure for the provision. Access is not equal to all.	Price



COUNCIL'S ROLES

The three roles of the Council are provider, facilitator and advocator.

PROVIDER

The provider role includes regulatory activities. The Council provides the good or delivers the service because they are required by legislation to do so. Presently, community related services that the Council provide include the following:

. Accommodation for older members of the community:

Arts and cultural development;

. Building and plumbing services;

. Caravan parks;

. Cemeteries;

. Child and youth services;

. Community, cultural, recreation, sport and leisure facilities;

. Dog control;

. Emergency services;

Event support;

Facilities, roads, footpaths and street

lighting;

. Immunisation;

Land-use planning;

. Public amenities;

. Public health and environmental

management;

. Waste services management;

Stormwater drainage; and

. The community's public realm.

FACILITATOR

As a facilitator, the Council cooperates with other groups to help deliver a good or service. The facilitating actions can be large or small. Presently, the Council helps facilitate the activities including that of:

Anglicare;

. Central Coast Chamber of Commerce and Industry

Central Coast Community Safety

Partnership Committee;

. Central Coast Community Shed

Committee

Central Coast Youth Leaders' Council:

Forth Community Representative Committee;

Turners Beach Community Representative

Committee:

The Red Cross:

. The Heart Foundation;

. Service Clubs;

Switch Tasmania; and

Volunteering Tasmania.

ADVOCATE

As an advocator, the Council speaks up, lobbies and supports a cause or issue. Apart from also advocating for the issues and outcomes sought by the groups above, the Council speaks up and lobbies for equity of access for State and Federal government funding, improved and/or new services and to influence the directions of, for example:

- . Cradle Coast Authority;
- Department of Health;
- Department of State Growth;
- . Regional Development Australia; and
- Tourism Industry Council of Tasmania.

PRIORITY AREAS FOR ACTION

Building on the social determinants of health, the Framework outlines Priority Areas for Action, Community Outcomes and indicators to monitor and measure whether a positive difference is being made. An overview of the Framework is included in the Appendix.

There will be actions that the Council will be able to undertake within the three roles of provider, facilitator and advocate to achieve desirable outcomes around the six Priority Areas for Action that need to be addressed to make a difference. Actions and associated tasks under development for social planning related Council strategies need to be grouped under the relevant Social Planning Priority Areas for Action, which are listed below.

ACTIVE

Opportunities and facilities to gather and participate in recreational activities and cultural experiences.

ENGAGED

Capabilities and networks to volunteer our time and skills and engage in decisions that affect us.



INCLUDED

Connectivity and inclusivity for our communities to access services, shops, education, work and play.

LEARNING

The knowledge, skills and commitment to learning needed to participate fully in society and reach our potential.



SECURE

Local work opportunities and affordable living in a well governed and safe community environment.

HEALTHY

Local resources to support good food and lifestyle choices that build physical health and emotional resilience.

SOCIAL PLANNING SUCCESS FACTORS

One of the key social planning efforts that the Council can undertake is to monitor, measure and report whether positive social impact is being made for Central Coast communities. Outlined in the table below are the place-based Community Outcomes sought in relation to each social planning Priority Area for Action, the community indicators to monitor, local initiatives to measure and associated data sources.

Priority Areas for Action	Community Outcomes	Community Indicators (to monitor)	Local Initiatives (to measure)	Data Sources
ACTIVE	Participation	Insufficient physical activity		Department of Health and Human Services, Tasmania Population Health Survey
Opportunities and facilities to gather and participate in recreational activities and	Activities Sport and recreation		Registered sporting groups	Council data
cultural experiences	Facilities Shared pathways, open space, community facilities		Community facility's bookings	Council data
ENGAGED	Capabilities		Partnerships established around collaborative projects	Council data
Capabilities and networks to volunteer our time and skills			Collaborative projects that make a difference	Council data
and engage indecisions that affect us	Volunteers	Unpaid Work: Percentage of Total Population Aged 15 Years and Over – Persons undertaking	Volunteers involved with Council activities	Australian Bureau of Statistics, Census of Population and Housing Council data and Department of
		voluntary work for an organisation or group (%)		Employment, Small Area Labour Markets
	Networks		Council-led community engagements	Council data

Priority Areas for Action	Community Outcome	Community Indicators (to monitor)	Local Initiatives (to measure)	Data Sources
INCLUDED	Access	Access to internet at home (%)		Australian Bureau of Statistics, Census of Population and Housing
Connectivity and inclusivity for our	Connection	Local jobs		Department of Employment, Small Area Labour Markets
communities to access services, shops, education, work and play	Inclusion	Acceptance of other cultures – cultural diversity		Australian Bureau of Statistics, Census of Population and Housing
		Migration in to and out of Central Coast		Australian Bureau of Statistics, Census of Population and Housing
LEARNING	Knowledge	Adult literacy and life skills		Australian Bureau of Statistics, Programme for the International Assessment of Adult Competencies
The knowledge, skills and commitment to learning needed to participate fully in society and reach our potential		People aged 20-24 years with Year 12 or higher qualification		Australian Bureau of Statistics, Census of Population and Housing)
	Skills	People employed in high and low skilled occupations who live and work in Central Coast		Department of Employment, Small Area Labour Markets
	Attitudes	People aged 15-19 years not engaged at all in work or study		Australian Bureau of Statistics, Census of Population and Housing

Priority Areas for Action	Community Outcome	Community Indicators (to monitor)	Local Initiatives (to measure)	Data Sources
SECURE	Physical	Crime rate		Tasmanian Department of Police and Emergency Management Crime Statistics Supplement
Local work opportunities and affordable living in a well-governed and safe	Financial	Unemployment		Department of Employment, Small Area Labour Markets
community environment		Housing stress (>30% household income spent on rent or mortgage payments		Australian Bureau of Statistics, Census of Population and Housing
	Governance		Strategic Plan reviews	Central Coast Council
HEALTHY	Resilience	Psychological distress, high or very high		Department of Health and Human Services, Tasmania Population Health Survey
Local resources to support good food and lifestyle choices that build physical health and		Tobacco use, alcohol risk and recent (a) illicit drug use, people aged 14 years or older, by Statistical Area Level 4 (SA4),2013 (per cent)		Department of Health and Human Services, Tasmania Population Health Survey
emotional resilience	Food	Obese BMI		Department of Health and Human Services, Tasmania Population Health Survey
		Adequate consumption of fruit and vegetables	Council-led community engagements	Department of Health and Human Services, Tasmania Population Health Survey
	Lifestyle	Potentially preventable hospitalisations, age standardised rate per 1,000 population		Department of Health and Human Services, Epidemiology Unit data
		Persons aged 18+ with four or more chronic conditions		Department of Health and Human Services, Tasmania Population Health Survey

EVALUATION

To compliment data sources such as the Australian Bureau of Statistics, the Framework adopts a Results Based Accountability approach to evaluation, particularly for collaborative approaches that involve the community and other actors working towards the same outcomes and measuring the same things. Starting with the 'outcome' desired for an action or task, indicators are identified and measured in order to quantify the achievement of the desired outcome.

A measure of how well a Council or community initiative, project, agency or service system is working involves three types of interlocking measures shown below.

- 1. How much did we do?
- 2. How well did we do it?
- 3. Is anyone better off?

PERFORMANCE MEASURES

	Quantity	Quality
Effort	How much service did we deliver?	How well did we deliver it?
Effect	How much change/effect did we produce?	What quality of change/effect did we produce?

CONTACTS

If you would like information, want to share what you are doing please contact:

Heidi Willard STRATEGY & POLICY OFFICER



REFERENCES

Ahmed AMS, Shaw K A., (2020). A rapid review of alcohol and other drug use and COVID-19. Primary Health Tasmania

Ahmed AMS, Shaw K. A., (2020). Rapid Review of mental health disorders and COVID-19. Primary Health Tasmania

Australian Bureau of Statistics, (2021). Regional Summary: Central Coast (Tas.) Website https://dbr.abs.gov.au/region.html?lyr=lga&rgn=60810

Australian Institute of Health and Welfare, (2022). Website https://www.aihw.gov.au/, accessed 10 February 2022. Government of Australia

Australian Medical Association Ltd, (2021). Social Determinants of Health - 2020. Website https://www.ama.com.au/articles/social-determinants-health-2020

Clear Impact, (2021). Results Based Accountability. Website https://clearimpact.com/results-based-accountability/

Commission on Social Determinants of Health (2008). Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health. Final Report of the CSDH. World Health Organisation, Geneva (p. iii)

Department of Health, (2021). Strategic Priorities 2021-23. Website https://www.health.tas.gov.au/about/what-we-do/strategic-programs-and-initiatives/department-health-tasmania-strategic-priorities-2021-2023. Government of Tasmania

Healthy Tasmania Five-Year Strategic Plan 2022-2026, (2022). Website https://www.health.tas.gov.au/sites/default/files/2022-03/Healthy_Tasmania_Five-Year_Strategic_Plan_2022%E2%80%932026_DoHTasmania2022.pdf. Government of Tasmania

Eversole, R., (2011). Community Agency and Community Engagement: Re-theorising Participation in Governance' Journal of Public Policy, 31, 1, pp. 51-71

Government of Australia, (2010). A Stronger, Fairer Australia

Marmot, M. and Wilkinson R.G., eds. (2003). The Social Determinants: The Solid Facts. Oxford University Press, second ed. UK

Primary Health Tasmania, (2021). Community Health Check 2021: Central Coast Local Government Area. Primary Health Network Tasmania

PHIDU, (2021). Social Health Atlas of Australia: Tasmanian Local Government Areas. Website https://phidu.torrens.edu.au/current/maps/shaaust/lga-single-map/tas/atlas.html

Wong, C., (2002). Developing Indicators to Inform Local Economic Development in England, Urban Studies, 39, 10, pp. 1833-1863



APPENDIX — Central Coast Social Planning Framework Overview

Key Themes Principles, Ø **Overarching Guiding** Model Planning

Making a Difference

We transform systems & relationships to produce better outcomes for the Central Coast community

Guiding Principles

- Aligning practices, delivery systems and culture with the Central Coast Vision
- We implement transformational initiatives.

Innovation

- We use the Framework as a tool to generate alignment across policy & service
- Identifying improved and new ways of
- We provide inspiration and incentives to encourage innovation for achieve agreed-upon outcomes.

Collaboration

- We work together to achieve positive social outcomes
- Using a shared vision & purpose
- Building on existing assets and strengths
- We use broad coalitions to resolve challenges
- Developing broad coalitions to identify & resolve key challenges
- Developing service agreements, partnerships & other effective collaborative



Healthy Tasmania

Social Planning Model

Social Inclusion

- At risk groups/individuals: low socio-economic demographic disengaged youth, isolated seniors; special interest groups/ individuals; vulnerable families = supporting economic/social/ educational dimensions, family supports & increased volunteering
- Poverty = develop a response to homelessness
- Housing security = affordable & accessible housing; suitable housing/lifestyle choices
- Food security = access to affordable & accessible food
- Health issues: chronic disease, obesity, coronavirus pandemic, men's health & ageing population = education/awareness, well utilised lifestyle amenities/open spaces, links to service providers.

Building Local Capacity

- Human capacity = identifying champions in the community & including in decision-making process; empowerment
- Social capacity = asset mapping local institutions, local services, community organisations, gifts of individuals &
- Competitive advantage = productive & prosperous community.

Social Cohesion & Connectedness

- Sense of place, belonging & identity = resilient & vital communities, quality of life & high public value of community
- Safe communities = strengthen local neighbourhoods, community safety partnerships
- Stable communities = sustainable community services provision, social responsibility
- Social isolation & exclusion = removal of social barriers & barriers to inclusion.

Planning & Liveability

- Community health & wellbeing = healthy, happy, caring, supportive & participating
- Levels of literacy & numeracy = retention in secondary & tertiary education
- High unemployment = identifying skill requirement in emerging issues & connecting education, employers, community & intermediate trainers
- Place-based population planning = adapt & respond to changing demographic (ageing population)
- Address locational disadvantage = removal of social barriers & barriers to inclusion.

Governance

Key Themes

- Fragmented, centralised bureaucratic services = public private partnerships (PPP's); connecting tiers of Government with institutions, NGO's, business & reducing red tape
- Transparent & collaborative governance = co-design place-based responses to local needs; co-delivery of solutions to local issues – locally owned strategies; connected & accessible community services
- Innovation networks = information spill-over, creativity, entrepreneurship & research and develop opportunities and
- Prioritise social infrastructure, service & resources = leveraging physical, spatial, locational, human resources, knowledge/ technology & ICT enablers
- Mobilising community action = connecting with the community, building relations of trust, harnessing collective action to increase benefits
- Community accountability for community-driven solutions = Results-Based Accountability measures.

Overall direction for social planning in Central Coast

VISION

In Central Coast, everyone contributes to making our productive &

opportunities to fulfil their potential & benefit from our thriving social, economic, & cultural life.

Priority Areas for Action Active

Opportunities to participate in recreational activities, cultural experiences & to engage in communities

A leading Council is well governed, managed & engages effectively with its community

Feel welcomed in the communities

where they live, learn & work

Develop the knowledge, skills & commitment to learning needed to

Secure

Support themselves and their households through safe work & career opportunities, affordable & stable housing & access to income supports when in financial need. Live free from fear of abuse and violence

Healthy

standards of mental & physical health with access to affordable fresh food

Engaged

Included

Learning

participate in society & reach potential

Achieve the highest attainable

Participation

- **Activities**
- **Facilities**

Community Outcomes

- Capabilities
- **Volunteers**

Access

Connection

Knowledge

Attitudes

Physical

Financial

Governance

Resilience

Lifestyle

Food

Skills

Inclusion

- Networks
 - Place-based population planning Co-design & co-delivery of locally owned strategies / solutions.
 - Remove socially divisive attitudes & prejudices: Removal of social barriers to
 - inclusion
 - Connectedness and a sense of belonging.
 - Transition
 - Attainment—numeracy & literacy.

Shared and connected pathways

Sustainable community service

& not-for-profit partnerships.

Place based, government, business

for walking & cycling.

Community facilities.

Open space

provision;

- Physical security: Community safety partnerships; Strengthening local
- neighbourhoods. Emergency services, management & resourcing
- Chronic disease: Improved service access;
- Preventable health care. Implications of an ageing population.

Sports and recreation participation: Improving availability of & participation in a

Related Key Areas for Action

- range of healthy activities. Strong community networks:
- Innovation networks entrepreneurship & Research and Development investment. Include communities and stakeholders in decision making when affected by the outcome:
- Improving community engagement methods, capability & tools / resources. Volunteering
- Spaces and places, facilities to gather to be together.
- Access: Improved public transport.
- Skills development, training & retraining:
- Education pathways.
- Financial security, housing:
- Affordable / stable housing. Unemployment / employment pathways, including intermediate labour market programs.
- Societal order.
- Healthy eating and access to fresh local food: Food literacy and security.
- Stress / emotional well-being. Addiction.

Key Community Indicators

Insufficient physical activity

Obese BMI Registered sporting groups.

- Partnerships established around collaborative projects
- Collaborative projects that make a difference Volunteers involved with Council activities Council-led community engagements
- Unpaid work: percentage of total population aged 15 years and over persons undertaking voluntary work for an organisation or group.
- Migration into and out of the area People employed in high and low skilled occupations who live & work locally
- Acceptance of other cultures cultural diversity
- Community facilities bookings Access to internet at home – with broadband connection (%).
- People aged 20-24 years with Year 12 or higher qualification People aged 15-19 years not engaged at all in work or study Adult literacy & life skills.
- People who are unemployed % of labour force
- Ratio of equivalised gross weekly household income ratio of incomes at top of 80th and 20th percentiles Housing loan quartiles
- Housing rental quartiles Cost of essentials as a proportion of income for a low income couple, 2 children
- Crime rate.
- Potentially preventable hospitalisations Psychological distress, high or very high Tobacco use, alcohol risk & recent illicit drug use, people aged 14 years or
- Persons aged 18+ with four or more chronic conditions.

Adequate consumption of fruit and vegetables