



# Shire of Woodanilling

*Public Health Plan 2026 - 2031*



# Acknowledgement of Country

The Shire of Woodanilling acknowledges the Willman people as Traditional Custodians of the land within its boundaries and pays respect to elders past, present and emerging.



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# INTRODUCTION

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We are pleased to present the Shire of Woodanilling's (Shire) Public Health Plan 2026-2031 designed to assist in addressing the public health needs of our residents in conjunction with the strategies outlined in the Shire's Strategic Community Plan (2025-2035) 'The Woodanilling Way' and the Shire's Disability Access and Inclusion Plan.

Our community's health and wellbeing is everyone's responsibility and our Plan aligns with the Public Health Plan for Western Australia 2025 - 2030 to contribute to improving health outcomes in our community.

Woodanilling is fortunate to be located in the picturesque upper Great Southern, conveniently situated approximately 15 minutes north of the regional centre of Katanning and approximately 20 minutes south of Wagin. Both neighbouring centres, along with Kojonup to the south-west, provide access to General Practitioners, district hospitals and allied health services.

# OBJECTIVE

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The Shire of Woodanilling Public Health Plan (Plan) has been created with the objective of promoting and improving public health services in the Shire of Woodanilling through a combination of Local, State and Federal government services provision, in accordance with *Public Health Act 2016 (Act)* requirements.



# VISION

In 2035 the Shire of Woodanilling will be a Shire that is energetic and progressive with a strong connection to its community and environment. It will be a Shire that embraces its independence and encourages the sustainable development of the natural environment through ways that value the cultural heritage and sense of place provided by living in Woodanilling.



# ROLE OF THE SHIRE

The Shire of Woodanilling provides services identified in the State Health Plan as being provided by local government. These include environmental health, building, planning and development, infrastructure and property, recreation and cultural facilities and their administration, water and sewerage, and ranger services, including but not limited to:

1. Monitoring food and water safety at businesses providing food to the community.
2. Ensuring compliance of on-site wastewater management for homes and businesses.
3. Monitoring pool fencing for the safety of the community.
4. Investigating noise and other nuisance impacts.
5. Monitoring and ensuring building standards and compliance with housing and accommodation standards.
6. Investigating incidences of enteric (intestinal) and arbovirus (transmitted to humans by blood-feeding vectors e.g., mosquitoes, ticks, sandflies etc.) infectious diseases.
7. Monitoring zoonoses (disease transmission from animals to humans) and safety risks through animal control, licensing and monitoring.



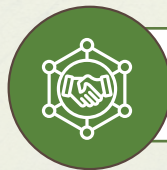
# STRATEGIC COMMUNITY PLAN

Our Strategic Community Plan (SCP) 'The Woodanilling Way 2025 - 2035' aligns with the provision of health-related services in our Shire.  
(Identified through community consultation during 2024)

## OUR STRATEGIC COMMUNITY PLAN KEY PILLARS ARE:



**1. SOCIAL**



**3. CIVIC LEADERSHIP**



**2. ENVIRONMENT**



**4. ECONOMIC**

Corporate Business Plan Actions contain priority projects designed to achieve the goals of each pillar of our Strategic Community Plan  
(visit [www.woodanilling.wa.gov.au](http://www.woodanilling.wa.gov.au) for quick access to priority projects in our SCP)



## KEY PILLAR 1 - SOCIAL

Pillar 1 aims to foster a connected, inclusive community with access to quality services, facilities, and social opportunities. Focus areas include community wellbeing, cultural and community engagement, youth and family development, age and disability support, community safety and emergency services, and social inclusion and equity.



### Key Pillar 1 Corporate Business Plan Action goals:

- Goal 1:** A safe and inclusive community for all ages
- Goal 2:** Local access to health and education services
- Goal 3:** Active and healthy community
- Goal 4:** Mitigate the impact of natural events



## KEY PILLAR 2 - ENVIRONMENT

Pillar 2 focuses on protecting natural and built environments, promoting sustainable land use, and encouraging responsible environmental management. Key priorities include land and natural resource management, waste management, water conservation, environmental conservation, and climate adaptation.



### Key Pillar 2 Corporate Business Plan Action goals:

**Goal 5:** Care and protect our natural environment

**Goal 6:** Sustainable and efficient use of natural resources



## KEY PILLAR 3 - CIVIC LEADERSHIP

Pillar 3 emphasises strong governance, transparency, and community trust. Key areas of focus include good governance, community engagement, leadership development, and strategic planning and accountability.



### Key Pillar 3 Corporate Business Plan Action goals:

**Goal 7:** Deliver a high standard of service for our community

**Goal 8:** Accountable and compliant governance

**Goal 9:** Enhance Strong Civic Leadership



## KEY PILLAR 4 - ECONOMIC

Pillar 4 focuses on building a diverse, sustainable economy that benefits residents and businesses. Key priorities include business support and development, tourism growth, infrastructure improvement, and agricultural innovation.



### Key Pillar 4 Corporate Business Plan Action goals:

**Goal 10:** A transport network that responds to the accessibility and connectivity needs of industry and community

**Goal 11:** Local economic growth is supported by essential services and robust infrastructure

**Goal 12:** Grow the visitor and tourism industry



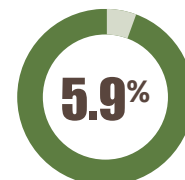
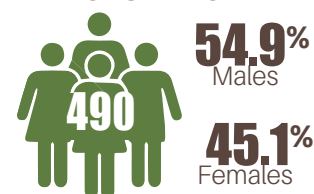
## A SNAPSHOT OF THE HEALTH AND WELLBEING PROFILE 2015-2024 OF PEOPLE IN THE SHIRE OF WOODANILLING

The following Shire of Woodanilling statistics represent factors that deviate from the State average by  $\geq 4\%$  and represent 2024 data, unless stated otherwise.

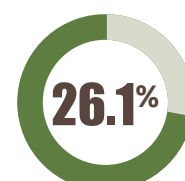
- ASR = Age Standardised Rate per 100,000 population – percentage not noted
- < = less than, > = more than,  $\geq$  = equal to or more than

Factor	Description	Statistic
<b>Nutrition</b> (children - 2-15 years/ adults - $\geq 16$ years)	71.1% of children ate the recommended serves of fruit daily (females 5.1% < state prevalence)	Not so good news
	38.3% of adults ate the recommended serves of fruit daily (4.9% > state prevalence)	Good news
	13.7% of adults drank sugar-sweetened soft drinks and energy drinks more than twice a week (males 5.4% < state prevalence)	Good news
<b>Physical Activity</b>	42.1% of adults ( $\geq 18$ years) did not meet recommended weekly physical activity guidelines (males 6.5% > state prevalence)	Not so good news
	37.5% of children (0-15 years) spent more than recommended time in screen-based sedentary leisure activities (males 4.1% < state prevalence, females 10.3% < state prevalence)	Good news
<b>Overweight and obesity</b> (children 5-15 years/ adults $\geq 16$ years)	13.2% of children are classified as 'obese' (males 4.7% > state prevalence)	Not so good news
	44.5% of adults are classified as 'obese' (males 8.9% > state prevalence, females 5.2% > state prevalence)	Not so good news
<b>Vape Use</b> ( $\geq 18$ years)	3.7% currently vaped (males 4.2% < state prevalence, females 4.3% < state prevalence)	Good news
<b>Mental Health and Wellbeing</b> (persons aged $\geq 16$ years)	12.1% experience anxiety (females 5% < state prevalence)	Good news
	19.1% experience any mental health condition (males 4.1% < state prevalence, females 6.7% < state prevalence)	Good news
	17.8% experience high or very high psychological distress (females 4.5% < state prevalence)	Good news
<b>Injury-related hospitalisations</b> (persons of all ages/ ASR)	151.2 per 100,000 intentional self-harm hospitalisations (females > state ASR)	Not so good news
	527.4 per 100,000 transport accident hospitalisations (> state ASR)	Not so good news
<b>Injury-related deaths</b> persons of all ages/ (ASR) - 2021	49.5 per 100,000 transport accident deaths (> state ASR)	Not so good news

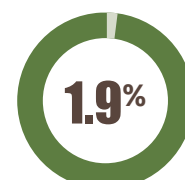
### POPULATION



**CURRENTLY UNEMPLOYED**

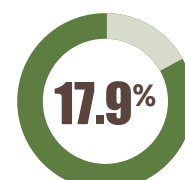


**BORN OVERSEAS**



**INDIGENOUS**

identify as Aboriginal/Torres Strait Islander persons



**LANGUAGE**

speak a language other than English at home

(Source: A snapshot of the Health and Wellbeing Profile 2015-2024 - prepared by WA Country Health Service Health Promotion (2026) and is an adaptation of a similar resource developed by South Metropolitan Health Service. Information and data is sourced from the Public Health Atlas produced by the Epidemiology Directorate, Public and Aboriginal Health Division, Department of Health WA, January 2026. Data presented in the Health and Wellbeing Profiles 2015-2024 are estimates derived from Bayesian modelling processes not raw values. Refer to Bayesian modelling method documents for technical information).

# PUBLIC HEALTH PLAN SURVEY

## WOODANILLING RESPONDS

The Shire of Woodanilling Public Health Plan survey was conducted anonymously (online and via hard copy) during the month of March 2026, with a relatively even representation from across all location areas (rural/townsite/local rural) as follows:

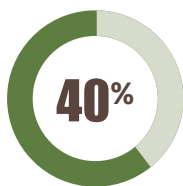
### AGE BREAKDOWN



**15 - 34**  
years old



**35 - 64**  
years old



**65 - 85+**  
years old

### IDENTIFYING AS



**70%**  
Females

**26.7%**  
Males

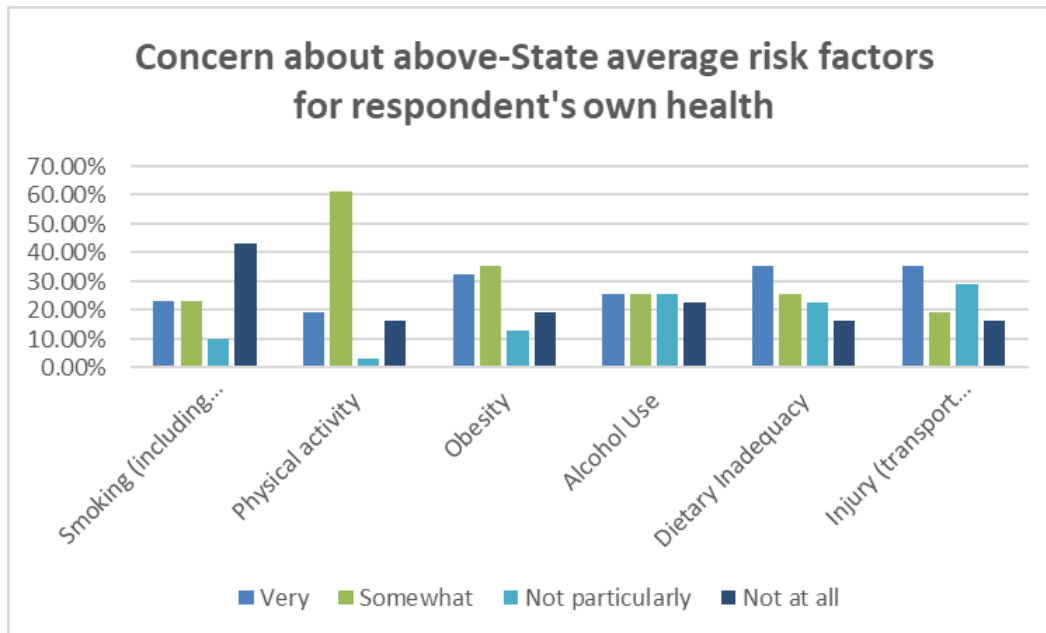
**3.3%**  
Not stated

### BACKGROUND

**73.33%**  
Non-indigenous  
Australian

**26.66%**  
Non-Indigenous Australian  
& Other/ Live with  
Disability/Carer/Carer &  
Live with Disability





Please see \* below for full descriptors.

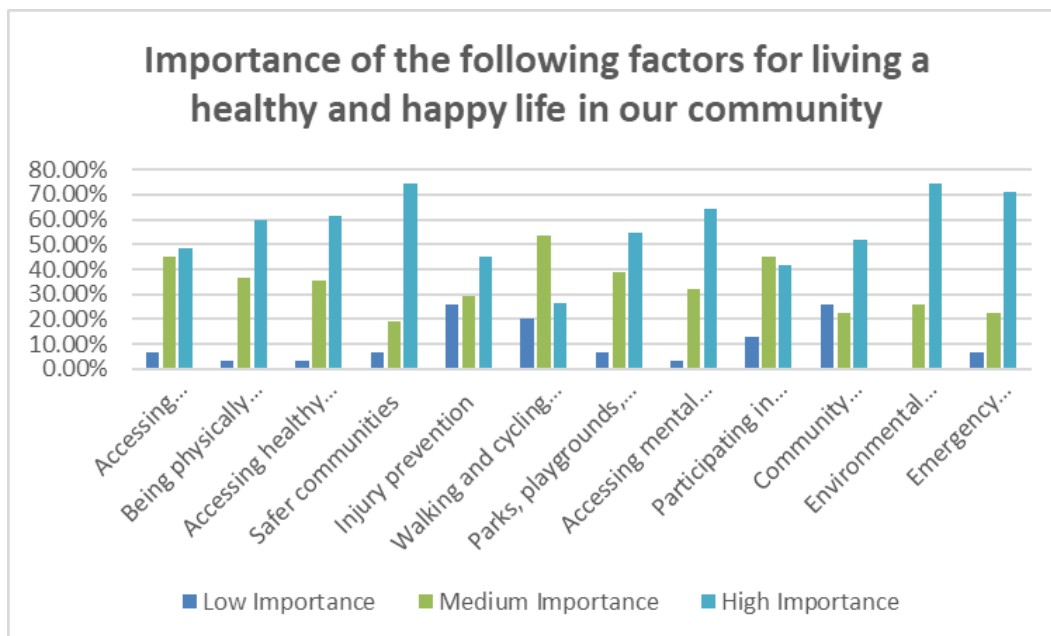
Areas of highest concern for above-State average risk factors for a respondent's own health:

**Physical Activity** – 80.64% either somewhat or very concerned

**Obesity** – 67.74% either somewhat or very concerned

**Dietary Inadequacy** – 61.29% either somewhat or very concerned

\*Smoking (including vaping)/Injury (Transport accidents/intentional self-harm).



Please see \* below for full descriptors.

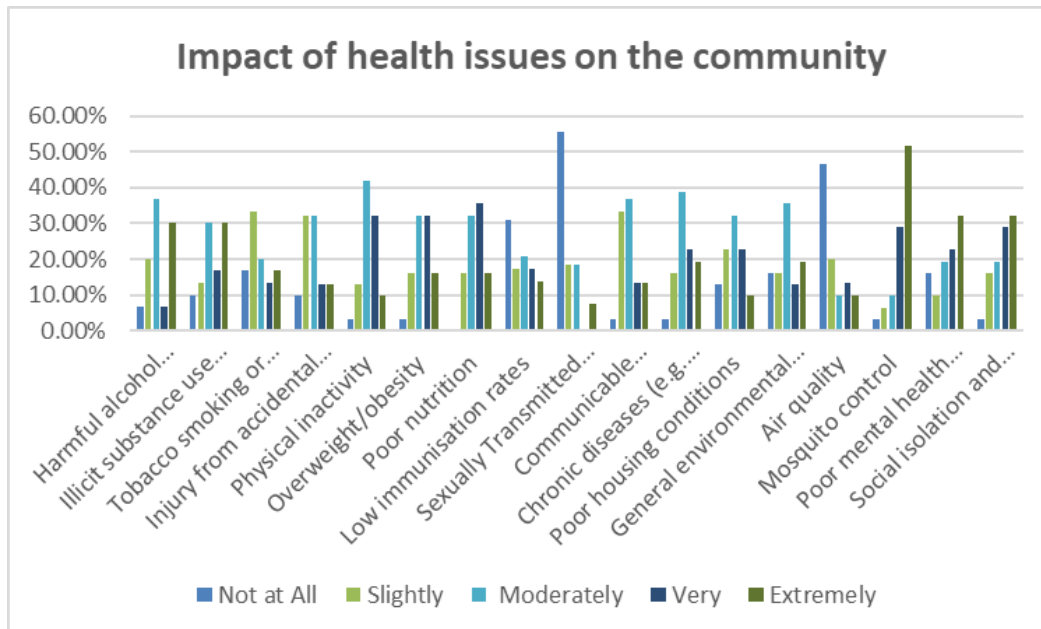
Factors of highest importance for living a healthy and happy life in your community:

**Safer communities** – high (74.19%)

**Environmental health protection (i.e. mosquito control, good quality air)** – high (74.19%)

**Emergency preparedness** – high (70.97%)

\*Accessing community recreation facilities/Being physically active/Accessing healthy food options/Walking and cycling paths/Parks, playgrounds, and open spaces/Accessing mental and general health services/Participating in community activities and events/Community vaccinations and health screening/Environmental health protection (i.e., mosquito control, good quality air)/Emergency preparedness.



Please see \* below for full descriptors.

Health issues rating highest for impacting the community:

**Mosquito control** – very (29.03%) to extremely (51.61%)

**Poor mental health conditions** (e.g. stress, anxiety, depression) – very (22.58%) to extremely (32.26%)

**Social isolation and poor social connection** – very (29.03%) to extremely (32.26%)

\*Harmful alcohol consumption/Illicit substance use (e.g., marijuana, methamphetamine), Tobacco smoking or vaping/Injury from accidental falls/Sexually Transmitted Infections (STI's)/Communicable diseases (e.g., 'flu)/General environmental health conditions (e.g., water safety, waste management, litter)/Poor mental health conditions (e.g., stress, anxiety, depression)/Social isolation and poor social connection.

## THE COMMON THEMES OF WHAT RESPONDENTS WOULD LIKE TO SEE OCCUR TO IMPROVE HEALTH AND LIVEABILITY IN THE COMMUNITY INCLUDED:

- Access to services
- Non-sport social opportunities
- Arts and creative
- Youth opportunities

# EVALUATION & REPORTING

## EVALUATION

Monitoring progress in public health improvements can be broken into short, medium and long term evaluation, as follows:

**Short term** - changes in health policy or practice e.g., an Initiative being implemented

**Medium term** - changes in health behaviour e.g., demonstrated public engagement in implemented Initiatives such as increased use of improved pathways/attendance at health related workshops

**Long term** - changes in prevalence of chronic diseases e.g., statistical evidence of an increase in consumption of fresh food/decline in tobacco or alcohol use (using data sources such as the Australian Food Atlas or Department of Health *Health and Wellbeing* reports).

## REPORTING

In accordance with section 22 of the *Public Health Act 2016 (WA)*, local governments are required to report to the Chief Health Officer on the performance of functions under the *Public Health Act 2016 (WA)*. As part of this reporting process, the Chief Health Officer may require local governments to report on whether they have produced their PHP.

The Shire of Woodanilling will review and report on its Public Health Plan on an annual basis and undertake its first full five-year review/replacement as of May 2031.



# SHIRE OF WOODANILLING PUBLIC HEALTH AND WELLBEING INITIATIVES

(Source documentation: SCP = Strategic Community Plan Priority Project/DAIP = Disability Access and Inclusion Plan Outcome/CS = Community Survey)

Health Area	Initiative	Alignment with SCP/DAIP/CS	Expected outcome(s)	Measure	Timeline	Role	Potential External Stakeholders	Alignment to State PHP objectives and priorities
1. Improving health outcomes associated with lack of physical activity, obesity and dietary inadequacy	1.1 Advocate with external agencies to provide access to educational resources and increased awareness of physical activity level and nutritional requirements.	CS	Accessible health and wellbeing literature in the community/ advertising via various local media sources and in public facilities.	Evidence of literature in local public facilities and advertising in media outlets highlighting the benefits of meeting recommended physical activity levels and dietary requirements.	2025-26 ongoing	Shire	Population Health - WA Country Health Service Great Southern (PH - WACHS)  Healthway  Other public health services	<b>Objectives</b> Promote: Foster strong communities and healthy environments. Prevent: Reduce the burden of chronic disease.  <b>Priorities</b> Health Promotion & Prevention. System Enablers: Improve Health Literacy.
	1.2 Encourage community led coordination of walking group.	CS	Community participation in/ co-ordination of walking group/s.	Evidence of advertising for Expressions of Interest to coordinate a walking group/s and expressions of interest in participation.  Demonstrated participation in walking group.	2026-27 ongoing	Shire initially/ community leader (future)	Community Leaders	<b>Objectives</b> Empower and enable people to live healthy lives – supports behaviours like healthy eating, physical activity, and mental wellbeing.  <b>Priorities</b> Promoting active living and healthy environments.
	1.3 Encourage consumption of healthy fresh food options.	CS	Improved access to healthy fruit and vegetables.	Community participation in access.	2026-27 ongoing	Shire	DoH Healthway	

<p>Cont...</p> <p><b>1. Improving health outcomes associated with lack of physical activity, obesity and dietary inadequacy</b></p>	<p><b>1.4 Advocate</b> with external agencies to provide access to educational resources aimed at reducing alcohol and tobacco consumption, and illicit substance abuse.</p>		<p>Public awareness of the benefits of reducing alcohol and tobacco consumption, and illicit substance abuse/availability of educational resources and information on how to access/who to approach for professional assistance.</p>	<p>Evidence of literature and advertising referencing educational resources and how to access professional public health assistance.</p> <p>Evidence of promotional signage.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>PH - WACHS Healthway  Other public health services</p>	<p><b>Objectives</b> Promote: Foster strong communities and healthy environments. Prevent: Reduce the burden of chronic disease.</p>
								<p><b>Priorities</b> Health Promotion &amp; Prevention. System Enablers: Improve Health Literacy.</p>
<p><b>2. Minimising injury, substance abuse, and alcohol and tobacco use/ Safer community</b></p>	<p><b>2.1 Partner with</b> Western Australian Police (WAPOL) and RoadWise for promotion of road safety advertising campaigns aimed at increasing awareness of safer road use practices.</p>		<p>Public awareness of road safety matters and Roadwise events.</p>	<p>Availability of promotional literature in the community, increased signage, and invitations to participate in RoadWise events.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>WAPOL RoadWise (Western Australian Local Government Association)  Funding bodies</p>	<p><b>Objectives</b> Provide health protection for the community.</p>
								<p><b>Priorities</b> Injury prevention and community safety.</p>
	<p><b>2.2 Partner with</b> WAPOL to attract funding for CCTV.</p>	<p>SCP 1.5 SCP 4.1</p>	<p>Grant funding/ purchase of CCTV.</p>	<p>CCTV within townsite.</p>	<p>2026-27</p>	<p>Shire</p>	<p>WAPOL Funding bodies</p>	<p><b>Objectives</b> Provide health protection for the community – including emergency management.</p>
	<p><b>2.3 Support the</b> training and leadership development of local emergency service volunteers.</p>		<p>Ongoing training and support of local emergency service volunteers.</p>	<p>Demonstrated undertaking of training. Provision of Personal Protective Equipment.</p>	<p>2025-26 ongoing</p>	<p>Shire</p>	<p>Department of Fire and Emergency Services (DFES) Community Volunteers Local fire brigades</p>	
	<p><b>2.4 Improve</b> community awareness of fire preparedness and response.</p>	<p>SCP 4.2</p>	<p>Increased awareness of fire preparedness and response practices.</p>	<p>Availability of educational resources/ advertising/workshop session/s.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>DFES Local fire brigades</p>	



Health Area	Initiative	Alignment with SCP/DAIP/CS	Expected outcome(s)	Measure	Timeline	Role	Potential External Stakeholders	Alignment to State PHP objectives and priorities
Cont... 2. Minimising injury, substance abuse, and alcohol and tobacco use/ Safer community	2.5 Conduct fire hazard <b>mitigation</b> and equipment inspections.	SCP 4.3	Increased community safety.	Compliance with Fire Break Order.	2025-26 ongoing	Shire	DFES Local fire brigades	
	2.6 Update and <b>deliver</b> Council's Fire Management Plan (apply for grant funding if available).	SCP 4.4	Enhanced community fire safety.	Grant application. Fire Management Plan.		Shire	DFES Local fire brigades	
	2.7 <b>Ensure</b> Shire facilities are smoke free and appropriate signage is in place.		Increased awareness and healthy environments/ compliance with legislation.	Signage evident.			Department of Health (DoH)	
3. Regulatory Services (Building, Planning, Environmental Health)	3.1 Regular inspections, <b>monitoring</b> , and enforcement of food and water safety, on-site wastewater management, pool fencing, noise and nuisance impacts for homes and businesses, in accordance with statutory legislative requirements.		Business conducted within legislated requirements.	Minimised complaints of non-compliance or risk to community safety and wellbeing.	2025-26 ongoing	Shire	DoH Dept of Water and Environmental Regulation (DWER)	<b>Objective</b> Provide health protection for the community – regulatory and environmental health functions, communicable disease control, food safety, water quality and emergency management. <b>Priority</b> Environmental health and liveable communities - safe water, housing, climate change and health impacts.
	3.2 <b>Ensure</b> Council decisions and Shire approvals regarding development and building comply with standards and statutory legislation.		As above					

<p>Cont...  <b>3. Regulatory Services (Building, Planning, Environmental Health)</b></p>	<p><b>3.3 Investigate</b> the feasibility of water capture and storage for the development of Queerearrup Lake.</p>	SCP 3.4	Determination of feasibility/ security of water supply.	Feasibility report.	2026-27 to 2027-28	Shire	DWER	<p><b>Priority</b>  Environmental health and liveable communities – safe water, climate change and health impacts.</p>
	<p><b>3.4 Investigate</b> alternative energy efficient systems for Shire facilities.</p>	SCP 6.1	Identification of any suitable, alternative energy systems.	Report by energy consultant/advisor.	2026-27 to 2027-28	Shire		
	<p><b>3.5 Water security – continue working with</b> DWER on water security projects.</p>	SCP 6.3	Optimising of water supplies/ security where possible.	Reports to Council as water security projects undertaken.	2026-27 ongoing	Shire	DWER DoH	
	<p><b>3.6 Monitoring of</b> disease transmission from animals to humans and associated safety risks.</p>		Minimal episodes of disease transmission.	Consultant reports. Department of Health evidence/feedback.	2025-26 ongoing	Shire	DoH	<p><b>Objective</b>  Provide health protection for the community – regulatory and environmental health functions, includes communicable disease control.</p>
	<p><b>3.7 Monitoring of</b> blood-feeding vectors (e.g. ticks, sandflies, mosquitoes).</p>	CS	Minimisation of outbreaks.	Test results/ Community feedback.	2025-26 ongoing	Shire	DoH	
	<p><b>3.8 Carry out mosquito mitigation</b> activities including non-spray options and action as seasonally required.</p>		Minimisation of outbreaks.	Test results/ Community feedback.	2025-26 ongoing	Shire	DWER	
	<p><b>3.9 Restore and protect</b> our landscape and remnant bushland.</p>	SCP 5.1	Maintained and/ or improved natural resources.	Sustained natural resources/prevention of deterioration.	2025-26 ongoing	Shire	Landcare DWER	<p><b>Priority</b>  Environmental health and liveable communities - climate change and health impacts.</p>



Health Area	Initiative	Alignment with SCP/ DAIP/CS	Expected outcome(s)	Measure	Timeline	Role	Potential External Stakeholders	Alignment to State PHP objectives and priorities
Cont.. 3. Regulatory Services (Building, Planning, Environmental Health)	<b>3.10 Improve waste</b> management including <b>implementation</b> of landfill review recommendations and investigate long term management options.	SCP 5.2	Implementation of landfill review recommendations/ investigation of long-term management options.	Report/s on progress. Investigation results.	2025-26 ongoing	Shire		<b>Objective</b> Provide health protection for the community – regulatory and environmental health functions.
	<b>3.11 Implement</b> improved recycling practices through Council led initiatives and community education.	SCP 5.3	Availability of increased Council led recycling options. Provision of educational literature/ local advertising relating to recycling initiatives.	Evidence of recycling options and uptake of same/promotional signage.	2026-27 ongoing	Shire	Waste Authority of WA	
	<b>3.12 Contribute</b> to climate related projects with the Great Southern Voluntary Regional Organisation of Councils (VROC).	SCP 5.4	Liaison with Great Southern VROC/ contribution to projects.	Evidence of climate related projects/ documentation (e.g., meeting minutes).	2025-26 ongoing	Shire	Landcare Great Southern VROC	<b>Priority</b> Environmental health and liveable communities - climate change and health impacts.
	<b>3.13 Support</b> Natural Resource Management programs in the Shire.	SCP 5.5	Support for Landcare.	Projects undertaken by Landcare Officer.	2025-26 2026-27	Shire	Landcare	
	<b>4. Provide recreation facilities and activities across all age and ability demographics</b>	<b>4.1 Deliver</b> and support events and social activities.	SCP 1.1/ CS	Positive impact on mental health and wellbeing.	Community attendance at events and social activities.	2025-26 ongoing	Shire	
<b>4.2 Support</b> the Woodanilling Town Team to become an active community group in the Shire to complete community projects such as the railway station upgrades.		SCP 1.4	Community engagement/ positive impact on mental health and wellbeing.	Woodanilling Town Team activities undertaken.	2025-56 ongoing	Shire	Community Leaders Various State Government departments	<b>Objective</b> Empower and enable people to live healthy lives – supports behaviours like mental wellbeing.
<b>4.3 Support</b> events that benefit our community wellbeing, foster participation and volunteering.		SCP 2.2	As above	Community/ volunteer involvement in events.	2025-26 ongoing	Shire	As above	<b>Priority</b> Mental Health and Wellbeing – community resilience, social connection, and early intervention.

<p><b>Cont..</b>  <b>4. Provide recreation facilities and activities across all age and ability demographics</b></p>	<p><b>4.4 Research</b> funding opportunities for recreational/social activities – sport (variety), art and music, other non-sport activities across all age groups.</p>	<p>CS</p>	<p>Increased community participation in recreational and social activities.</p>	<p>Grant income/ increase in variety of activities.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>Various funding bodies</p>	
<p><b>4.5 Partner</b> with the Woodanilling sporting community to attract funding to upgrade oval lighting.</p>	<p>SCP 3.1</p>	<p>Improvement to recreational facility/ continued usage.</p>	<p>Installation of superior lighting.</p>	<p>2025-26 to 2027-28</p>	<p>Shire</p>	<p>Woodanilling sporting community Various funding bodies</p>		
<p><b>4.6 Work with</b> the community to develop social outlets in the Shire.</p>	<p>SCP 3.6</p>	<p>Higher community participation in social activities.</p>	<p>Increased quantity of social outlets.</p>	<p>2025-26 ongoing</p>	<p>Shire</p>	<p>Community Leaders</p>		
<p><b>4.7 Improve</b> public spaces and gardens to beautify the natural environment and encourage outdoors activity.</p>	<p>CS</p>	<p>Reduction in screen time, increased access to restorative environment/ wellbeing.</p>	<p>Higher number of people spending time in outdoor activities.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>DWER Landcare</p>	<p><b>Objectives</b> Empower and enable people to live healthy lives – supports behaviours like physical activity and mental wellbeing.</p>	
<p><b>4.8 Collaborate</b> with the Woodanilling Town Team to improve Shire and aesthetics in a coordinated manner.</p>	<p>SCP 12.2</p>	<p>Increased community participation in recreational and social activities.</p>	<p>Woodanilling Town Team engagement/ improved aesthetics.</p>	<p>2026-27 ongoing</p>	<p>Shire</p>	<p>Community Leaders</p>	<p><b>Priority</b> Promoting active living and healthy environments. Health equity and priority populations - Aboriginal health, vulnerable and disadvantaged groups.</p>	
<p><b>4.9 Continued improvement</b> to foot and bike paths, and accessibility to recreational facilities and equipment/<b>Develop and implement</b> an accessible network of pathways in the Shire.</p>	<p>DAIP 1.2/ CS  SCP 10.4 DAIP 2.2</p>	<p>Increased safety, physical activity, and ease of access to recreational facilities.</p>	<p>Increased foot/ bike path usage/ decrease in public road surface use for these purposes. Improved access to facilities.</p>	<p>2025-26 to 2027-28</p>	<p>Shire</p>	<p>Various funding bodies Disability Services Commission</p>		



Health Area	Initiative	Alignment with SCP/ DAIP/CS	Expected outcome(s)	Measure	Timeline	Role	Potential External Stakeholders	Alignment to State PHP objectives and priorities
<b>Cont..</b> <b>4. Provide recreation facilities and activities across all age and ability demographics</b>	<b>4.10 Investigate</b> conversion of tennis courts to multipurpose courts.	SCP 3.3	Increased variety of recreational activity options.	Evidence of advice/ costings Evidence of conversion.	2025-26/ 2026-27	Shire	Community sporting bodies Department of Sport and Recreation (DSR) Funding bodies	<b>Objectives</b> Empower and enable people to live healthy lives – supports behaviours like physical activity, and mental wellbeing.
	<b>4.11 Apply</b> for external funding to establish local trails.	SCP 3.7 DAIP 1.3	Increased community participation in local accessible recreational activities.	Funding application. Evidence of local trails.	2026-27 ongoing	Shire		
	<b>4.12 Provide support</b> towards regional recreational facilities.	SCP 3.2	Use of regional facilities/ recreation and social connection with broader regional community.	Meeting minutes/ budgetary evidence/ advertising.	2025-26 ongoing	Shire	Regional Shires DSR	<b>Priorities</b> Promoting active living and healthy environments Health equity and priority populations – Aboriginal health, vulnerable and disadvantaged groups.
<b>5. General Health</b>	<b>5.1 Support local</b> and regional health services.	SCP 2.1	Improved access to health services within the local or regional setting.	Continuing/increased health services and visiting health professionals within the region.	2025-26 ongoing	Shire	PH – WACHS DoH Regional health facilities	<b>Objectives</b> Empower and enable people to live healthy lives – supports behaviours like physical activity, and mental wellbeing.
	<b>5.2 Research</b> likelihood of attracting regular visiting allied health services to Woodanilling. If potentially feasible, establish if community interest would be sufficient to warrant exploring further/consider suitable venue.	CS	Improved/easier access to allied health services in a local setting/ increasing awareness of healthy lifestyle choices.	Documentation evidencing approaches to various health organisations. If potentially feasible, conduct community survey to establish level of community interest. Increased health and wellbeing literature and health services information and promotion (advertising) in the community.	2026-27 ongoing	Shire	As above	<b>Priorities</b> Promoting active living and healthy environments. Health equity and priority populations – Aboriginal health, vulnerable and disadvantaged groups.

<p><b>5.3 Improving access</b> to educational resources and upcoming public health services by partnering with external agencies and providing contact details (on Shire website and in Wongi newsletter) including external agency flyers (healthy lifestyle) in public facilities and approaching local businesses/organisations to display upcoming health service posters.</p>	CS	Greater community awareness of, and easier access to, health services and healthy lifestyle resources.		2026-27 ongoing	Shire	As above	
<p><b>5.4 Explore</b> the option of providing allied health (external agencies) led workshops/ education sessions in Woodanilling on healthy cooking/injury prevention measures/mental health strategies.</p>	CS	Greater community awareness (through tuition) of healthy lifestyle choices and strategies.	Evidence of research into feasibility/possibility of tuition being made available locally and, if feasible, coordination of tuition.	2026-27	Shire	As above	
<p><b>5.5 Establish</b> level of interest in using regular transport (e.g., bus hire) to neighbouring towns for appointments, access to fresh groceries, social events etc. If sufficient interest, research transport options and feasibility.</p>		Improved access to fresh fruit and vegetables, increased social interaction, access to regional facilities.	Evidence of research into feasibility/possibility of regular transport being available and gauging of level of community interest in using such a service.	2026-27 ongoing	Shire	As above Transport providers	
<p><b>5.6 Advocate</b> for external agencies to provide mobile health screening, immunisation clinics etc. in Woodanilling townsite.</p>	CS	Easier/increased access to health screening, immunisation clinics and other services.	Documented evidence advocating/researching possibility of health services being provided in Woodanilling townsite.  Actual services provided in Woodanilling townsite, if possible/feasible.	2026-27 ongoing	Shire	As above	

Cont..  
5. General Health





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