



Environmental Health Standing Committee (enHealth) of the
Australian Health Protection Principal Committee

Preventing disease and injury through healthy environments

**Environmental Health Standing
Committee (enHealth) Strategic Plan
2016 to 2020**

Version Control

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1 Introduction

The scope of environmental health encompasses physical, chemical and biological factors in the environment, that potentially or currently have an impact on the health of individuals and populations, as well as the communities in which people live. The World Health Organisation (WHO) estimates that environmental factors account for an estimated 24% of the global disease burden and 23% of all deaths. Air quality, drinking water quality, food safety, chemical use and soil and ground water contamination contribute to these health outcomes.¹

National environmental health policy seeks to ensure a health perspective informs the assessment and management of those environmental factors. The purpose of this document is to set out the strategic priorities of the Environmental Health Standing Committee (enHealth) of the Australian Health Protection Principal Committee (AHPPC) for the period 2016 to 2019.

enHealth seeks to provide a national focus on maintaining and improving the health of Australians by promoting a healthy environment and by preventing premature death, avoidable illness and disability caused by non-infectious, non-occupational environmental and related factors.

We are especially committed to addressing inequalities in health status due to environmental factors, particularly in Aboriginal and Torres Strait Islander communities, and safeguarding the health of populations that are particularly vulnerable to certain environmental hazards - children, the elderly, and people with disabilities.

1.1 What is Environmental Health

The WHO describes *Environmental Health* as:

Environmental health addresses all the physical, chemical and biological factors external to a person, and all the related factors impacting behaviours. It encompasses the assessment and control of those environmental factors that can potentially affect health. It is targeted towards preventing disease and creating health-supportive environment².

The Australian Government Department of Health also uses the WHO definition of environmental health and goes on to state that:

Environmental health involves those aspects of public health concerned with factors, circumstances, and conditions in the environment or surroundings of humans that can exert an influence on health and well-being.

Environmental health provides the basis of public health. Improvements in sanitation, drinking water quality, food safety, disease control, and housing conditions have been central to the significant improvement in quality of life and longevity experienced over the last hundred years.

Environmental health practice addresses emerging health risk arising from the pressures that human development places on the environment.³

¹ World Health Organisation, 2016, *Environmental Health*. [Online]. [Accessed 2 May 2016]

² Ibid

³ Australian Government Department of Health 2014, *Overview of environmental Health* [online] [accessed 7 July 2016]

1.1.1 Environmental Public Health

Environmental public health is a term now in common use in the United States⁴ and the United Kingdom to describe public health work including the surveillance, investigation, control and prevention of non-communicable environmental hazards and their associated health effects (especially chemicals, radiation, and physical hazards). Environmental public health also embraces work relating to the wider impact of environmental determinants on human health.⁵

Environmental public health sits within the broader scope of health protection functions, which seek to reduce the likelihood and minimise the consequence of both known and unknown risks that arise, either directly or indirectly from hazards such as infectious diseases, chemicals, radiological agents, natural disasters and other mass casualty events (including acts of terrorism). Health Protection encompasses all health hazards and associated risks that require a range of prevention, planning, response and recovery programs and other risk management treatments

Environmental public health (also called environmental health) programs are located in all state and territory health departments around Australia. Environmental public health is a core discipline within the public health portfolio overseen by Chief Health Officers (or equivalent) in jurisdictions.

This public health protection function plays a key advisory role to state and national government working together with public health physicians and their respective Chief Health Officers to ensure that public health is protected from hazards in the environment.

The work of environmental public health programs focuses firstly on understanding community concerns about health and wellbeing in a societal context (i.e. recognising that the environment is one component of many interacting dimensions that affect the health of a population / community). In this context the potential risks to public health are determined and actions, including population health interventions, are proposed to manage these public health risks. The management of environmental public health risks is centred around the provision of advice to communities on protective actions that can be taken to reduce or remove potential exposure to environmental hazards, and control of risks through regulation.

1.2 Managing Environmental Health Risks in Australia

Environmental health risks are largely managed by an array of complementary national and state agencies, all of which contribute to a national system of health protection. In general, risks are managed through regulatory frameworks administered by health and other agencies at the state and territory level. These regulatory frameworks operate within a context of nationally coordinated policy and standard setting, which is coordinated through Ministerial Councils within the Council of Australian Governments (COAG) framework. The Australian Government, through its own legislation, manages those environmental health risks associated with services or facilities it manages.

The following diagram illustrates relevant environmental health related decision making, advisory and regulatory agencies:

⁴ Centers for Disease Control and Prevention and Department of Health and Human Services (United States) 2003, *A National Strategy to Revitalize Environmental Public Health Services*.

⁵ Environmental Public Health Practice Network, 2011 (unpublished) *Environmental Public Health: A position paper for the Health Protection Stocktake*.

Figure 1: Environmental Health Systems in Australia

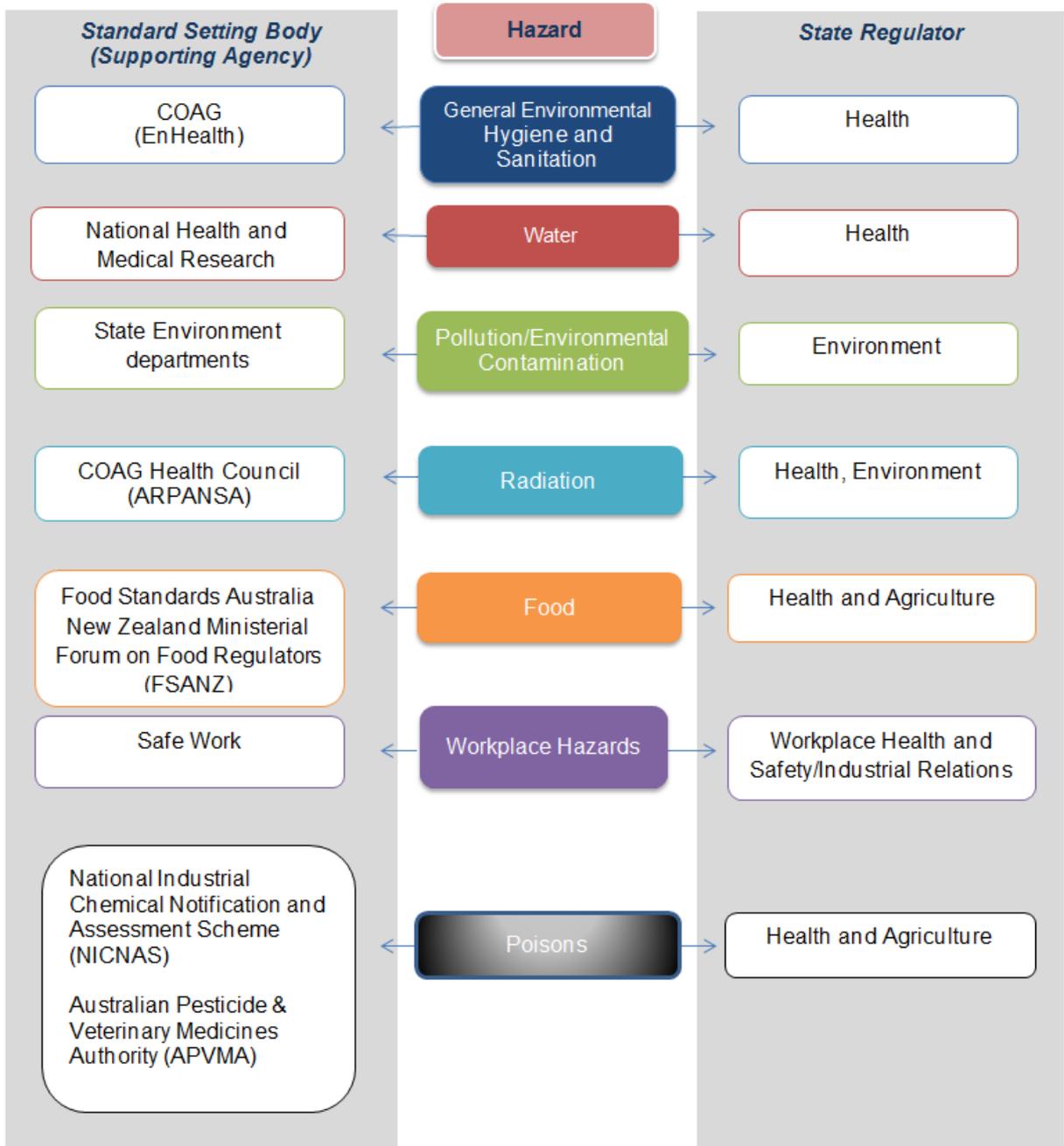


Figure 1

1.3 The role of health agencies in Environmental Health

Environmental health functions within health agencies play a pivotal role in this multi-agency health protection system in Australia. As the above section outlines, it is recognised that a range of agencies have responsibility for regulating environmental factors. However, when health risks emerge, the community expects health agencies to provide specific guidance informed by a clinical perspective.

Historically, all these functions were located in health agencies. Over the 20th century, as the community required a greater investment on these risks, agencies with a specific focus on certain parts of the environmental health system were established. Certain high risk hazards continue to be regulated by health agencies, particularly in partnership with local government. States and Territories vary to the extent to which certain environmental hazards continue to be managed by health or other agencies.

Nevertheless, certain core health responsibilities will always remain with health agencies consistent with their role as being an agency whose primary and sole accountability is the health of the community. This role is unencumbered by the associated responsibilities for industry development etc.

Health agencies, therefore, are the primary advisors to governments at state and national level on whether a particular hazard constitutes a risk to health. Once codified into standards, other non-health agencies are able to administer regulatory schemes to achieve those health standards. Health agencies, therefore, have shifted their focus to more complex situations and to those hazards that are emerging, or more uncommon or novel; where health or environmental standards have been exceeded; during emergency situations; and in relation to activities such as the investigation of non-communicable disease clusters.

Critically, the advisory capacity of environmental public health programs to public health physicians, including Chief Health Officers, informs and enables medical judgement about public health risks to the community.

Environmental public health work is carried out by a range of individuals with qualifications and experience in the fields of public health, environmental science, environmental health, human health toxicology, chemistry, biology, physics, nuclear medicine, public health medicine, epidemiology, risk communication and community engagement.

Environmental public health is a related but distinct field from the practice of environmental protection, which includes a core focus on regulatory tools and compliance with environmental standards to protect the community from pollution and waste, including legacy contamination of the environment.

1.4 About enHealth

National Environmental Health Standing Committee (enHealth) - enHealth is responsible for providing agreed environmental health policy advice, national coordination and support for responding to environmental health issues, consultation with key stakeholders, and the development and coordination of research, information and practical resources on environmental health matters at a national level. It also coordinates health input into the development and amendment of environmental standards.

Most importantly, it provides advice to the Australian Health Protection Principal Committee, which includes Chief Health Officers (or equivalent) across all jurisdictions.

enHealth provides a forum where diverse environmental health expertise from across the nation can be utilised to tackle key environmental health issues that affect the Australian community.

The development of national advice by enHealth is based on significant collaboration and consultation with State and Local government agencies, departments, and organisations that deal with environmental health matters. enHealth's authoritative technical guidance is widely

used by environmental health practitioners, industry and the community to practically and effectively manage environmental health risks.

enHealth operates within the policy framework for health established under the Council for Australian Governments (COAG) as illustrated below:

Figure 2 – Governance of health protection in Australia

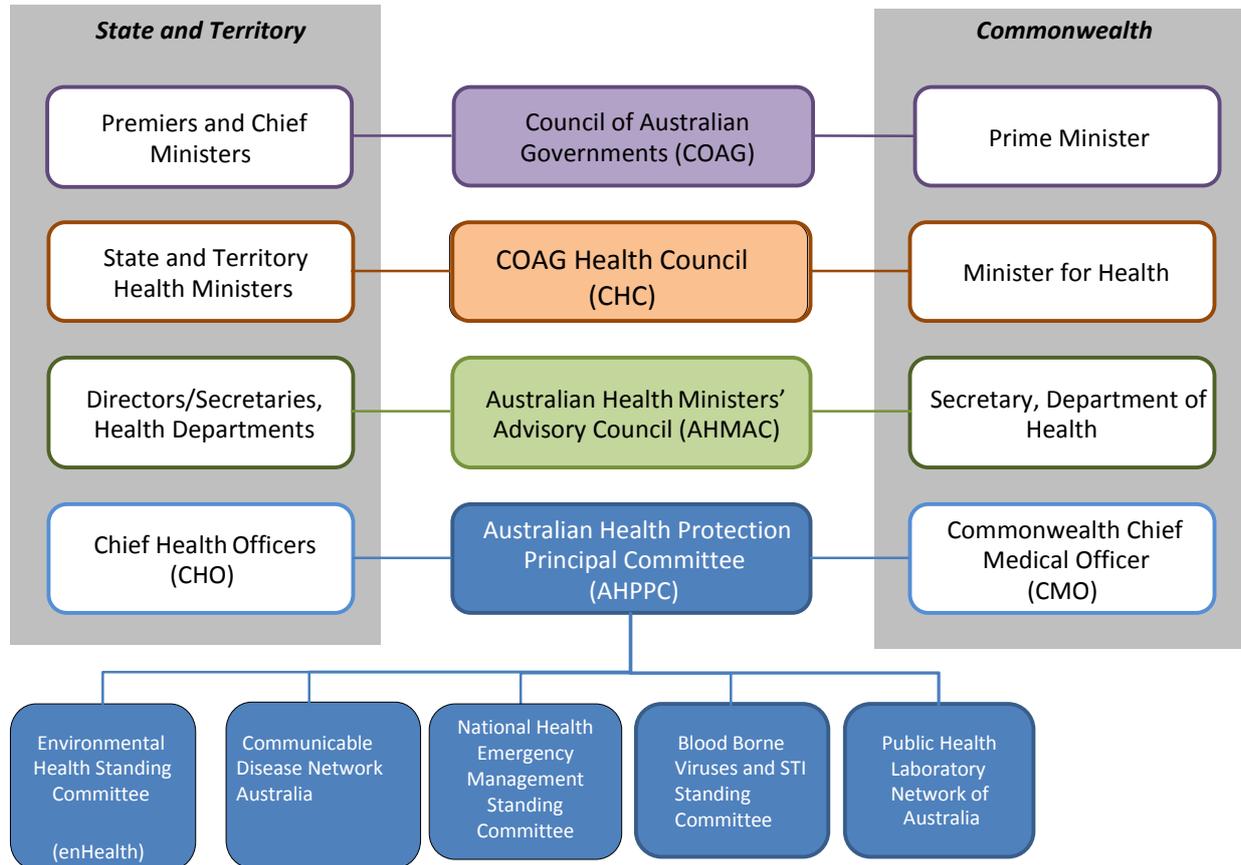


Figure 2 reflects the importance of separate roles for the Commonwealth and States and Territories. It also reflects the shared role provided under the Council of Australian Governments (COAG) framework.

Council of Australian Governments (COAG) - The COAG is the peak intergovernmental forum in Australia, comprising the Prime Minister (Chair), State Premiers, Territory Chief Ministers and the President of the Australian Local Government Association (ALGA). The role of COAG is to initiate, develop and monitor the implementation of policy reforms that are of national significance which require cooperative action by Australian governments.

COAG Health Council (CHC) – (Formerly the Standing Council on Health or ‘SCoH’) comprises ministers of the Commonwealth Government, States, Territories and New Zealand who have responsibility for health. The aim of CHC is to improve health outcomes for all Australians and ensure the sustainability of the Australian health system.

Australian Health Ministers’ Advisory Council (AHMAC) - AHMAC is the advisory body to the COAG Health Council (CHC). Its role is to support the CHC by providing strategic advice on

health issues and by acting as a forum for planning, information sharing and innovation. The members of AHMAC are chief executive officers/secretaries of Commonwealth, State and Territory and New Zealand Departments, who have responsibility for health.

Australian Health Protection Principal Committee (AHPPC) – AHPPC is responsible for the oversight of the Environmental Health Standing Committee Strategic Plan 2016-2018 and associated annual work plan. The AHPPC is also responsible for providing nationally consistent advice to the community and Government on the management of environmental health risks.

enHealth supports and is supported by the work of other committees reporting to the Australian Health Protection Committee as follows:

- The **Communicable Disease Network Australia (CDNA)** is responsible for advising on national coordination of communicable disease surveillance, prevention and control, coordinating the investigation and control of multi-jurisdictional outbreaks of communicable disease, and providing public health response advice in a pandemic or national communicable disease emergency. Environmental factors, such as water or food, may be the source of communicable disease outbreaks.
- The **Public Health Laboratory Network (PHLN)** advises on laboratory testing associated with environmental risk factors
- The **National Health Emergency Management Standing Committee (NHEMS)** addresses the operational aspects of disaster medicine and health emergency management in an all hazards context with a focus on preparedness and response

1.4.1 Enhealth Terms of Reference

In delivering its role, enHealth has the following Terms of Reference:

- provide national leadership, advice and coordination for the development of environmental health policies and related research and other activities;
- advising and making recommendations to AHPPC on environmental health matters;
- to mitigate emerging health threats related to the environment, natural disasters and disasters within an all hazards approach, with a particular focus on recovery operations;
- advising on national environmental health priorities and coordinating the allocation of health resources to these priorities;
- promoting improvement to environmental health and resolving emerging environmental health problems based on best evidence and collective expertise;
- enabling development and adoption by states and territories of national environmental health policies, guidelines and standards;
- consulting and negotiating with other relevant national agencies and committees, on the development of national environmental health priorities and strategies; and
- working to improve Aboriginal and Torres Strait Islander health outcomes.

1.4.2 Membership

enHealth is made up of representatives from Commonwealth, State and Territory health departments; the New Zealand Ministry of Health; and the National Health and Medical Research Council (NHMRC).

1.4.3 Work Plan

enHealth will work to achieve its objectives through projects and activities such as producing publications, providing advice to other stakeholders and conducting workshops and conferences. Its annual work plan will set out specific activities that will contribute to achievement of the strategic agenda outlined in this plan.

1.4.4 Working groups

enHealth delivers its annual work plan with the support of four working groups:

- Working Group on Aboriginal and Torres Strait Islander Health (WGATSIEH)
- Environmental Health Workforce Working Group (EHWWG)
- Technical Working Group on Environmental Health (TWGEH)
- Water Quality Working Group (WQWG)

The terms of reference for these working groups is provided in Appendix 2.

2 Strategic Agenda

The National Environmental Health Strategy 2016-2018 builds on the framework established by previous National Environmental Health Strategies to identify the Australian environmental health sector's role in developing and supporting infrastructure for health protection.

2.1 Objective

The Environmental Health Standing Committee (enHealth) of the Australian Health Protection Principal Committee (AHPPC) seeks to provide a national focus on maintaining and improving the health of Australians by promoting a healthy environment and by preventing premature death and avoidable illness and disability caused by non-infectious, non-occupational environmental and related factors.

We are especially committed to addressing inequalities in health status due to environmental factors, particularly in Aboriginal and Torres Strait Islander communities, and safeguarding the health of populations that are particularly vulnerable to certain environmental hazards - children, the elderly, and people with disabilities.

2.2 Principles

The following enHealth principles are consistent with those detailed in the AHPPC strategic plan and encompass the following.

All hazards approach - This means that health protection work led by AHPPC and assisted in delivery by enHealth needs to account for all health protection threats and hazards in accordance with an AHPPC approved Health Protection Framework.

Risk based approach - A risk based approach underpins management of health protection in Australia. This means a standardised approach to the classification, identification and management of environmental health risks, with clear delineation of risk mitigation responsibilities.

Principle of prevention – To the extent possible, emergent health risks and threats are better mitigated through hazard minimisation and exposure reduction strategies – requiring a commensurate focus on prevention as well as preparedness, response and recovery

Shared responsibility - This principle identifies the importance of health protection being managed across jurisdictions, and between the state and national division of responsibility. The principle emphasises the importance of inter-dependencies to deliver improved health protection outcomes for all Australians.

Improving Aboriginal and Torres Strait Islander health – This principle highlights the focus of enHealth through the Working Group on Aboriginal and Torres Strait Islander Environmental Health (WGATSIEH) in improving environmental health conditions across indigenous communities through the development of relevant resources to support environmental health practitioners and providing appropriate responses to strategic national policies.

2.3 Challenges, Threats and Opportunities

- Environmental health necessarily works with and through sectors outside of health to ensure public health protection. enHealth has a wide range of connections with other public and private sector entities, including environment, utilities, Aboriginal communities, local government and universities that makes it an effective broker between these sectors and the health sector.
- Environmental health activities often taken the traditional approach of responding to environmental threats to health as they emerge, without necessarily developing integrated responses or addressing threats beyond the currently observable. This may function well for issues such as asbestos contamination but for emerging global environmental health threats, such as climate change, a different response is required. The nature of these threats implies that the response needs to be anticipatory, integrated, and requires the consideration of higher level determinants and indirect pathways.
- Climate change is an emerging threat for health. International efforts for temperature increase to stabilize at below 2°C above pre-industrial levels will not eliminate climate change impacts on health. An anticipatory response requires actions to minimize expected climate change induced risks and impacts. An integrated approach requires an understanding of the interrelations between risk factors which have climate change as a main driver. Examples include health impacts through climate induced changes in water and food quality and access, air pollution, and extreme climate events. Higher level determinants, and their complex pathways to health, are often outside the scope of action of the health sector but they need to be identified to promote action, and would include, for example, social determinants of health (e.g. vulnerable communities); relevant policies (such as those in energy, transport and industry); and demographic and social changes.
- Globalisation, coupled with global environmental changes, accelerates the potential for emerging or re-emerging risks. One example is the potential for certain species of disease vectors (such as *Aedes albopictus*, an efficient vector for dengue, chikungunya, zika and yellow fever) to establish themselves in areas suitable for their survival and expansion. Land use changes, together with climate pressures, create conditions for increased impacts from extreme events such as drought, floods, storms, heatwaves, bushfires and coastal erosion, all of which with possible health impacts.
- Emergency or rapid response to novel risks (e.g. PFAS) need coordinated approaches among jurisdictions, and include coordinated risk communication to communities, the private sector and government agencies. A register of emerging and potential risks would assist in coordinating early and agreed response.
- The environmental health workforce is limited. It is insufficient to cover current environmental health problems and unprepared to tackle emerging issues. Action is needed to attract students to the profession, and to provide them with the knowledge to respond to current and emerging issues. The shortage of Aboriginal and Torres Strait Islander environmental health professionals needs special attention.
- Environmental health's multidisciplinary nature means that it can bring a range of expertise to bear on environmental health issues, helping better characterise problems and develop solutions. enHealth is uniquely positioned to utilise expertise

from across Australia and New Zealand ranging from engineering to entomology, unified by a focus on protecting the health of the community. As emergent public and environmental health issues grow in complexity, it is essential to maintain access to the diverse expertise required to effectively manage them.

- Much of enHealth's work on behalf of AHPPC is of high public exposure and therefore subject to significant scrutiny. The guidance and advice provided on environmental health issues such as asbestos, PFAS and legionella has withstood this scrutiny, growing AHPPC's and enHealth's reputation as a source of evidence based and pragmatic advice to deal with environmental health issues affecting the nation.
- Environmental health action protects the community from environmental risks to their health every day. The representation on enHealth, in their roles as regulators and advisors to governments, provides the capacity to translate evidence into action to prevent health problems occurring or tackle them when they do. enHealth also provides one of the key opportunities for harmonising environmental health approaches between jurisdictions for regulating industries to ensure public health protection.

2.4 Key Focus areas

enHealth's work over the next 3 years will contribute to the Australian Health Protection Principal Committee's objectives, through action on the following areas.

1. Timely coordinated evidence based response on environmental health issues of national concern.
2. Development and dissemination of practical and evidence based guidelines to support nationally consistent risk communication and risk management of significant environmental health issues of concern to the community.
3. National science policy and practice frameworks for environmental health.
4. Sufficient and appropriately skilled workforce to address future environmental health challenges.
5. Strengthened workforce practice to address health inequalities arising from environmental hazards in Aboriginal and Torres Strait Islander communities.
6. Nationally consistent frameworks for public and environmental health regulation.
7. Effective networking and partnerships with other stakeholders to ensure a coordinated approach in addressing environmental risks to health.

3 Focus Area Plans

3.1 Focus Area 1: Timely advice to support a coordinated response to environmental health issues of national concern

States and Territories have recognised the challenges of managing environmental health issues that are prevalent nationally. Variable response across jurisdictions can undermine effective control and communication of risk. For example, there is increasing debate on environmental health issues such as asbestos risk in bushfires, coal seam gas, fluoride fortification of public water supplies and environmental health risk communication which can impact public perceptions considerably.

All of the above create a compelling argument for a strong and effective approach to national communication, particularly as enHealth is the most “outward facing” or community-connected standing committee under AHPPC. This includes improved responsiveness to short term challenges that require national leadership and hence communication, through to input to longer term public debate.

enHealth enhances communication and community confidence that health risks are managed through the development of advisory statements, guideless and protocols.

Table 1

Item	Strategy	How we do this
1.1	Ensure that enHealth and AHPPC governance mechanisms are flexible enough to ensure that enHealth's advice can be developed and approved rapidly to ensure relevance.	Develop and implement a National Environmental Health Response Plan.
1.2	Ensure that enHealth and AHPPC are seen as Australia’s definitive source of information on environmental health issues and practice.	Rapid development of advice on health risks associated with emerging environmental health issues of concern across Australia for utilisation by AHPPC and jurisdictions, other agencies, industry and the community. Ensure that the information developed by enHealth is readily understood by and accessible to the Australian community.

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Item	Strategy	How we do this
		<p>Provide inter-jurisdictional assistance to assess human health risks and provide guidance to AHPPC, governments and the community on how to manage them.</p> <p>Proposal for improving recognition of enHealth approved by AHPPC</p>

3.1.1 How we measure success

- Adoption of advice on specific hazards by AHPPC.
- Advice from AHPPC and health agencies is adopted when managing critical environmental issues
- Resource sharing arrangements are established to support response to incidents.
- Mechanisms for advice development, peer review and approval for public release developed.

3.2 Focus Area 2: Evidence based guidelines

Ensuring that environmental health issues are effectively managed is dependent on the assessment of the evidence and the provision of clear advice. Environmental health practitioners, other agencies, industry and the community rely on up-to-date advice to support their efforts in controlling risks and enHealth plays an important role in the provision of guidelines on particular environmental hazards.

Item	Strategy	How we do this
2.1	Development and maintenance of a suite of practical and evidence based guidelines to support nationally consistent risk communication and risk management of common and significant environmental health issues of concern.	<p>Develop evidence based practice guidelines on specific environmental hazards. Current priorities include</p> <ul style="list-style-type: none"> - Health advice in response to bushfires - Managing risks associated with vapour intrusions - Risks associated with extreme sports events

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Item	Strategy	How we do this
		<ul style="list-style-type: none"> - Remediation of Clandestine Laboratories <p>Update existing guidelines to reflect current evidence. Current priorities include:</p> <ul style="list-style-type: none"> - Non-occupational noise guidelines - National guidelines on water recycling.
2.2	Identify and exploit opportunities for national leadership in areas of environmental health importance.	<p>Establish relationships with existing non-health bodies tasked with managing key environmental health issues.</p> <p>Identify opportunities for more formalised connection with entities responsible for water regulation, operation and research.</p>
2.3	Support national work on climate change adaptation	<p>Provide guidance on the management of public health risks associated with natural disasters, heat and food safety.</p> <p>Build workforce capacity to manage incidence of incidents, whose frequency is increasing due to climate change.</p>

3.2.1 How we measure success

- Number and currency of enHealth guidelines
- Usage of enHealth guidelines

3.3 Focus Area 3: Environmental health related science policy

One of the most critical issues faced by health agencies in their role of provision of advice to the community and stakeholders on the health risk associated with particular environmental hazards is determining how to assess evidence. Risk assessors in government, and in the private sector require guidance on what are appropriate assumptions to make to take into account Australian conditions.

enHealth’s *Health Risk Assessment Guidelines* is the cornerstone framework for this work in Australia and is widely used and cited across government agencies and by industry and the community. enHealth supports these guidelines through the maintenance of a range of documents to support risk assessment practice.

Item	Strategy	How we do this
3.1	Promote valid and consistent environmental health decision making on novel risks	Development and maintenance of a suite of documents to guide nationally consistent approaches to risk assessment and risk management decision making including: <ul style="list-style-type: none"> - enHealth Health Risk Assessment Guidelines - enHealth Health Impact Assessment Guidelines - Australian Exposure Factor Guide.
3.2	Support effective management of a community’s health concerns due to environment contamination incidents	Update and enhance enHealth guidance on community engagement

3.3.1 How do we measure success

- Document uptake

3.4 Focus Area 4: Better Skilled Environmental Health Workforce

The current environment is characterised by rapidly increasing pressures on the environmental health workforce and ongoing constraints on the education sector to deliver the skills and knowledge required to effectively manage contemporary and emerging environmental health issues. This particularly applies across the environmental health workforce spectrum, especially to the availability of Environmental Health Officers in local government authorities servicing rural and remote settings and high end epidemiological and toxicological expertise within parts of the environmental health sector.

While enHealth has limited direct control in this focus area, its strategic priorities are focussed on targeting and influencing outcomes across education, industry and professional sectors that influence the environmental health workforce. Key considerations involve both capacity and capability leading to a better skilled workforce across environmental health. These considerations have shaped the strategies set out below.

Item	Strategy	How we do this
4.1	Protect the health of the Australian community by supporting the maintenance of a sufficient and appropriately skilled environmental health workforce.	<p>Agree and promote the essential skills and knowledge required by the Australian environmental health workforce by:</p> <ul style="list-style-type: none"> a) Identifying the core competencies for key environmental health specialist and regulatory science roles including toxicology and epidemiology via a needs assessment. b) Produce national guidance to support the addressing of key workforce issues in the area of specialist and regulatory science <p>Monitor the environmental health workforce in Australia and identify current or future shortages by:</p> <ul style="list-style-type: none"> c) Coordinating the collection of key workforce demand and supply parameters. d) Liaise with universities and professional bodies to understand workforce dynamics and career path.

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Item	Strategy	How we do this
4.2	Ensure the effective deployment of environmental health technical capacity across Australia to protect the health of the community.	1) Maintain national expertise and experience in environmental health risk assessment and management

3.4.1 How we measure success

- Needs assessment of regulatory science roles conducted
- Relevant guidance to support the addressing of key strategic priorities
- Workforce demand and supply determined based on needs assessment
- Opportunities to address supply issues identified
- Broad jurisdictional representation on TWGEH.

3.5 Focus Area 5: Promote equitable access to healthy environments for Aboriginal and Torres Strait Islander people

The contribution of environmental health to closing the gap in health status between Aboriginal and Torres Strait Islander people is best expressed in the following policy principles endorsed by Health Ministers in 2010.

1. Good environmental health conditions are an essential requirement for maintaining and improving the health of Aboriginal and Torres Strait Islander communities.
2. Policy and services development and implementation for Aboriginal and Torres Strait Islander Environmental Health must involve cross portfolio consultation and engagement, where appropriate, acknowledging that environmental health outcomes require co-ordinated input and support from many areas.
3. Each Aboriginal and Torres Strait Islander community¹ should benefit from the services of an Aboriginal and Torres Strait Islander Environmental Health program.

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4. The employment of trained Indigenous environmental health practitioners, or access to an equivalent appropriate and skilled environmental health program, is the minimum essential prerequisite for communities to effectively manage their own environmental health conditions and to comply with their public health responsibilities.
5. Indigenous environmental health practitioners should be adequately resourced and supported, and recompensed commensurate with their skills and experience.
6. Training for Indigenous environmental health practitioners should be provided at a level consistent with the national Population Health Qualifications and competency standards including Indigenous Environmental Health qualifications and competencies.

enHealth's current focus is on supporting the indigenous environmental health workforce and intelligence. Health agencies' collection of data using the Healthy Communities Assessment Tool (HCAT) uniquely places them as a reliable source of information on environmental health risks challenging Aboriginal and Torres Strait Island Communities

Item	Strategy	How we do this
5.1	Improve networking and professional development of the Aboriginal and environmental health workforce	Biannual Aboriginal and Torres Strait Islander Environmental Health Worker conference Sponsorship of the Indigenous Environmental Health Practitioners (IEHPs) portal and Yarning Place HealthInfoNet.
5.2	Enhance environmental health conditions	Provide advice on management of environmental risks relevant to national Aboriginal and Torres Strait Islander initiatives
5.3	Provide intelligence on environmental health conditions in communities	Develop national report(s) based on data generated by jurisdictions using HCAT and other similar tools

3.5.1 How we measure success

- Participation at national conferences
- Uptake of portal and Yarning Place

3.6 Focus Area 6: Nationally consistent regulatory controls on environmental health risks

Health agencies across Australia are also responsible for regulating certain sectors. While regulation occurs at the jurisdictional level, enHealth considers that there are benefits in working together to assess the effectiveness of these regulatory arrangements while seeking to promote greater consistency in the regulation of those sectors.

Item	Strategy	How we do this
6.1	Explore national oversight and governance shortfalls in key environmental health areas.	<ul style="list-style-type: none"> Assess current limitations and opportunities for improvements in chemical regulation in Australia. Review current arrangements for regulating the beauty/personal services industry in Australia. Liaise with agricultural agencies to promote national consistency in licensing pest management technicians
6.2	Improve public health regulatory practice and build capacity	<ul style="list-style-type: none"> Develop guidance documents on the effective implementation of public health regulation

3.6.1 How we measure success

- Scope and relevance of complementary mechanisms

3.7 Focus Area 7 - Effective Partnerships and Networks

Environmental Health in Australia is reliant on strong partnerships in working towards better sharing of resources and information, and collaborative approaches to health protection. Harnessing the support of Local Government is pivotal in this endeavour.

Overlapping issues such as responses to foodborne illness outbreaks need to be addressed in alignment with these entities in a way that applies the guiding principles consistently.

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With such considerable overlap of interest, priority needs to be given to maintaining or strengthening the value of effective partnerships and networks.

Item	Strategy	How we do this
7.1	Strengthen local government's role as the primary provider of environmental health services	<ul style="list-style-type: none">Engagement with Local Government Authorities through the Australian Local Government Association and State and Territory Local Government Associations on environmental health issues, particularly workforce
7.2	Improve links with other key committees and agencies, including strategic policy bodies and research institutions	<ul style="list-style-type: none">Invite external experts to participate, present or observe at enHealth meetingsEstablish mechanisms for liaison with other key committees and agencies, including CDNA and PHLN and Environment departments
7.3	enHealth leads the setting of the national agenda in applied environmental health research.	<ul style="list-style-type: none">Identifying environmental health research prioritiespublish lessons learned by jurisdictions in responding to various incidentsBuilding relationships and identifying opportunities to partner with key research institutions and funding bodies

3.7.1 How we measure success

- Joint annual enHealth and CDNA meeting held
- Active participation in the development of evidence based standards setting and the GRADE Working Group on Environmental Health (NHMRC)
- Local Government participation in the development of and utilisation of EHWWG Work Plan on projects affecting them
- Number of priority environmental health research projects commenced
- Publication of a national environmental health research priority list

4 Appendix 1: Current enHealth Guidelines

The current enHealth publications are:

- 7th National Aboriginal and Torres Strait Islander Environmental Health Conference Kalgoorlie WA (2009)
- Aluminium 1st edition (1998)
- Arthropod pests of public health significance in Australia (2013)
- Asbestos: A guide for householders and the general public (2013)
- Australian Exposure Factor Guide (2012)
- Benzene (1997)
- Child activity patterns for environmental exposure assessment in the home (1999)
- Clandestine drug laboratories and public health risks (2013)
- Composite sampling (1996)
- Copper (1997)
- enHealth Council position on Copper Chrome Arsenate (CCA) treated timber products (2005)
- enHealth Environmental Health Officer skills and knowledge matrix (2009)
- Environmental Health Practitioner Manual: A resource manual for environmental health practitioners working with Aboriginal and Torres Strait Islander Communities (2010)
- Environmental Health Risk Assessment consultation summary (2011)
- Environmental Health Risk Assessment: Guidelines for assessing human health risks from environmental hazards (2012)
- Environmental Health Risk Perception in Australia – A research report to the enHealth Council (2000)
- Exposure scenarios and exposure settings (2001)
- Floods: an environmental health practitioner’s emergency management guide (1999)
- Guidance for the control of Legionella (1996)
- Guidance on water quality for heated spas (1996)
- Guidance statements on per and poly fluoroalkyl substances (2016)
- Guidelines for economic evaluation of environmental health planning and assessment (2002)
- Guidelines for Legionella Control (2016)
- Guidelines for the control of public health pests – lice, fleas, scabies, bird mites, bedbugs and ticks (1999)
- Health Impact Assessment Guidelines (2001)
- Health-based soil investigation levels (2001)
- Healthy Communities Healthy Environments (2000)
- Healthy Homes – A guide to indoor air quality in the home for buyers, builders and renovators (2002)

- Human health and climate change in Oceania: A risk assessment (2002)
- Indigenous Environmental Health: report of the fifth National Conference (2004)
- Indigenous Environmental Health: report of the sixth National Conference (2007)
- Indoor air quality: A report on health impacts and management options (2000)
- National Environmental Health Strategy 2007-12
- National Environmental Health Strategy 2012-15
- National Environmental Health Strategy Implementation Plan (2000)
- National standard for licensing pest management technicians (1999)
- Nitrogen dioxide (1997)
- Ozone (1997)
- Paint film components (1998)
- Per and poly fluoroalkyl substances factsheet (2016)
- Pesticide use in school grounds (1997)
- Policy principles on which to base improvements for Aboriginal and Torres Strait Islander Environmental Health (2010)
- Responding to environmental health incidents – community involvement handbook (2006)
- Review of health issues associated with potable reuse of wastewater – final report (2001)
- Risky Business – a resource to help local governments manage environmental health risks (2012)
- Sulphur dioxide (1998)
- The health effects of environmental noise – other than hearing loss (2004)
- The role of toxicity testing in identifying toxic substances in water (2012)
- Thinking sustainable development – Acting for health (2001)
- Unflued gas heaters and your health brochure (2005)
- Using the enHealth Environmental Health Officer skills and knowledge matrix (2010)
- Zinc (1997)

5 Appendix 2: enHealth Working Groups

5.1 Working Group on Aboriginal and Torres Strait Islander Environmental Health (WGATSIEH)

WGATSIEH works under the guidance of enHealth and with reference to this strategic plan acts to fulfil its terms of reference of:

1. Advising enHealth on Aboriginal and Torres Strait Islander environmental health issues.
2. Supporting the review and development of national Aboriginal and Torres Strait Islander environmental health policy.
3. Acting as a focal expert group for enHealth in promoting Aboriginal and Torres Strait Islander environmental health with relevant stakeholders.
4. Providing input and direction into the Aboriginal and Torres Strait Islander environmental health conference/workshops and other mainstream conferences relating to environmental health.

5.2 Environmental Health Technical Working Group (TWGEH)

The enHealth Technical Working Group (TWGEH) acts to provide technical guidance, which is evidence-based, effective and nationally consistent and that supports the protection of public health, in particular for the assessment, management and communication of risk.

The Technical Working Group on Environmental Health works under the direction of enHealth to fulfil its objectives, including:

1. Providing technical guidance to enHealth and AHPPC on issues that concern the health effects of environmental issues.
2. Conduct and oversee projects on environmental health issues with human health impacts.
3. Liaise with relevant agencies and organisations to provide technical advice on a range of environmental health issues.
4. Coordinate responses to enquiries about environmental health issues on behalf of enHealth and AHPPC.

5.3 Environmental Health Workforce Working Group (EHWWG)

The Environmental Health Workforce Working Group (EHWWG), under the guidance of enHealth and with reference to both this strategy and the AHPPC strategic plan, will:

1. Contribute to national health workforce policy through the development of agreed advice to enHealth on the environmental health workforce.
2. Work with the National Health Workforce Taskforce to ensure that environmental health workforce issues are considered within the broader health workforce reform agenda.
3. Coordinate the implementation of nationally agreed environmental health workforce policies and approaches.
4. Provide nationally agreed advice to enHealth on the roles and functions of the environmental health workforce and the core competencies required to fulfil these roles and functions.
5. Collaborate with relevant Industry Skills Councils, Registered Training Organisations and appropriate bodies to develop flexible education pathways that will ensure an appropriately skilled environmental health workforce.
6. Coordinate research, share information and develop practical environmental health workforce resources.

5.4 Water Quality Working Group (WQWG)

The Water Quality Working Group (WQWG), under the guidance of enHealth and with reference to both this strategy and the AHPPC strategic plan will provide a forum for representatives from State, Territory and Commonwealth health agencies to manage drinking water, recycled water, wastewater and recreational water to:

1. Advise enHealth of emerging regulatory and health issues.
2. Foster a consistent approach to management of new and emerging water-related public health risks across all Australian jurisdictions.
3. Develop a shared strategic perspective on health risks from hazards in water.

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4. Support nationally consistent frameworks for regulation of water quality.
5. Share key outputs from local water research and outcomes from health incident investigations.
6. Identify research gaps that could feed into new projects of interest to other jurisdictions, via partnerships with research organisations.
7. Form inter-jurisdictional working groups to develop strategies, policy and/or guidance documents intended to help address the issues identified.
8. Raise, or respond to, issues of national significance with the Australian Health Protection Principal Committee, where appropriate.

6 Appendix 3: Glossary

Term / Acronym	Meaning
AHMAC	Australian Health Ministers' Advisory Council
AHPPC	Australian Health Protection Principal Committee
CDNA	Communicable Diseases Network of Australia
COAG	Council of Australian Governments
enHealth	Environmental Health Standing Committee
Health	Shortened name for the Commonwealth Department of Health
NHEMS	National Health Emergency Management Standing Committee
NHMRC	The National Health and Medical Research Council
PHLN	Public Health Laboratories Network
SCoH	Standing Council on Health, replaced by the COAG Health Council.