

Lithgow

Ageing Strategy



Lithgow
CITY COUNCIL

Our Place ... Our Future
www.lithgow.nsw.gov.au

Mayoral Preface



I am pleased to present the Lithgow Ageing Strategy which highlights the changes that are happening in the community and aims to guide policy development and service delivery for Council, other levels of government and the community so that Lithgow continues to be a vibrant and growing community in which people can grow old with dignity and with the services and facilities they need.

Developed by Council's Community and Strategy Group, with a lot of input from a community advisory committee and others, the Ageing Strategy underscores the issues and challenges that we face in Lithgow from a population that is ageing relatively quickly.

An ageing population will likely have financial impacts on Council and will require Council to adapt the way it provides services and facilities. An ageing population will also result in changing demand for the services provided by government, local business and the not-for-profit sectors and may also result in labour market changes and skill shortages which will impact across the local economy.

There is positive news too. The Ageing Strategy highlights many of those well known characteristics of Lithgow, our "social capital", that make for a resilient, friendly and supportive community. Lithgow also has a strong network of services that support older people in their homes and a growing number of facilities.

Council hopes that the Ageing Strategy will be a useful tool for all those who provide services to older people, whether they be government, not-for-profit or business and will also be useful for anyone interested in what is happening in this community.

**Neville Castle
Mayor**

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1. Executive Summary

Chapter 2. Introduction

The development of an Ageing Strategy was a recommendation of the Lithgow Social Plan produced by Lithgow City Council in 2006.



The population of Lithgow is rapidly ageing, at a rate above a number of surrounding areas and the NSW average. Further, the population of Lithgow has not increased significantly in recent years and is not projected to increase in the next 20-25 years. These trends pose significant challenges for Council, other levels of government, the non-government sector and the community itself in responding to both an ageing population and to the loss of younger working age people. These twin challenges will have a significant impact on Council in financial terms and in relation to the delivery of services and the provision of facilities for a changing population. An ageing population may also result in skill shortages which will impact on Council, local business and the community.

The Ageing Strategy identifies Council's role, and the role of others, in addressing the needs of older people and includes an Action Plan for Council to implement. It is hoped that the Ageing Strategy will throw considerable light on the changes that are occurring in Lithgow and will provide guidance to Council and others in better meeting the needs of the older population.

I would like to thank the members of the Ageing Strategy Advisory Group for contributing their time and expertise over a long period. Council has been very fortunate to have had the assistance of such a dedicated group of people. I would also like to thank the Council staff within Council's Community and Strategy Group for their hard work and professionalism on the Ageing Strategy.

*Councillor Grahame Danaher
Chair of the Ageing Strategy
Advisory Group*

Chapter 3. Community Profile

While the Lithgow population currently has a similar age distribution to NSW and Regional NSW, the population of Lithgow is ageing at a faster rate than both NSW and Regional NSW. There were 5,523 people aged 55+ at the 2006 Census, up from 3,966 at the 1996 Census – a 39% increase in 10 years.

Lithgow is projected to have either zero or negative population growth out to the year 2036 while NSW and the surrounding Bathurst and Blue Mountains LGA's are projected to have significant positive growth in the same period. In tandem with the fall in the overall population, are projections that the percentage of people aged 55+ years in Lithgow will rise from 29% to 46% by 2036. Again, this is significantly higher than NSW, Regional NSW and Bathurst and Blue Mountains LGA's.

In numerical terms, there will be 3,000 more older people aged 55+ in the year 2036 than there were in 2006. This represents a 50% increase.

The median age of the Lithgow population is projected to rise from 40 years in 2006 to 51 years in 2036, at which time it will be about 10 years above the median age of Bathurst and Blue Mountains LGA's, but slightly less than Mid Western Regional Council LGA.

An increasing number of older people and a loss of children, youth and those in the working age groups will pose a major challenge to Council, other levels of government and to the local economy and service industry.

The profile also shows:

- There has been an increasing number of older Aboriginal and Torres Strait Islander people (defined as those aged 45+ years) in Lithgow, up from 58 people in 1996 to 141 people in 2006.
- The incomes of older people are generally low with nearly 43% of older people earning less than \$250 per week at the time of the 2006 Census.
- People aged 55+ have higher rates of year 10 and above school completion than the rest of the Lithgow population; 22% have completed a degree or higher qualification, and; 35% have completed a certificate level qualification.
- About 1 in 4 older people live on their own with women more likely than men to live on their own.

See Chapter 3.

Chapter 4. Survey

A survey of people aged 55+ was undertaken in June/July 2010 to gain the views of older people across a range of issues.

A total of 260 survey responses were received which represents almost 5% of the total population aged 55+.

See Chapter 4.

Chapter 5. Preparation For Ageing

Longer life expectancies mean that people are now more likely to live well beyond the traditional retirement age. This highlights the need for older people to plan for a long, healthy, socially engaged, active and financially secure retirement.

Some will have sufficient wealth and income for their older years, while many will not. An increasing number of older people will live alone and may face additional challenges.

Preparation for ageing involves consideration of a number of factors including finances, lifestyle, education, health, work, housing, and planning for the point at which people can no longer live independently. A very strong theme throughout the Ageing Strategy survey and consultations has been the strong connection that people feel to the community. It is essential that as far as is possible, preparation for ageing supports the principle of "ageing in place" so that the connections and supports that older people value are maintained.

Retirement itself is a changing concept with increasing numbers of older people working part-time beyond age 65, either by choice or necessity. This will require the adoption of flexible working arrangements and recognition by employers and the community of the value of older employees.

The Action Plan makes recommendations in relation to:

Financial Planning – older people receive quality and independent financial planning advice prior to and during retirement

Housing – older people have housing choice and access to suitable well located housing that allows them to age in place

Work – older people have access to flexible working arrangements and part-time work

Education – older people have social engagement and learning opportunities in retirement

Health - older people are aware of the range of medical and ancillary services that are available

Information - older people have the information resources to assist them to plan for ageing

Access to Services - older people are informed about the range of services available to them and how to navigate through the service network

See Chapter 5.

Chapter 6. Social Engagement

Lithgow has a long and proud tradition as a friendly and welcoming place which looks out for its own. Many residents are proud to call Lithgow home and there is a good level of social capital and social infrastructure within the LGA. The challenge is to harness these qualities in ways that benefit the whole community and to promote the social engagement of the socially isolated. For a number of reasons, some people are less engaged in the community and as a result face isolation. There is clear evidence that social exclusion is associated with poor health.

The Action Plan makes recommendations in relation to:

- promotion of active ageing
- service and facility planning and provision
- volunteering
- work
- transport
- community safety
- information provision

See Chapter 6.

6.2 Crime and Safety

Crime and safety issues have been a recurring concern for many people in the community over a number of years and have also been a significant concern raised by older people during development of the Ageing Strategy.

The common reporting of crime in the media can also lead to a fear of crime, and a view that the community is becoming unsafe over time. This can have the effect of discouraging people, particular older and vulnerable people from venturing into areas that are perceived to be unsafe.

The Ageing Strategy survey results show that there is a significant level of concern about safety with around 40% of survey respondents saying they feel either a little, somewhat or very unsafe. The most common safety concerns raised in the Ageing Strategy survey and community consultations were anti-social and violent street behaviours, public intoxication, vandalism and a call for earlier closing times for licensed premises.

The Action Plan makes recommendations in relation to:

- incorporating crime prevention through environmental design principles in development control plans and the design/upgrade/maintenance of public places
- improving street lighting in areas of high pedestrian activity
- introducing measures to improve pedestrian safety in areas of high pedestrian activity
- working with Housing NSW to develop strategies for enhancing the safety of older people and promoting community development in public housing areas
- emergency planning and management

See Chapter 6.

6.3 Education

In 2001 Lithgow City Council declared Lithgow to be the first learning city in NSW, with the aim of re-invigorating the community and equipping people with the skills needed to survive and thrive in the 21st century.

There is clearly an interest in the Lithgow community in life-long learning.

Lithgow Library has a vital role in relation to education and to the social engagement of older people in general. The Library service has commenced a number of programs for older people including a greater focus on acquiring talking and large print books, planning for e-books and planning for the commencement of a housebound library service.

The Action Plan makes recommendations in relation to building on the existing Learning City concept to enhance the availability of informal and accessible educational opportunities for older people both in the Library and elsewhere.

See Chapter 6.

Chapter 7. Transport and Access

Transport availability enables people to access health services, shopping, friends and family. While people with their own transport, or access to transport provided by friends and family may be able to participate in the community and get to the services they need, people without these transport options rely on private, public and community transport or stay at home.

Public transport, including buses and taxis aren't always suitable due to timetables, distance from home to the bus stop and cost. The distance of the hospital from the centre of Lithgow has been a frequent concern. Frail aged people often find it difficult to use buses on their own, without the help of a carer. People living in rural areas face additional hardships in accessing services.

Older people raised a number of concerns in the Ageing Strategy consultations and survey around pedestrian safety including safety on footpaths and pedestrian crossings and poor access to some buildings and shops.

The only public toilets in the Lithgow CBD are at the very top of Main Street well away from the centre of retail and commercial activity. These toilets are old, not in a safe location and are not built to current standards of safety and design.

The Action Plan makes recommendations in relation to:

- improved transport planning and provision
- improve access to public buildings and places
- enhanced pedestrian safety and amenity
- enhanced road safety of older people
- new public toilets in the Lithgow CBD

See Chapter 7.

Chapter 8. Health Lifestyles and Recreation

Lithgow residents experience a number of lifestyle related diseases and health conditions at higher rates than the average of the Sydney West Area Health Service¹ region and NSW – see health section.

¹ Now Nepean Blue Mountains Local

The Lithgow Recreation Needs Study highlights the benefits of a physically active community in minimising chronic disease as well as in increasing community cohesion and community networks.

There are a number of areas where Council, sometimes in partnership with others, can bring about improvements to the physical infrastructure of recreational facilities and to the ways in which they are used.

Older people don't only use recreational facilities in their own right - they can be parents, grand parents, and in some cases the carers of others. Recreational and open space planning and management therefore needs to take account of the broad range of potential users and their need for access to seats, water, shade and public toilets.

The Live Well Lithgow project has been a very successful model for engaging the community in the adoption of healthy lifestyles. While this project is now completed, there are elements of it, for example the healthy lifestyle challenge and walking groups that could be replicated by Council in partnership with others.

The Action Plan makes recommendations in relation to:

- improved recreation planning
- programs to promote healthy lifestyles within community

See Chapter 8.

Chapter 9. Housing and Accommodation

9.1 Housing

The ageing of the population and migration of older people to Lithgow will increase the demand for housing for older people.

Research shows that there is a mismatch in Lithgow between the housing needs of older people and the available housing stock. Despite the high number of older people living alone, the majority of new housing stock is multi-bedroomed separate dwellings.

This highlights a lack of housing diversity in Lithgow which limits housing choice and housing affordability, particularly for older people and those living alone.

The housing market analysis undertaken by Housing NSW in 2011 identifies the need for more diversity of housing stock, for more affordable rental housing, for more housing suitable and affordable for older residents and ensuring that there is sufficient adaptable housing to allow older residents to age in place.

While 80% of survey respondents think their current home is suitable in terms of access, location, heating and general condition, 20% say it isn't.

Although 64% say their current house would be suitable for their retirement, it is notable that a significant percentage of people (35%), indicate that they are prepared to consider smaller alternatives.

Survey respondents across all age groups say they are prepared to consider downsizing with those in the younger age groups more so.

The Action Plan makes recommendations in relation to:

- increased housing choice
- improved housing affordability and location
- improved safety in the home
- improved energy efficiency and housing suitability

See Chapter 9.

9.2 Residential Care

An ageing population, a decreasing number of younger people to care for them and more people living alone and living longer, point to a likely increasing demand for residential care places in Lithgow.

Lithgow has a current deficit of residential aged care places compared to the Commonwealth Government target, a deficit that will increase unless additional places are established.

The shortage of respite beds, which was raised many times during the community consultations, is placing a considerable burden on families, carers, and the hospital system. The availability of respite is crucial for maintaining people in the community by giving carers and families a break.

There is scope for improved coordination and resource sharing between residential care facilities.

A proposal has recently been developed for the merger of both Tanderra and Coinda residential facilities. Detailed planning will be required around issues of financial management, management structure, staffing arrangements, service improvement and expansion etc.

There are a number of potential benefits from such a merger, benefits that would most likely be greater if both facilities adjoin each other, whether on their current sites or on a new site.

If it is found that expansion is not viable on the current sites, careful consideration needs to be given to the costs and benefits of relocating to a different site, in particular if this involves one facility moving and the other remaining on its current site. The benefits of organisational amalgamation are likely to be greater when both facilities adjoin each other as this will allow for the sharing of clinical expertise and staffing.

The Action Plan makes recommendations in relation to:

- ensuring there are adequate residential aged care places to meet current and projected need
- ensuring that there are sufficient short-term respite beds to meet community need
- promoting efficient management and operation of residential facilities

See Chapter 9.

Chapter 10. Health and Community Care

10.1 Health

Health Status

Lithgow residents experience a number of lifestyle related diseases and health conditions at higher rates than the average of the Sydney West Area Health Service region² and NSW, including higher rates of smoking, overweight and obesity, higher hospitalization rates, including hospitalization for cardiovascular disease and higher rates of admission with a principal diagnosis of diabetes.

² Now Nepean Blue Mountains Local Health District

Transport access to Lithgow Hospital and Community Health Centre, the loss of some health services and the need to leave Lithgow LGA for specialist medical services have been a concern of many people for a number of years.

There was both praise and criticism made by people during the community and agency consultations about the health system. Some said the health system has generally improved and there are a good number of medical centres but a shortage of specialist doctors and podiatrists.

There were concerns about the loss of health services, including oncology, dialysis and radiology services, longer waiting times and fewer specialists.

The Action Plan makes recommendations in relation to:

- establishing a Council Health Committee
- implementing falls prevention programs
- developing a comprehensive tobacco control policy to encourage reduced rates of smoking
- improving access to the Lithgow Health Service and to out of area health services
- implementing healthy lifestyle programs following on from the Live Well Lithgow Project
- maintaining Council's Solid Fuel Rebate program to encourage people to convert from coal heating
- promoting safe, energy efficient and sustainable housing stock for summer cooling and winter heating. Considered in Housing Chapter
- undertaking workforce planning to ensure there are adequate numbers of trained health staff

See Chapter 10.

10.2 Community Care

The availability of a comprehensive network of services and supports is crucial for maintaining the independence, quality of life and community participation of older people and allowing people to "age in place" by preventing premature entry to residential aged care.

Changing needs and expectations underscore the need for collaborative and strategic local service delivery planning that includes identifying current service gaps, new models of service, changing community needs and service affordability.

Few indigenous people are using local HACC services despite attempts over time by some services to engage indigenous people.

With an increasing proportion of the older population of Lithgow being men, planning is needed around targeting services to this group.

The service network can be difficult for frail older people and their families to navigate, especially when they are suddenly faced with a crisis, times that can be stressful. Information on the full-range of available services is not always easy to find, even for service providers themselves.

The Action Plan makes recommendations in relation to:

- coordinated service planning
- improved service coordination
- improved service information

See Chapter 10.

Chapter 11. Issues for Council

With a static and ageing population, Lithgow may be at a competitive disadvantage compared to surrounding local government areas in attracting business and promoting economic development. Council faces a number of challenges in managing the range of impacts that will flow from these demographic trends:

- declining economic activity and declining rate income
- deteriorating public infrastructure and increased demand for recreation and other infrastructure suitable for the needs of both an ageing population and for families and younger people
- labour force shortages, particularly in the health and community care sectors
- there may be community demands for Council to provide or subsidise services to the older population that are currently provided by state and commonwealth governments and the community sector
- ageing housing stock will have negative consequences for older people and will have wider impacts on the local housing market

The Action Plan makes recommendations in relation to:

- promoting population growth
- promoting economic development
- promoting housing choice
- encouraging lifelong learning opportunities
- improving the liveability of the community
- modelling the financial impacts of the ageing population

See Chapter 11

Chapter 2 Introduction

2.1 Introduction

The development of an Ageing Strategy was a recommendation of the Lithgow Social Plan produced by Lithgow City Council in 2006. The Ageing Strategy considers a wide range of issues that impact on older people including health, access to services, housing, transport, well being and social connectedness to name a few.

The population of Lithgow is rapidly ageing at a rate above a number of surrounding areas and the NSW average. Further, the population of Lithgow has not increased significantly in recent years and is not projected to increase in the next 20-25 years. These trends pose significant challenges for Council, other levels of government, the non-government sector and the community itself in responding to both an ageing population and to the loss of younger working age people. These twin challenges will have a significant impact on Council in financial terms and in relation to the delivery of services and the provision of facilities for a changing population. An ageing population may also result in skills shortages which will impact on Council, local business and the community.



The Ageing Strategy identifies Council's role in addressing the needs of older people and includes an Action Plan for Council to implement. The Ageing Strategy will also be a useful guide for other agencies, both government and non-government, in considering the needs of older people. It is hoped that the Ageing Strategy will throw considerable light on the changes that are occurring in Lithgow and will provide guidance to Council and others in better meeting the needs of the older population.

2.2 Process for Developing the Ageing Strategy

Advisory Committee

An Advisory Committee was established in 2009 to guide the development of the Ageing Strategy.

The principal responsibilities of the Committee have been to:

- provide advice and expertise towards the development of the Lithgow Ageing Strategy
- provide input to determining the scope of issues to be included in the Lithgow Ageing Strategy
- assist with designing and interpreting community consultation and research data
- provide input into the development of the Lithgow Ageing Strategy Report and Action Plan

The Advisory Committee included two Councillors, representatives from Sydney West Area Health, Housing NSW, NSW Department of Ageing, Disability and Home Care, Lithgow Information and Neighbourhood Centre, Lithgow Uniting Care, Lithgow Community Transport and community representatives including Mingaan aboriginal group.

Council extends its sincere thanks to those who participated on the Advisory Committee and provided their time and expertise in the development of this report.

Data Collection

- 2006 Census data, the most up to date available, was analysed. Data held by other agencies, including health data, was also collected to help gather a picture of older people in Lithgow
- population projection data from Planning NSW and the Western Research Institute was also used

Community Consultation

- community consultations were held in a number of different locations including Lithgow, Portland, Wallerawang and Capertee to gather the views of older people and service providers. Consultations were also held with residential aged care providers as well as with Gorrie Ban, Lithgow Senior Citizen's Centre and the Lithgow Community Care Forum. The consultation outcomes are considered in the relevant chapters throughout this report and the full consultation outcomes are shown at Appendix 7

Community Survey

- a Survey of older people was undertaken to gain their views on a range of issues with more than 250 survey responses received. This was a pleasing result given that it was a long questionnaire of about 50 questions. The survey provided some very valuable information that informed development of this report
- responses to individual survey questions are included in the relevant chapters throughout this report. A full list of survey responses are shown at Appendix 4

Other Plans and Reports.

A number of reports and studies were reviewed in the development of the Ageing strategy Report.

- Council's Social Plan and Strategic Plan together with a Health Impact Assessment of the Strategic Plan by Sydney West Area Health Service
- Council's Draft Land Use Study and Recreation Needs Study
- Age-friendly Built Environments - Opportunities for Local Government Australian Local Government Association 2006 has been an important resource in the development of this strategy

A full list of resources used in the development of this strategy is at Appendix 1.

2.3 Policy Framework

2.3.1 Australia to 2050: Future Challenges. The 2010 Intergenerational Report

The 2010 Intergenerational Report, produced for the Commonwealth Government⁴, analyses the forecasted demographic changes that Australia is facing and their likely impact on society and government finances.

Australia's population is ageing. Between now and 2050 the number of :

- older people (65 to 84 years) is expected to more than double
- very old people (85 and over) is expected to more than quadruple, from 0.4 million people today to 1.8 million in 2050

In contrast, the number of:

- children is expected to increase by 45 per cent
- prime-age working people is expected to increase by 44 per cent

⁴ Australia to 2050: Future Challenges
The 2010 Intergenerational Report
Commonwealth Government January 2010

This means that, the proportion of people aged 65 years or over is projected to increase from 13 per cent in 2010 to 23 per cent by June 2050. At the same time, the proportion of working-age people in the total population is expected to fall by 7 per cent to 60 per cent.

As a consequence, there will be relatively fewer people of working age to support an increasing number of older Australians. In 2010, there will be an estimated 5 people of traditional working age for every person aged 65 and over.

At the same time, an ageing population will place greater demands on government services.

Table 2.1
Australia's Population History and Projections
Population as at 30 June (millions of people)

Age range	1970	2010	2020	2030	2040	2050
0-14	3.6	4.2	4.9	5.4	5.7	6.2
15-64	7.9	15.0	16.6	18.2	20.0	21.6
65-84	1.0	2.6	3.7	4.8	5.6	6.3
85 and over	0.1	0.4	0.5	0.8	1.3	1.8
Total	12.5	22.2	25.7	29.2	32.6	35.9

Percentage of Total Population

Age range	1970	2010	2020	2030	2040	2050
0-14	28.8	19.1	19.0	18.3	17.4	17.2
15-64	62.8	67.4	64.7	62.4	61.3	60.2
65-84	7.8	11.7	14.3	16.6	17.2	17.6
85 and over	0.5	1.8	2.1	2.7	4.0	5.1

Table 2.1 starkly demonstrates how the age structure of the Australian population has already changed and is forecast to change even further.

Further, the number of traditional working aged people to support each retiree will fall. In 1970 there were 7.5 working age people for every person aged over 65 years. This fell to 5 people in 2010, and is forecast to fall to 2.7 people in 2049/50.

The Intergenerational Report (available for download from www.treasury.gov.au) concludes that an ageing population presents significant long-term risks for the economy and the sustainability of government finances. As the population ages, the rate of economic growth will slow. Pressures for government spending will increase, particularly in the areas of health, age-related pensions and aged care.

Some of the forecast impacts of an ageing population include:

- living standards over the next 40 years will grow at a slower rate than the previous 40 years
- there will be declining labour force participation and a fall in the proportion of the population that is working

2.3.2 Principles for Positive Ageing

The NSW Principles for Positive Ageing⁵ are based on the United Nations *Principles for Older Persons* that relate to the independence, participation, care, self-fulfilment and dignity of older people.

Older People in NSW:

- a. should be able to pursue healthy and positive active ageing opportunities that support the full development of their potential

⁵ NSW Principles for Positive Ageing
NSW Department of Ageing Disability and Home Care

- b. should have opportunities to participate fully in community life
- c. should have access to educational, cultural and recreational resources in their communities
- d. should be given opportunities to connect with society and to share their knowledge and skills with younger generations
- e. have a wealth of wisdom, skills and knowledge that should be utilised to enable continued and sustainable social and community development
- f. should continue to contribute to the economic, social and cultural richness of NSW

The diversity of older people in NSW, including differences in gender, culture, language, geographical location and socio-economic circumstances, will be taken into account in programs, policies and services.

2.3.3 Integrated Planning

Integrated Planning and Reporting Framework⁶

In October 2009, the NSW Parliament passed legislation requiring all NSW local Councils to develop an Integrated Planning and Reporting Framework consisting of a 10 year Community Strategic Plan, Resourcing Strategy (Long-term Financial Plan, Workforce Plan and Asset Management Strategy), 4 year Delivery Program and Annual Operations Plan.



This legislation has been introduced to improve all NSW Councils' long term planning across social, environmental, economic and civic leadership spheres. The changes are underpinned by the principle that all members of the community have the right, and the responsibility, to contribute to the future of their cities.

The Community Strategic Plan, the highest level plan that Councils will develop, is Council's long-term 10 - 20 year strategy and will replace the current Management Plan and Social Plan.

The Community Strategic Plan identifies the community's main priorities and aspirations for the future and plans strategies for achieving these goals. In doing this, the planning process will consider the issues and pressures that may affect the community and the level of resources that will realistically be available to achieve its aims and aspirations.

This framework encourages councils to draw their various plans together, to understand how they interact and to get the maximum leverage from their efforts by planning holistically for the future.

While Council has a custodial role in initiating, preparing and maintaining the Community Strategic Plan on behalf of the local government area, it is not wholly responsible for its implementation. Other partners, such as State agencies and community groups may also be engaged in delivering the long-term objectives of the plan.

⁶ Integrated Planning and Reporting Framework
NSW Division of Local Government

The Lithgow Ageing Strategy will form a key part of the Lithgow Community Strategic Plan which is scheduled for completion by 30 June 2012.

2.3.4 Lithgow City Council Strategic Plan

In 2007, Council adopted its Strategic Plan⁷, the first long term plan developed by Council. The Strategic Plan provides a framework for Council, in partnership with other levels of government and the community, to implement the visions developed by Council and the community.

The Strategic Plan made a number of recommendations in relation to housing, transport, recreation, safety, education and health which are considered in the relevant chapters throughout the Ageing Strategy report.

Recommendations in the Strategic Plan in relation to older people are shown at Appendix 5.

2.3.5 Health Impact Assessment of Council's Strategic Plan

In 2008, following completion of Lithgow City Council's Strategic Plan 2007, Sydney West Area Health Service (SWAHS)⁸ undertook a Health Impact Assessment of the Strategic Plan⁹.

The Health Impact Assessment (HIA) recommendations *"aim to highlight practical ways to enhance the positive impacts or minimize any negative impacts on health, well being and health inequalities that might arise or exist in response to the Lithgow City Council Strategic plan"*.

The Health Impact Assessment made a number of key findings and recommendations. These recommendations are considered in the relevant chapters throughout the Ageing Strategy report. Recommendations in the Health Impact Assessment of the Strategic Plan in relation to older people are shown at Appendix 5.

2.3.6 Lithgow Social Plan 2006-2011

The Lithgow Social Plan 2006 – 2011¹⁰, last updated in late 2008, identified a number of issues and recommended actions in relation to older people. These are considered throughout the Ageing Strategy report. A full list of recommendations in the Social Plan in relation to older people are shown at Appendix 6.

2.3.7 World Health Organisation (WHO) Checklist of Essential Features of Age-friendly Cities 2007¹¹

This checklist of essential age-friendly city features is based on the results of the WHO Global Age-Friendly Cities project consultation in 33 cities in 22 countries. The checklist is a tool for a city's self-assessment and a map for charting progress. More detailed checklists of age-friendly city features are to be found in the WHO Global Age-Friendly Cities Guide.

⁷ Lithgow Strategic Plan
Lithgow City Council 2007

⁸ Now Nepean Blue Mountains Local
Health District

⁹ Health Impact Assessment Report
of the Lithgow City Council Strategic Plan
Sydney West Area Health Service 2008

¹⁰ Lithgow Social Plan 2006-2011
Lithgow City Council 2008

¹¹ World Health Organisation (WHO) Checklist
of Essential Features of Age-friendly Cities 2007

Chapter 3 Demographic Profile of Lithgow LGA

1. Introduction

For the purpose of this profile, older people are defined as people aged 55 years and over or 45 years and over for Aboriginal and Torres Strait Islander people.

The Lithgow LGA has an ageing population. In 2006, the median age of Lithgow residents was 40 years, up from 37 years in 2001 and 34 years in 1996. By comparison, the median age of the regional NSW population in 2006 was 40 years and for the NSW population was 37 years. The median age of the Lithgow population is also projected to rise to 51 years in 2036, at which time it will be about 10 years above the median age of Bathurst and Blue Mountains LGA's, but slightly less than Mid Western Regional Council LGA.

2. Current Population Characteristics

At the 2006 Australian Bureau of Statistics (ABS) Census, the Lithgow LGA population was 19,756.

Although the population of Lithgow LGA fell slightly between 1996 and 2001, it increased by 559 people or 2.9% between 2001 and 2006 and is projected to have increased a further 1,224 people or 6% between 2006 and 2009, representing a 9% increase between 1996 and 2009 - *Note that the 2009 population level is an ABS estimate and will not be confirmed until the 2011 Census is processed.*



By comparison, between 1996 and 2009 the population of the Central West rose by 4% and NSW increased by 18%.

See Table 3.2

2.1 Population by Locality

The Lithgow LGA includes the urban centres of Lithgow, Portland and Wallerawang (being population clusters of more than one thousand people) plus a number of rural localities.

Cullen Bullen is classified as a rural locality (having 200 – 999 people). The "Other" locations include Ben Bullen, Capertee, Glen Alice, Glen Davis, Hartley, Sodwalls, Rydal, Hampton, Tarana and Marrangaroo.

Table 3.1 Population clusters by ABS Urban Centres/Localities 2006

Location	Population
Lithgow	11 298
Wallerawang	1 906
Portland	1 882
Cullen Bullen	199
Other	4 114
Total	19 756

Source: ABS Census of Population and Housing 2006

Table 3.2 Selected Characteristics Lithgow LGA, Central West Region and NSW

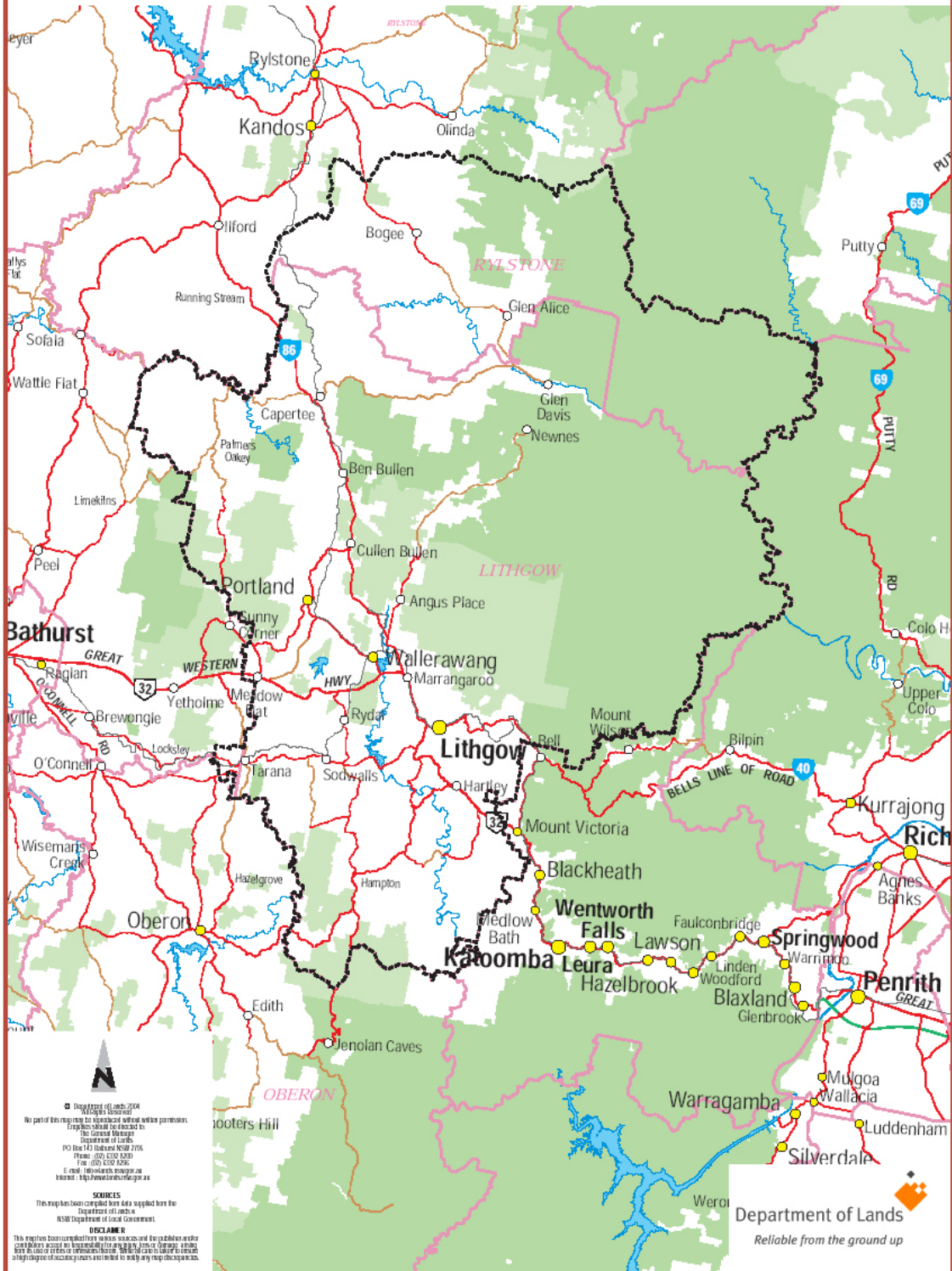
ABS Census and Population Estimates	City of Lithgow LGA	Central West Region	NSW
Population			
Total Population 1996	19 248	172 438	6 024 728
Total Population 2001	19 197	170 180	6 371 745
Total Population 2006	19 756	170 899	6 549 178
Estimated Population 2009	20 980	179 406	7 134 421
% Change 1996 - 2009	9%	4%	18%
ABS Census 2006			
Aboriginal & Torres Strait Islander People			
Aboriginal	563	7 294	130 787
Torres Strait Islander	28	203	4 771
Identifying as Both	15	134	2 949
Total Indigenous Persons	606	7 631	138 507
Indigenous population as percentage of Total Population	3.1%	4.5%	2.1%
Born in Australia	16 837 85.2%	150 369 88.0%	4 521 155 69.0%
Born Overseas	1 718 8.7%	11 112 6.5%	1 555 842 23.8%
Speaks English Only	18 088 91.6%	159 439 93.3%	4 846 670 74.0%
Speaks language other than English	481 2.4%	4 000 2.3%	1 314 556 20.1%
Employed	7 718	73 275	2 909 444
Unemployed	716	4 896	183 159
Not in the Labour Force	6 615	49 854	1 801 010
Unemployment Rate (official ABS) %	8.5%	6.3%	5.9%
Labour Force Participation %	53.1%	58.2%	58.9%
Mobility			
Same address 5 years ago	11 148 59.9%	89 307 55.9%	3 369 032 55.0%
Different address same SLA* 5 years ago <i>*Statistical Local Area</i>	3 299 17.7%	29 119 18.2%	798 806 13.0%
Different address elsewhere in Australia 5 years ago	2 673 14.4%	29 907 18.7%	1 219 375 36.2%
Overseas 5 years ago	99 0.5%	1 417 0.9%	277 961 4.5%
Median Age	40	38	37
Median weekly individual income	\$353	\$389	\$461
Median weekly family income	\$1 026	\$1 053	\$1 181
Median weekly household income	\$738	\$808	\$1 036
Average household size	2.4	2.5	2.6

*Source: ABS Census of Population and Housing 2006
ABS Estimated Population by Age and Sex Regions of Australia 2009
(Percentages unless otherwise stated are of total population in geographical area)*

CITY OF LITHGOW LGA



----- New Boundary



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SOURCES
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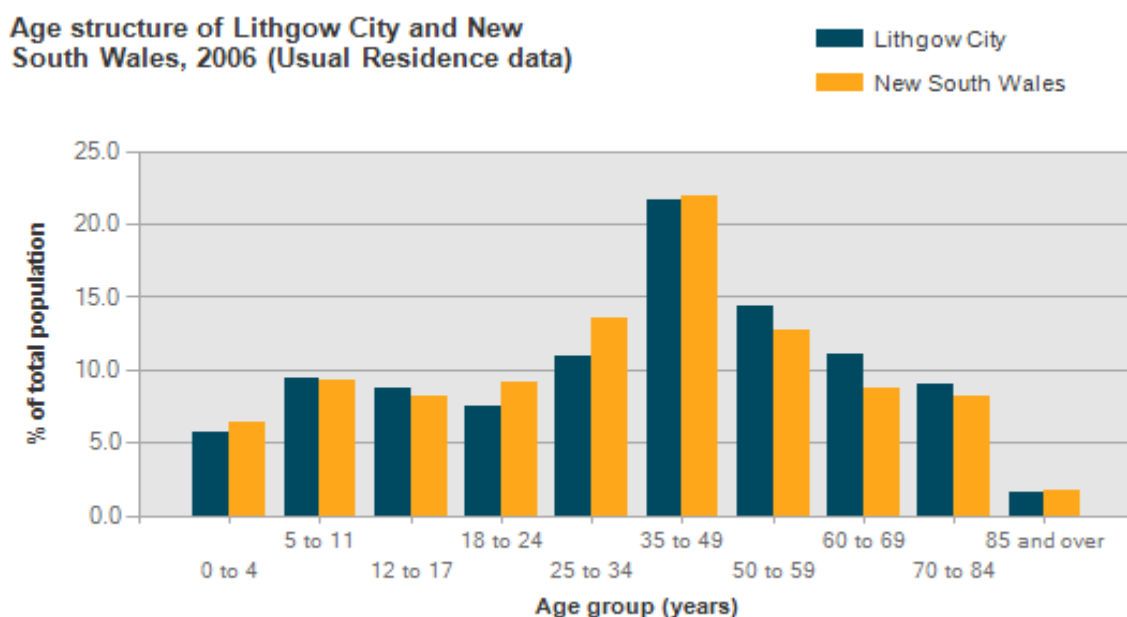
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2.3 Age Structure of the Lithgow Population

Figures 3.1 and 3.2 compare the age structure of Lithgow LGA with NSW and Regional NSW in 2006. Compared to NSW, Lithgow LGA had a lower percentage of its population in the younger age groups and a higher percentage in the 50-59, 60-69 and 70-84 year age groups. Compared to Regional NSW, Lithgow LGA had a slightly higher percentage of its population in the 35-49, 50-59 and 60-69 age groups and a slightly lower percentage in the 70-84 and 85+ age groups.

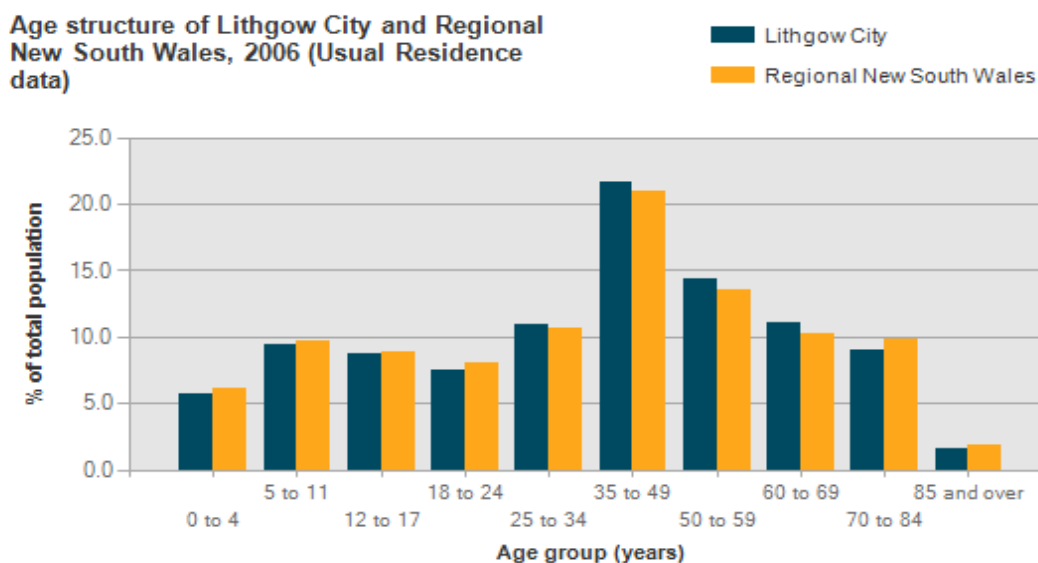
This data is also presented for the Lithgow Urban Area, Portland, Wallerawang, Rural North and Rural South localities in Appendix 8. Age Structure of the Population by Locality.

Figure 3.1



Source: Australian Bureau of Statistics, 2006 Census of Population and Housing (Usual Residence)

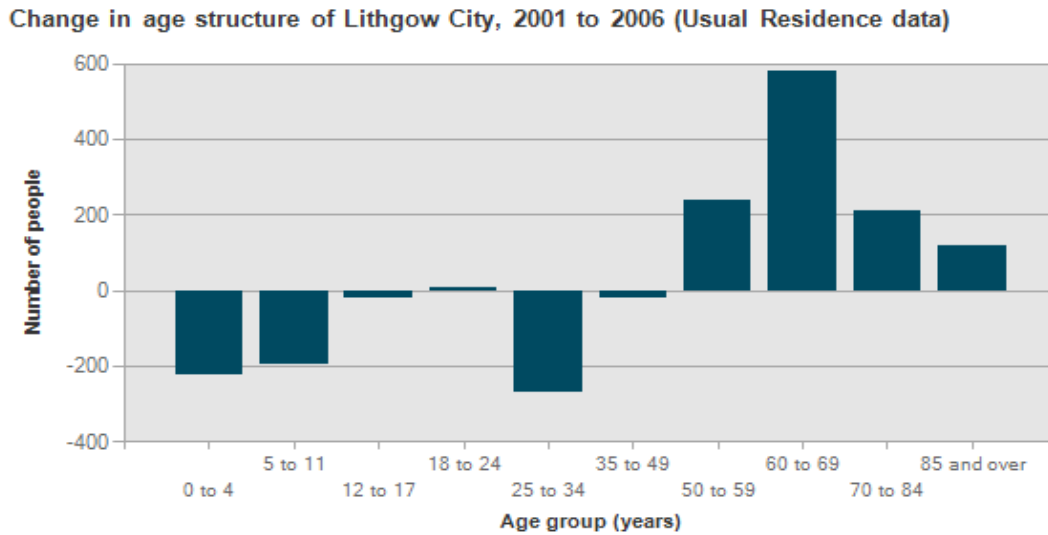
Figure 3.2



Source: Australian Bureau of Statistics, 2006 Census of Population and Housing (Usual Residence)

Figure 3.3 shows the change in the age structure of the Lithgow LGA population between 2001 and 2006. There were significant losses in the number of children and in the younger working age population and increases in each age group over 50 years, particularly the 60-69 age group.

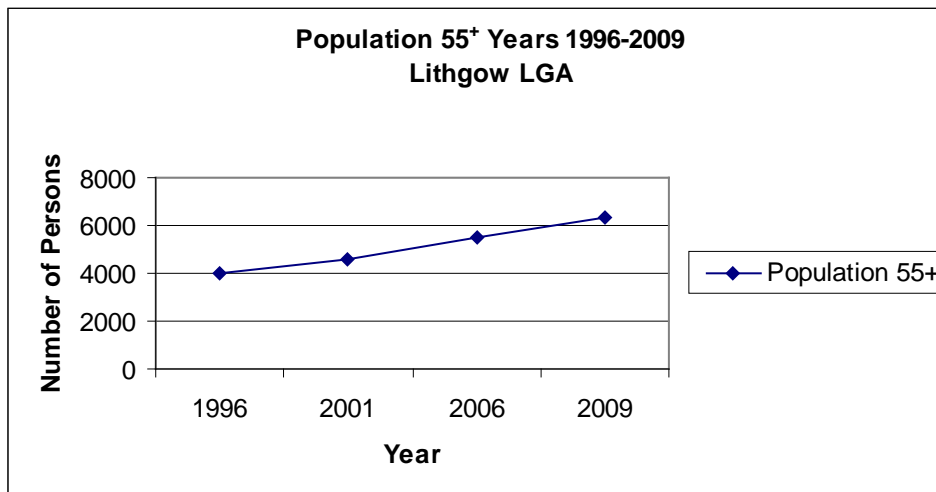
Figure 3.3



Source: Australian Bureau of Statistics, 2006 and 2001 Census of Population and Housing (Usual Residence)

Figure 3.4 shows that there has been a significant increase in the number of people aged 55+ living in the Lithgow LGA in the period 1996 – 2009, up from 3,971 in 1996 to 4,605 in 2001, 5,531 in 2006 and 6,360 in 2009. The increase between 1996 and 2006 was 1,560 people or 39% and between 2006 and 2009 it was 829 people or 15%.

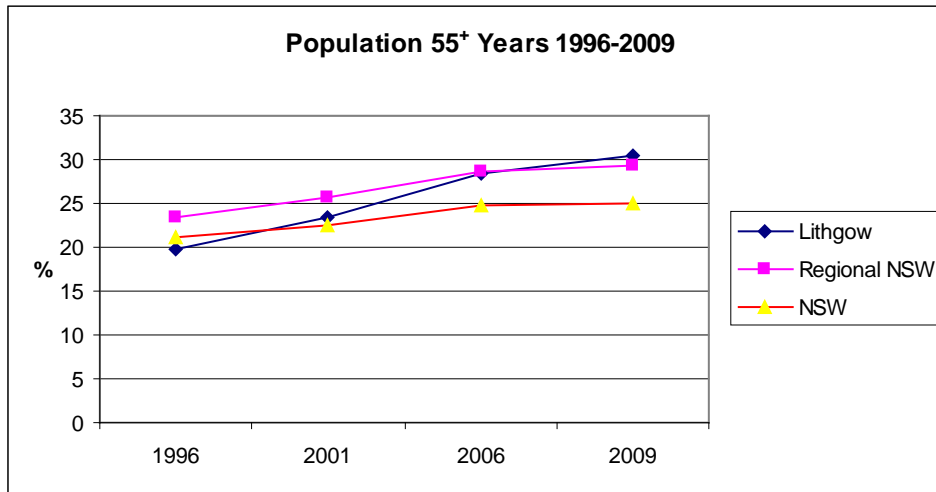
Figure 3.4



Source: ABS Census of Population and Housing Time Series Profile 2006
2009 figures are ABS Estimated Population by Age and Sex Regions of Australia 2009

Figure 3.5 compares the change in the percentage of people aged 55+ in Lithgow, Regional NSW and NSW since 1996 and shows that while in 1996 the percentage of people aged 55+ years in Lithgow was below both NSW and Regional NSW, by 2006 it was equal with Regional NSW and exceeded NSW. This trend is estimated to have continued until 2009, although the percentage rate of increase for Lithgow, Regional NSW and NSW has slowed since 2006. *Note that 2009 population levels are estimates only provided by ABS and are not confirmed.*

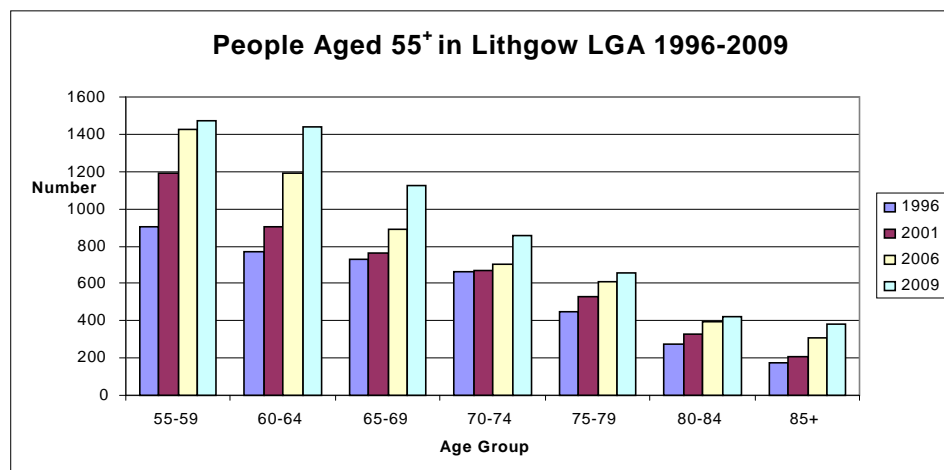
Figure 3.5



*Source: ABS Census of Population and Housing 2006
ABS Estimated Population by Age and Sex Regions of Australia 2009*

Figure 3.6 shows the change in the number of older persons by age group between 1996, 2001, 2006 and estimates for 2009. There were increases in each 55+ age group between 1996 and 2006, particularly so in the 55-59 and 60-64 age groups. 2009 population estimates also show a continuing increase in each age group, particularly those aged 60-69 years.

Figure 3.6



*Source: ABS Census of Population and Housing 2006
ABS Estimated Population by Age and Sex Regions of Australia 2009*

Table 3.3 gives details on the numbers of older people by gender and age group in the Lithgow LGA population in 1996, 2001, 2006 and estimates for 2009.

While there were overall more women than men aged 55+ years and in the 70+ years age groups at the 2006 Census, there were more men than women in the younger 55 to 69 year age group.

Moreover, the overall percentage increase in older men between 1996 and 2006 was 46% which was significantly higher than women (33%). This indicates that an increasing proportion of the older population of Lithgow is men.

Further, the proportion of men aged 55-69 years increased by 60% between 1996 and 2006 and the proportion of men aged 75+ years increased by 68% in the same period. Between 2006 and 2009 there was a 15% increase in the number of men, 16% in the number of women and a 15% overall increase in the number of people aged 55+ years.

Table 3.3

People Aged 55+ years in Lithgow LGA 1996 -2009

Age	1996			2001			2006			2009			Change 1996 - 2009
	M	F	Total	M	F	Total	M	F	Total	M	F	Total	
55-59	462	444	906	633	561	1 194	762	665	1 427	760	713	1 473	567 63%
60-64	406	366	772	463	444	907	631	560	1 191	727	714	1 441	669 87%
65-69	382	347	729	390	375	765	446	444	890	584	543	1 127	398 55%
70-74	286	376	662	328	339	667	343	358	701	416	442	858	196 30%
75-79	166	280	446	238	293	531	281	326	607	321	333	654	208 47%
80-84	97	178	275	119	212	331	141	256	397	179	245	424	149 54%
85+	46	130	176	61	145	206	96	214	310	111	272	383	207 118%
Total	1 845	2 121	3 966	2 232	2 369	4 601	2 700	2 823	5 523	3 098	3 262	6 360	2 394 60%

*Source: ABS Census of Population and Housing 2006
ABS Estimated Population by Age and Sex Regions of Australia 2009*

2.4 Migration

Tables 3.4-3.6 provide data on migration trends for the period 2001-2006. **Table 3.4** shows that there was a net loss during this period in all age groups up to age 54 years and net gains in the 55+ age groups.

Table 3.5 shows the main Local Government Areas of gain and loss of older people to Lithgow City in the period 2001-2006. Most of the net gain was from the Blue Mountains - of the net gain of 467 people from the Blue Mountains to Lithgow LGA, 137 people (29%) were aged 55+. There was also a net gain of 105 people from Blacktown LGA of which 19 people (18%) were aged 55-64 years and from Penrith of which 22 people (36%) were aged 55+.

Table 3.4 - Net Migration in Lithgow LGA By Age Group 2001-2006

Migration for Lithgow City Council by Age Group 2001-2006			
Age group	In	Out	Net
5 to 14 years	429	499	-70
15 to 24 years	311	730	-419
25 to 34 years	444	466	-22
35 to 54 years	750	784	-34
55 to 64 years	359	290	69
65 years and over	321	207	114
Total	2,614	2,976	-362

Source: Australian Bureau of Statistics, Census of Population and Housing 2006, unpublished data.

Table 3.5 - Summary of the Main Local Government Areas of Gain and Loss of Older People to Lithgow City 2001-2006

Migration GAIN of Older People to Lithgow LGA, top* source Local Government Areas 2006									
Local Government Area	55 to 64 years			65+			Total population		
	In	Out	Net	In	Out	Net	In	Out	Net
Blue Mountains (C) - NSW	80	17	63	84	10	74	673	206	467
Blacktown (C) - NSW	24	5	19				154	49	105
Hawkesbury (C) - NSW	15	3	12				75	33	42
Penrith (C) - NSW	15	3	12	13	3	10	161	100	61
Baulkham Hills (A) - NSW	14	3	11				30	12	18
Holroyd (C) - NSW	10	0	10				23	12	11
Mid-Western Regional (A) - NSW	15	5	10				85	90	-5

Source: ABS, Census of Population and Housing 2006, unpublished data. *Top refers to the top Local Government Areas where net migration is more than 10, (only the first 10 LGA's are displayed).

Table 3.6 shows that the LGA's of highest net migration loss in the period 2001-2006 were Bathurst Regional with a net loss of 227 people, of which 17 (7.5%) were aged 65+ years and Wyong, with a net loss of 84 people, of which 13 (15%) were aged 55-64 years.

Tables 3.4-3.6 show that few people seem to be moving to Lithgow from Regional NSW but rather, mostly from the Blue Mountains and Sydney. This suggests that older people may be moving to Lithgow due to its relatively lower housing costs and close proximity to Sydney. This trend may also be due to Lithgow's compact size and relatively good range of shopping and other services.

Table 3.6 - Migration Loss of Older People

Migration LOSS of Older People from Lithgow LGA, top* destination Local Government Areas 2006									
Local Government Area	55 to 64 years			65+ years			Total population		
	In	Out	Net	In	Out	Net	In	Out	Net
Wyong (A) - NSW	3	16	-13				49	133	-84
Bathurst Regional (A) - NSW				7	24	-17	98	325	-227

Source: ABS Census of Population and Housing 2006, unpublished data. *Top refers to the top Local Government Areas where net migration is less than 10, (only the first 10 LGA's are displayed) are displayed

2.5 Socio - Economic Advantage/Disadvantage

ABS produces indices of social advantage and disadvantage based on 2006 Census data (SEIFA) as follows:

Index of Relative Socio-economic Advantage and Disadvantage: Is derived from Census variables related to both advantage and disadvantage, like households with low income and people with a tertiary education. *This index placed the Lithgow LGA, compared to all other NSW LGA's, in the 3rd decile of advantage and disadvantage. This means that the Lithgow LGA is in the 20-30% lowest LGA's in NSW on this index. Lithgow had the 35th ranking of all LGA's in NSW meaning that there were 34 other LGA's that had a lower index than Lithgow.*

The SEIFA index of Relative Socio-Economic Disadvantage is derived from Census variables related to disadvantage, such as low income, low educational attainment, unemployment, and dwellings without motor vehicles. *This index placed the Lithgow LGA, compared to all other NSW LGA's, in the 2nd decile of disadvantage. This means that according to the index, the Lithgow LGA is among the 10-20% most disadvantaged LGA's in NSW. Looked at another way, Lithgow LGA had the 28th ranking for most disadvantaged LGA's in NSW. There were only 27 other LGA's in NSW that were more disadvantaged than Lithgow.*

The SEIFA index of Economic Resources focuses on Census variables like the income, housing expenditure and assets of households. *This index placed Lithgow in the 2nd decile of this index and 28th ranking compared to other NSW LGA's.*

The SEIFA index of Education and Occupation includes Census variables relating to the educational and occupational characteristics of communities, like the proportion of people with a higher qualification or those employed in a skilled occupation. *This index placed Lithgow in the lowest decile, that is among the lowest 10% of all NSW LGA's. Lithgow's ranking is 5th, meaning there are only 4 other LGA's in NSW with a lower ranking on this index.*

Source: Index of ABS Census of Population and Housing SEIFA 2006

2.6 Indigenous Older People

Indigenous people 45 years of age and over are defined as older due to the significantly lower life expectancy of Indigenous people.

Table 3.7 shows that in 2006, 24% of the Lithgow Indigenous population was 45 years of age and over, up from 17% in 2001 and 14% in 1996.

Table 3.7 Older People - Indigenous Population by Age 45+ years Lithgow LGA

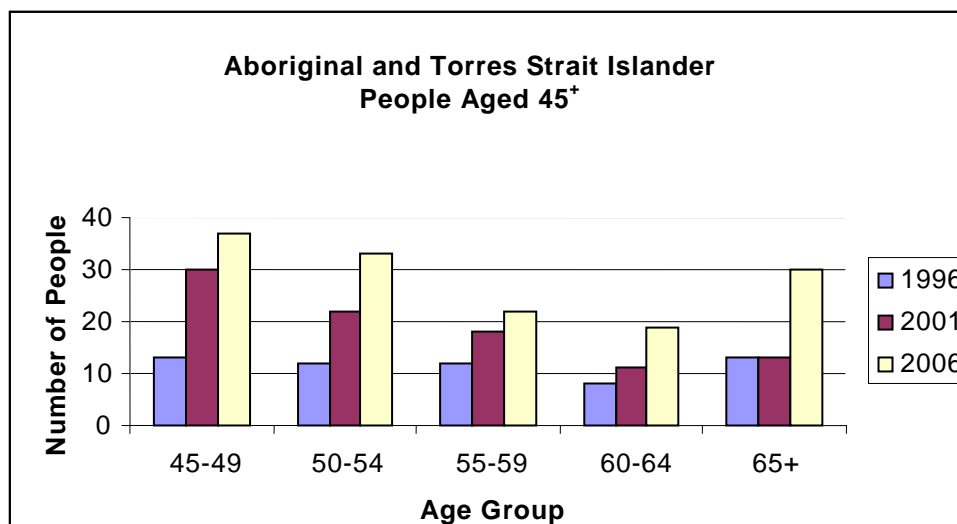
Age	1996			2001				2006				
	M	F	Total	%	M	F	Total	% *	M	F	Total	%
45-49 years	9	4	13		16	14	30		24	13	37	
50-54 years	5	7	12		11	11	22		16	17	33	
55-59 years	6	6	12		10	8	18		12	10	22	
60-64 years	3	5	8		6	5	11		12	7	19	
65 years & over	7	6	13		7	6	13		20	10	30	
Total	30	28	58	14% *	50	44	94	17%	84	57	141	24% *

* Percent of Total ATSI Population

Source: ABS Census of Population and Housing Time Series Profile 2006

Figure 3.7 shows that the number of older Indigenous people in each 5 year age group increased consistently between 1996 and 2006.

Figure 3.7



Source: ABS Census of Population and Housing 2006

2.7 Older People of Culturally and Linguistically Diverse (CALD) Backgrounds

Overseas Born

At the 2006 Census there were 1,717 overseas born people of all ages living in Lithgow LGA, which was 8.7% of the total population. Of the total Lithgow population, 4.9% were born in an English speaking country and 3.8% in a non-English speaking country. By comparison, 23.8% of the NSW population was overseas born with 6.9% born in an English speaking country and 16.8% in a non-English speaking country. **Figure 3.8** shows the percentage of the Lithgow and NSW populations (all ages) born overseas in 2001 and 2006 and whether they come from an English speaking or non-English speaking background.

The majority of the Lithgow overseas born population, (960 people) were born in the English speaking countries of the UK, New Zealand, Ireland and the USA while 757 people were born in a non-English speaking country, up from 639 in 2001. The main non-English speaking countries of birth in 2006 were Germany (82 people), the Philippines (66 people), Netherlands (60 people), China (47 people), Italy (45 people) and Poland (24 people).

Between the 2001 and 2006 Censuses, there were increases in the number of Lithgow people born in New Zealand, Germany, the Philippines, China, Italy and the USA. There was almost no increase in this period in the number of people born in the UK and a small loss of people born in Poland.

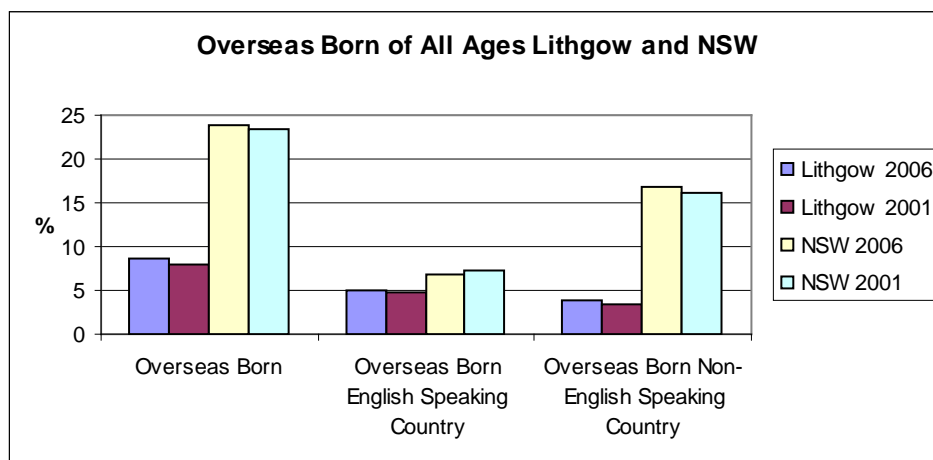
Recent Arrivals

Lithgow has very few people who have recently arrived from overseas. At the 2006 Census there were 1,716 people who had arrived in Australia from overseas with most (1,299 or 76%), having arrived before 1991. There were on average only about 10 newly arrived people per year between 1991 and 2006.

English Language Proficiency

A total of 73.4% (1,262 people) of overseas born people aged 5 years and over in Lithgow speak English only and a further 16.4% (288 people) speak another language and English either well or very well. Only 2.6% (44 people) speak another language and English not well or not at all. By comparison, 40.3% of the NSW overseas born population speak English only while 46.2% speak another language and English well or very well.

Figure 3.8



Source: ABS Census of Population and Housing 2006

Language Spoken

Of the total Lithgow population, 18,086 people (91.5%), speak English only. The most common other languages spoken are German, Italian, Cantonese and Filipino (Tagalog).

Older People of CALD Backgrounds

Most people aged 55+ years who live in the Lithgow LGA were born in Australia and of those born overseas, the largest number were born in the United Kingdom. At the time of the 2006 Census, 1,288 people aged 55+ years were born overseas which was 23% of all people aged 55+ years. 390 (30% of the total overseas born) of these were born in the United Kingdom. The most common non-English speaking country of birth of older people in 2006 was Germany (66 people), followed by Netherlands (40 people), Italy (29 people) and Poland (23 people). There were very few people aged 55+ years from South-East Asia or China.

At the time of the 2001 Census, there were 934 overseas born people aged 55+ living in Lithgow, and again the largest number (331) were born in the United Kingdom. The most common non-English speaking countries of birth of older people in 2001 were Germany (41 people), Netherlands (28 people) Italy (23 people) and Poland (25 people).

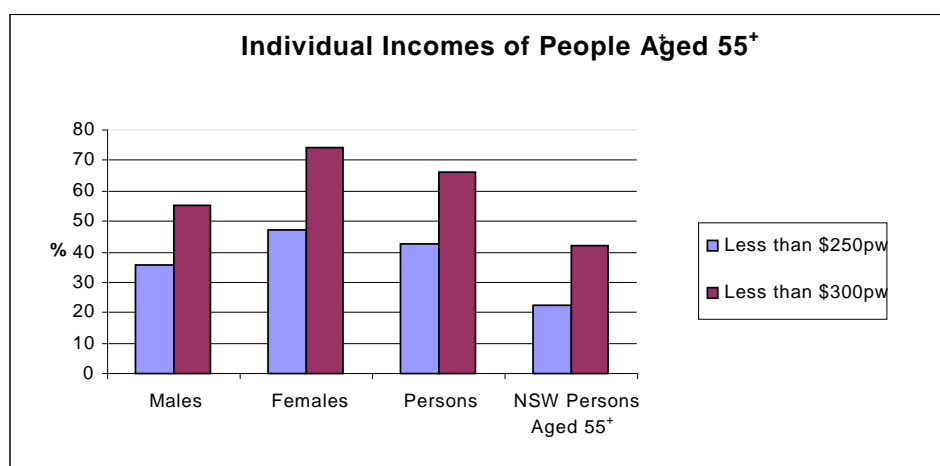
2.8 Other Characteristics of Older Population

2.8.1 Income

Figure 3.9 shows that older people in the Lithgow LGA received significantly lower incomes than the general population, which itself had relatively low incomes. At the 2006 Census, 42.7% of Lithgow older people received an individual weekly income less than \$250, compared to 22.2% of older people in NSW as a whole and 30.4% for the rest of the Lithgow population aged over 15 years.

Further, 66.0% of older people in Lithgow received a weekly individual income of less than \$300 compared to 42.2% of older people in NSW as a whole and 43.6% of the rest of the Lithgow population aged over 15 years.

Figure 3.9



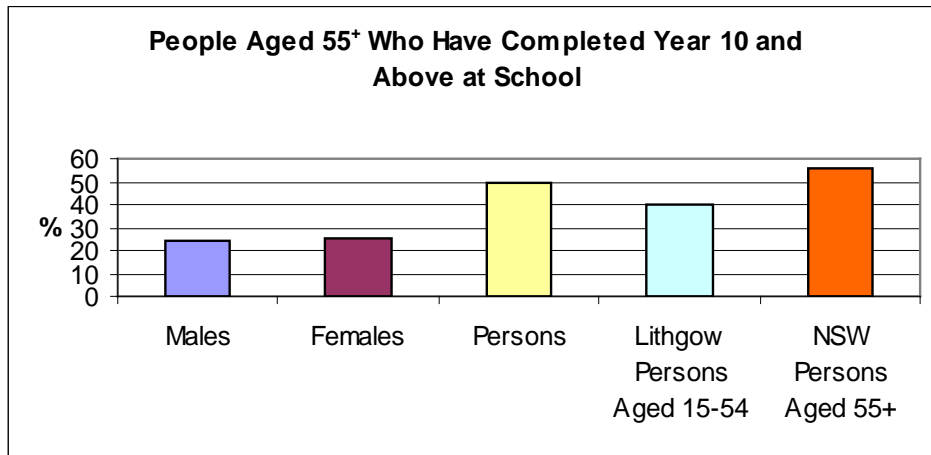
Source: ABS Census of Population and Housing 2006

2.8.2 Education

Figure 3.10 compares school completion rates of older Lithgow people with older people in NSW as a whole and to younger Lithgow people. While older Lithgow males and females had about the same school completion rates, the percentage of older Lithgow persons who completed year 10 and above

was 49% compared to 56% for NSW. Interestingly, only 40% of younger Lithgow persons completed school at year 10 and above.

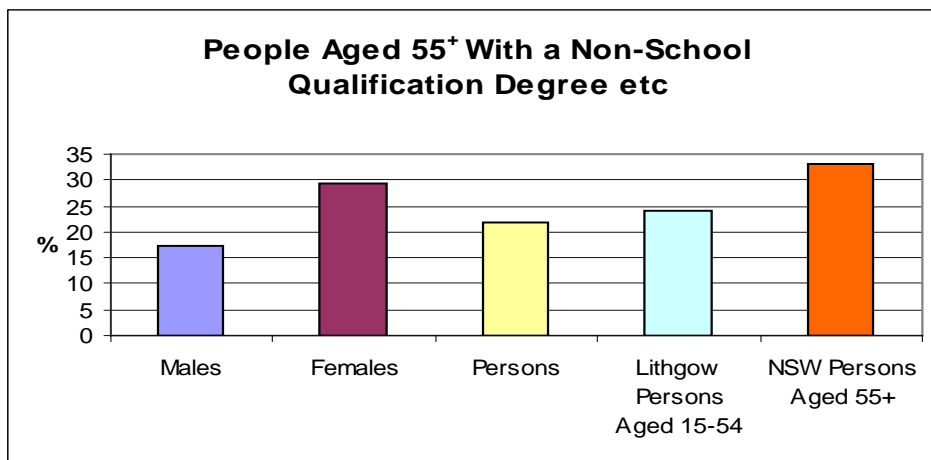
Figure 3.10



Source: ABS Census of Population and Housing 2006

Figure 3.11 shows that the percentage of older people in Lithgow with a diploma, degree or higher qualification was 22% compared to 33% for NSW as a whole. Women (29%) were more likely than men (17%) to have these qualifications.

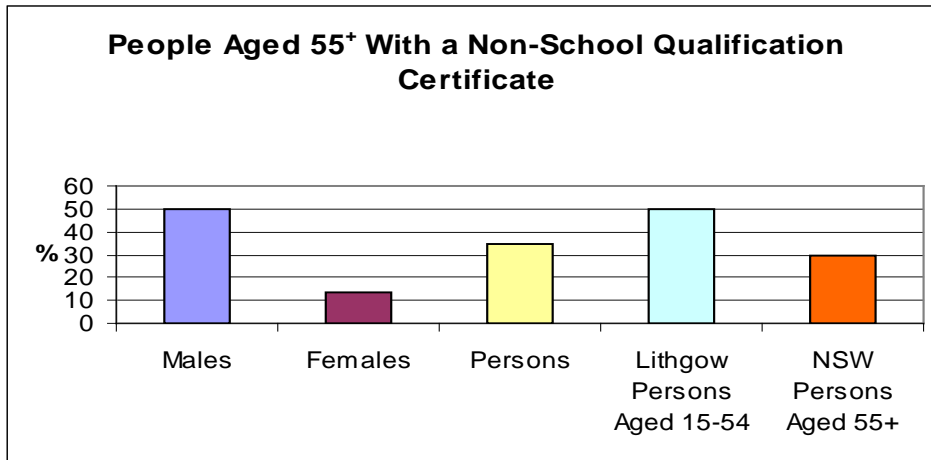
Figure 3.11



Source: ABS Census of Population and Housing 2006

Figure 3.12 shows that the percentage of older people in Lithgow with a certificate qualification was 35% compared to 30% for NSW as a whole. Men (50%) were more likely than women (14%) to have a certificate qualification.

Figure 3.12

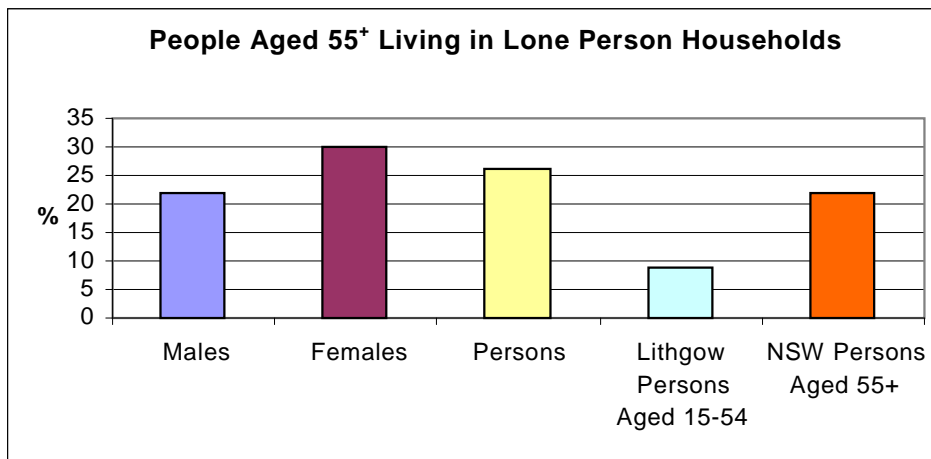


Source: ABS Census of Population and Housing 2006

2.8.3 Housing

Figure 3.13 shows that the percentage of older people in Lithgow living in lone person households was 26% compared to 22% for NSW as a whole. Women (30%) were more likely than men (22%) to be living alone.

Figure 3.13

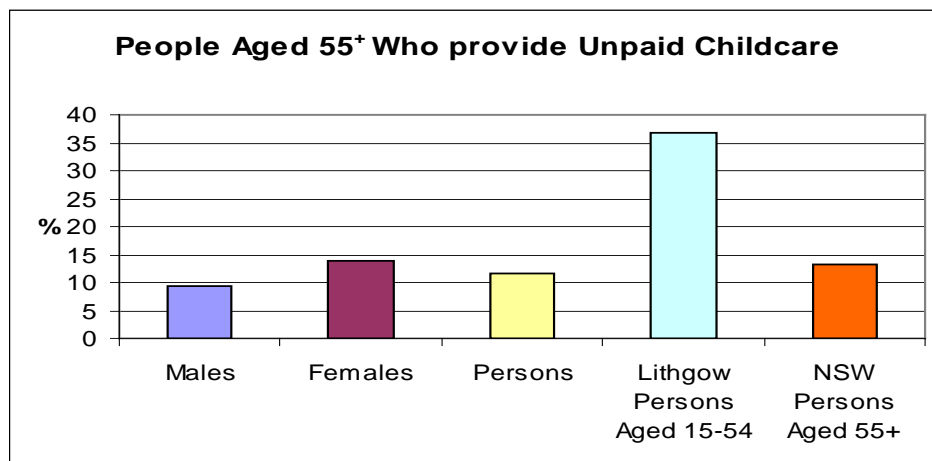


Source: ABS Census of Population and Housing 2006

2.8.4 Unpaid Childcare

Figure 3.14 shows that the percentage of older people in Lithgow providing unpaid childcare, for example to grandchildren and the children of other family members, was 12% compared to 13% for NSW as a whole. Lithgow women (14%) were more likely than men (10%) to be providing unpaid childcare.

Figure 3.14

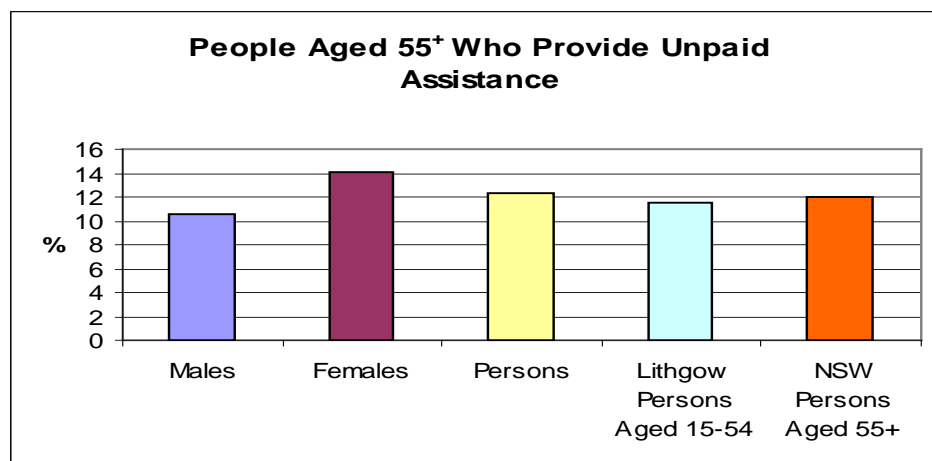


Source: ABS Census of Population and Housing 2006

2.8.5 Unpaid Assistance

Figure 3.15 shows that the percentage of older people in Lithgow providing unpaid assistance to a person with a disability, long term illness or due to problems with old age was 12% which was the same as NSW as a whole. Women (14%) were more likely than men (11%) to be providing unpaid assistance.

Figure 3.15

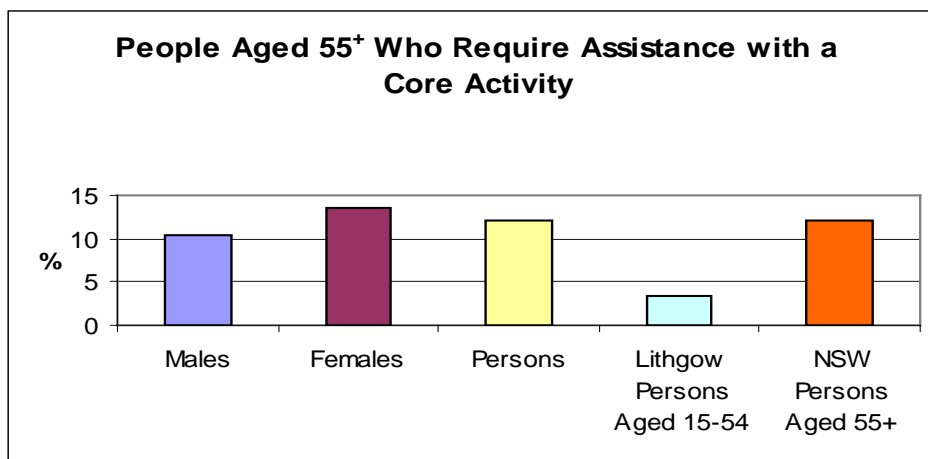


Source: ABS Census of Population and Housing 2006

2.8.6 Older People Who Require Assistance with a Core Activity

Figure 3.16 shows that the percentage of older people in Lithgow requiring assistance with a core activity was 12% which was the same as NSW as a whole. Women (14%) were more likely than men (11%) to require assistance. *The Core Activity Need for Assistance variable measures the number of people with a profound or severe disability needing help or assistance in one or more of three core activity areas of self-care, mobility and communication because of a disability, long term health condition or old age – source ABS.*

Figure 3.16

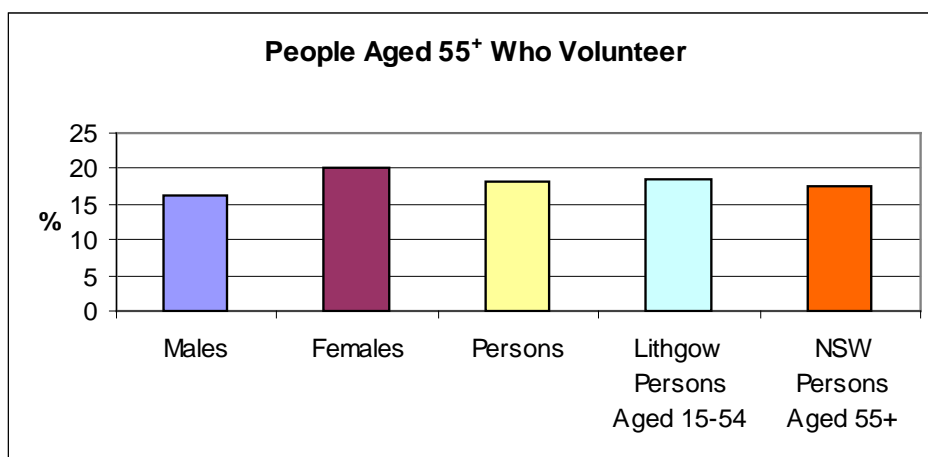


Source: ABS Census of Population and Housing 2006

2.8.7 Older People Who Volunteer

Figure 3.17 shows that the percentage of older people in Lithgow who volunteer was 18% which was the same as NSW as a whole. Women (20%) were more likely than men (16%) to be volunteering. This data is based on people doing voluntary work in the 12 months prior to Census night.

Figure 3.17



Source: ABS Census of Population and Housing 2006

3. Looking Forward - Population and Age Projections

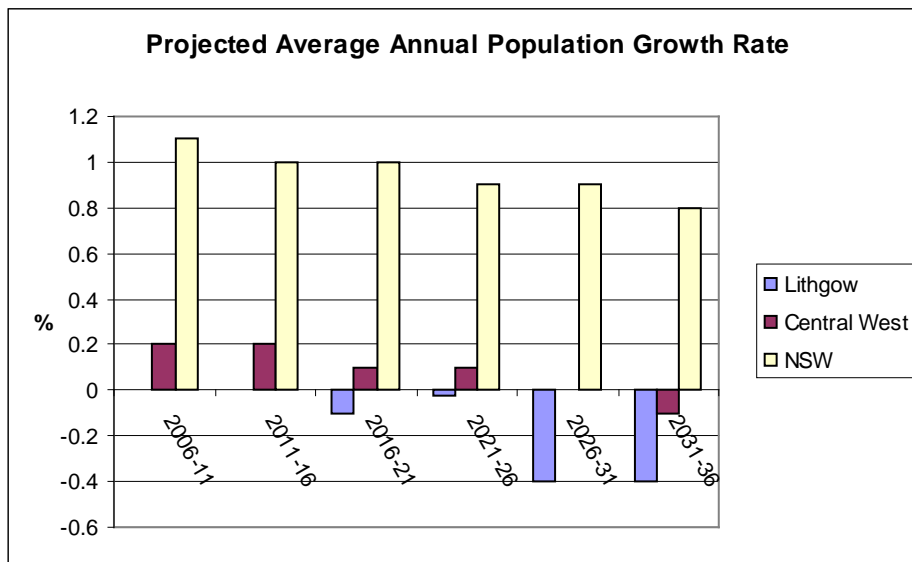
Figures 3.18 - 3.19 show for the period out to 2036, the projected annual population growth rate and the percentage of people aged 55+ in the Lithgow LGA compared to the Central West, NSW, and to the surrounding Blue Mountains and Bathurst LGA's.

These projections are produced by the NSW Department of Planning and Infrastructure (DPI) based on historical trends, current settlement patterns and demographic modelling techniques. These are projections only, and significant changes in economic factors, fertility rates, government population policy, immigration levels and other factors may affect these projections. The Lithgow Land Use Study (LUS), adopted by Council in late 2011, includes a growth rate target of between 0.5% to 1% for the LGA. A 0.5% annual growth rate would bring the Estimated Resident Population (ERP) to 22,596 in 2025 and a 1% annual growth rate would bring the ERP to 24,830 in 2025. Both targets are above NSW Department of Planning and Infrastructure projections. It is worth noting that the

Lithgow LGA ERP at 30 June 2010 was 21,094, which is above the 2006 ERP of 20,656. The Estimated Resident Population will be confirmed once 2011 ABS Census data becomes available in mid 2012.

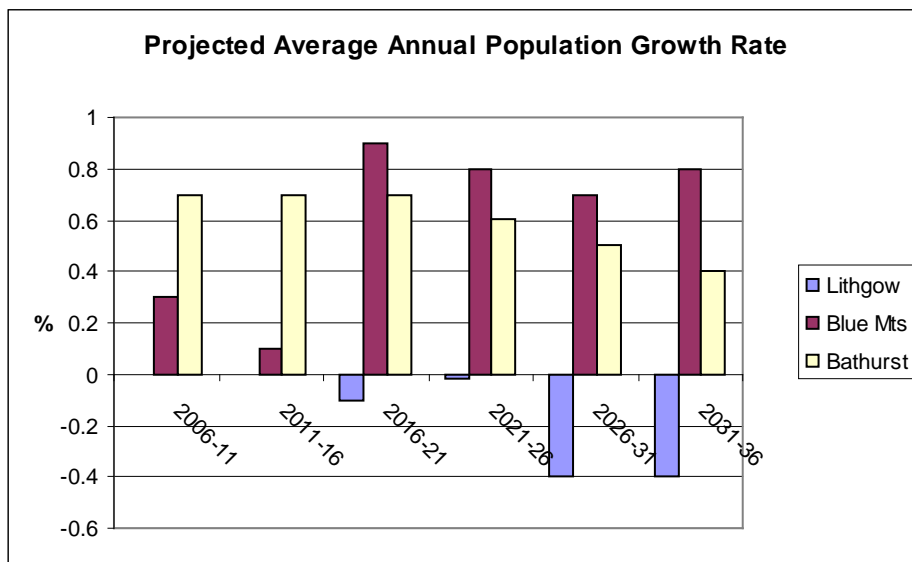
Figures 3.18 and 3.19 show that Lithgow's projected rate of annual population growth to the year 2036 is either zero or negative, whereas NSW and the Bathurst and Blue Mountains LGA's are projected to have significant positive growth in each 5 year period. The Central West Region is also projected to have growth in most 5 year periods although at a lower rate than NSW.

Figure 3.18



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036

Figure 3.19



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036,

Population projections prepared by the Western Research Institute (WRI) for Centroc in 2008 (based on 2005 population data)¹, show a higher population growth rate for Lithgow out to the year

¹ CENTROC Population Projections
Prepared by The Western Research Institute December 2008

2031 than that projected by the NSW Department of Planning and Infrastructure (DPI) in 2005. The WRI projects three scenarios as outlined in **Table 3.8** below:

Table 3.8
Western Research Institute Projected Population for Year 2031

	Projected Population
DPI 2005 projections	20,840
WRI Scenario A	22,189
WRI Scenario B	21,556
WRI Scenario C	21,048

Compared to the 2005 DPI projections, the WRI therefore projects extra population in the year 2031 ranging from 208 under scenario C, to 716 under scenario B, to 1,349 under scenario A. Under the 2010 DPI population projections however, Lithgow is projected to have a population in the year 2031 of 19,900 which is less than the 2005 DPI projected 20,840. No updated population projections are available from the WRI for 2010 so it is not possible to say if there might be a convergence or divergence between WRI and DPI projections.

Western Research Institute population projections (Scenario B 2008), show that by the year 2031, people aged 65+ years will form 24.3% of the population, up from 17.6% in 2011. This varies from the 2010 DPI projections of 30% aged 65+ years in the year 2031, up from 18% in 2011.

Table 3.9 shows NSW Department of Planning and Infrastructure projected increases in the number of people aged 55+ over time.

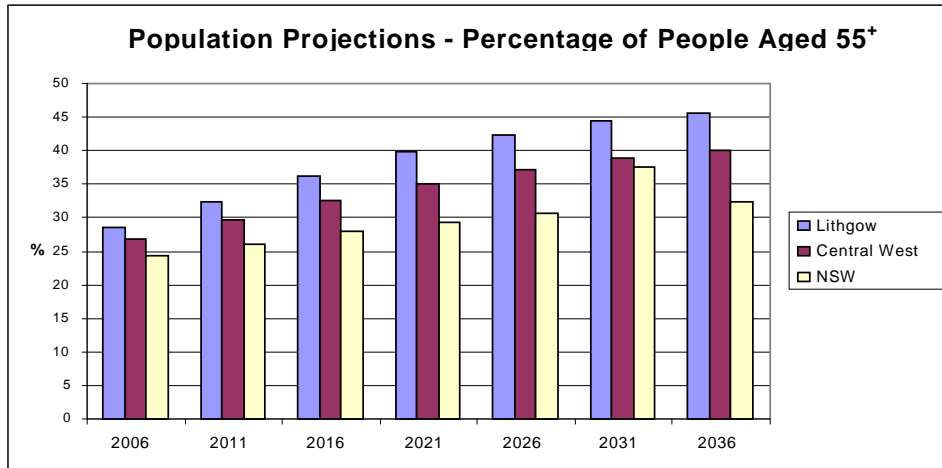
Table 3.9

Year	Projected Total Population 55+
2006	5,890
2011	6,670
2016	7,480
2021	8,160
2026	8,580
2031	8,860
2036	8,890

Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036, Prepared 2010

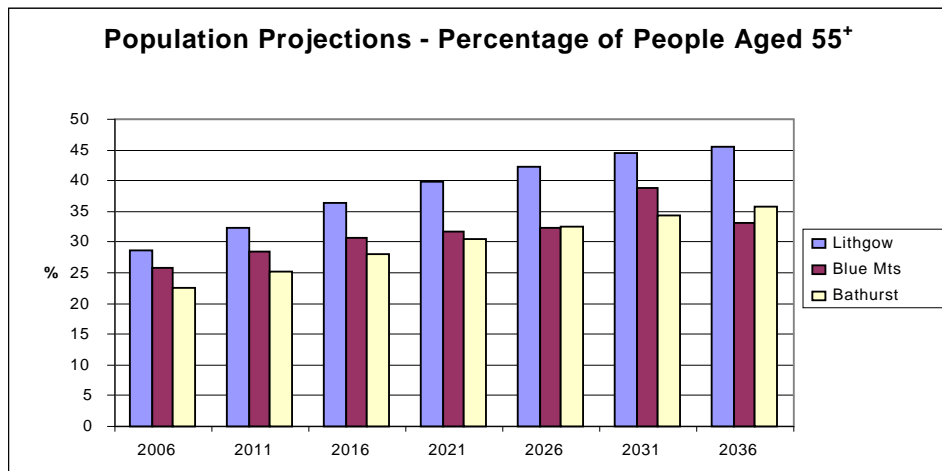
Figures 3.20 and 3.21 show that the percentage of people aged 55+ in the Lithgow LGA is projected to steadily rise from 29% in 2006 to 46% in 2036, significantly above the rates of NSW, the Central West and Bathurst and Blue Mountains LGA's. Further, the difference between Lithgow and these other areas increases over time.

Figure 3.20



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036

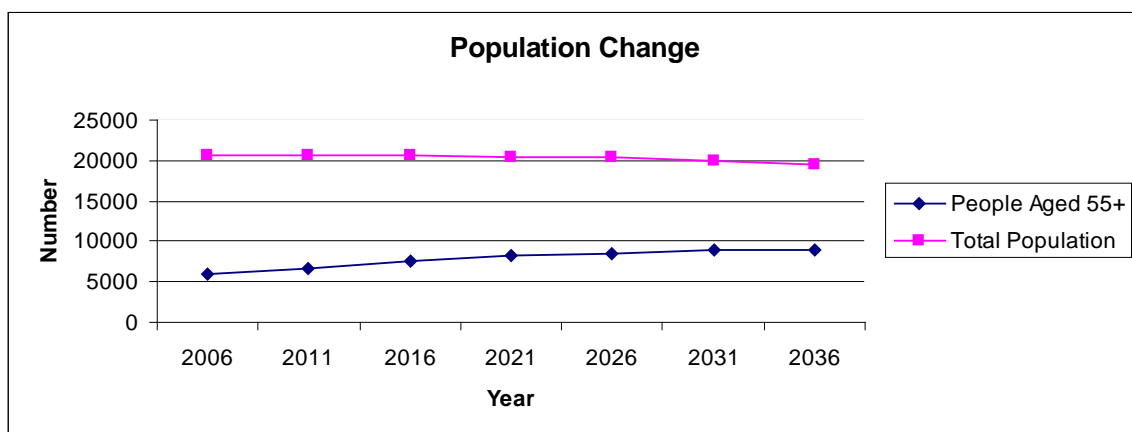
Figure 3.21



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036

Figure 3.22 shows that population levels will be static out to the year 2016 and will then decline somewhat out to the year 2036. The number of people aged 55+ will also increase steadily until the year 2021 after which the rate of increase will slow.

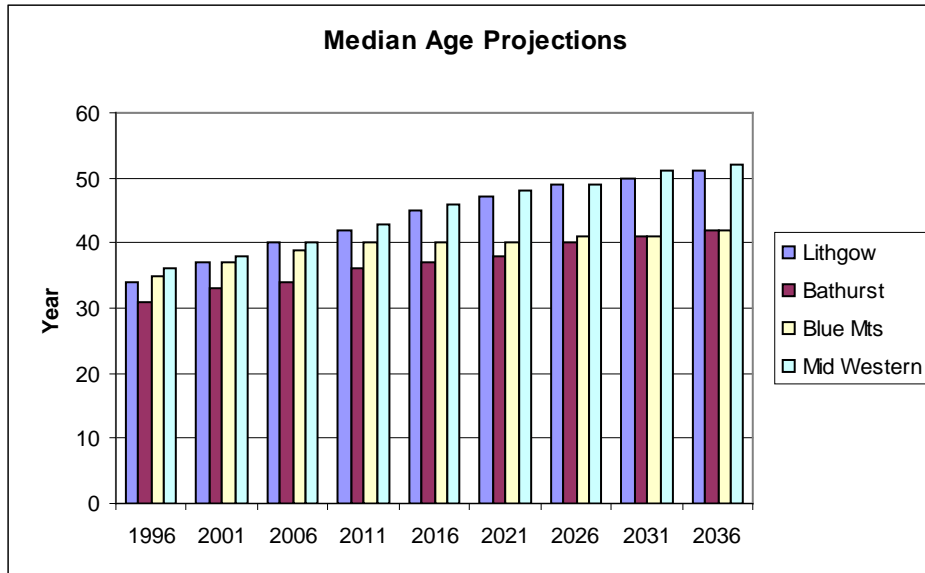
Figure 3.22



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036

Figure 3.23 compares the projected median age* of Lithgow with surrounding LGA's and shows that the median age of the Lithgow population is projected to steadily rise from 34 years in 1996 to 51 years in 2036. While the projected median age of Mid Western Regional Council tracks the Lithgow median age fairly closely, the projected median ages of Bathurst and Blue Mountains by the year 2036 are 10 years less than Lithgow.

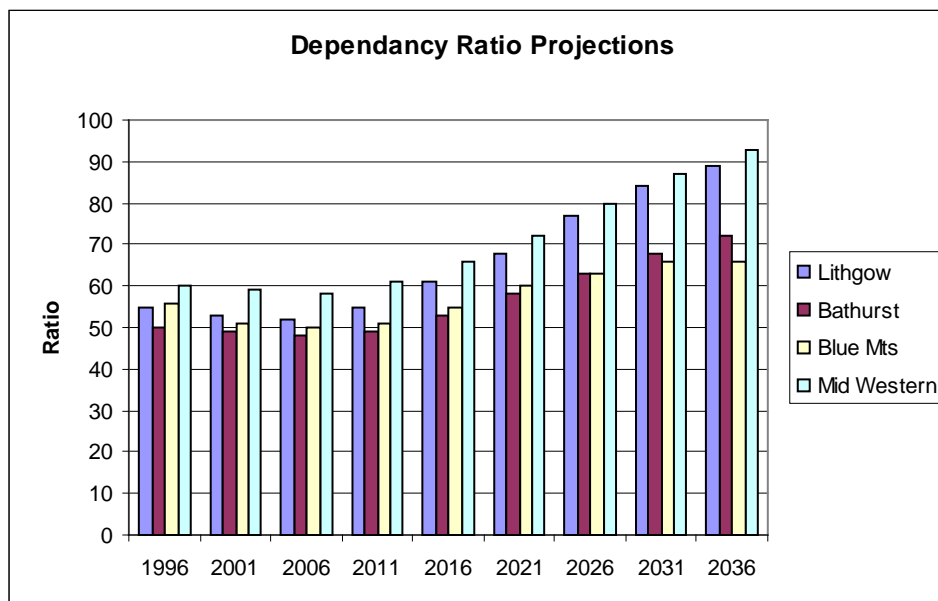
Figure 3.23



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036
 *The median age is the age at which half the population is older and half is younger

Figure 3.24 compares Lithgow's dependency ratio with surrounding LGA's. Lithgow's dependency ratio fell slightly between 1996 and 2006 but is projected to rise markedly from 52 in 2006 to 89 in 2036, less than Mid Western Regional Council but significantly above Bathurst and Blue Mountains. These projections point to a decreasing number of people in the working age population.

Figure 3.24



Source: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036
 Dependency ratio is the number of people aged 0-14 and 65+ per 100 people aged 15-64

Figures 3.25 - 3.28 compare the age distribution, by gender, of the Lithgow population in 2006 with the projected age distribution in the years 2016, 2021 and 2036. The horizontal bars show the 2006 age distribution and the dark blue shading shows the projected distribution. **Figures 3.25-3.27** show an increasing reduction in the numbers of children and people in the younger aged groups and increases in the older age groups, even by the year 2016 and increasingly so by 2021 and 2036.

By 2036, there are reductions, compared to 2006, in the number of people in all groups up to age 59.

Figure 3.25

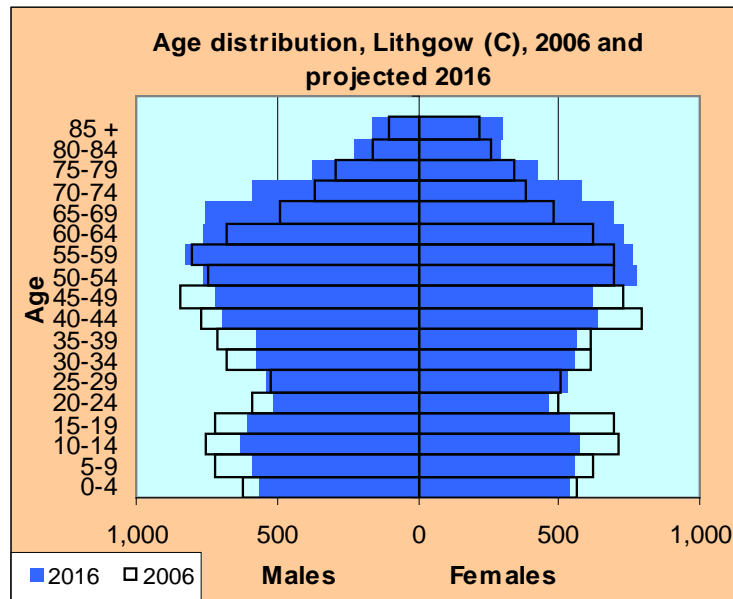


Figure 3.26

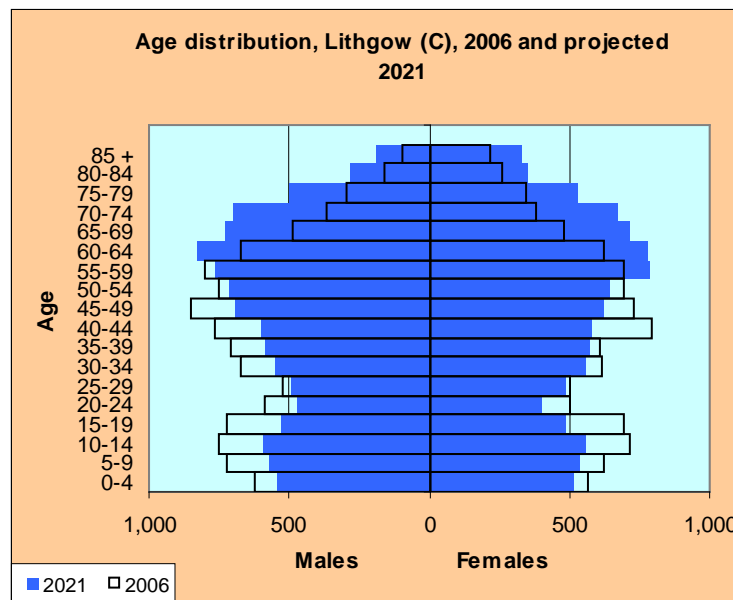


Figure 3.27

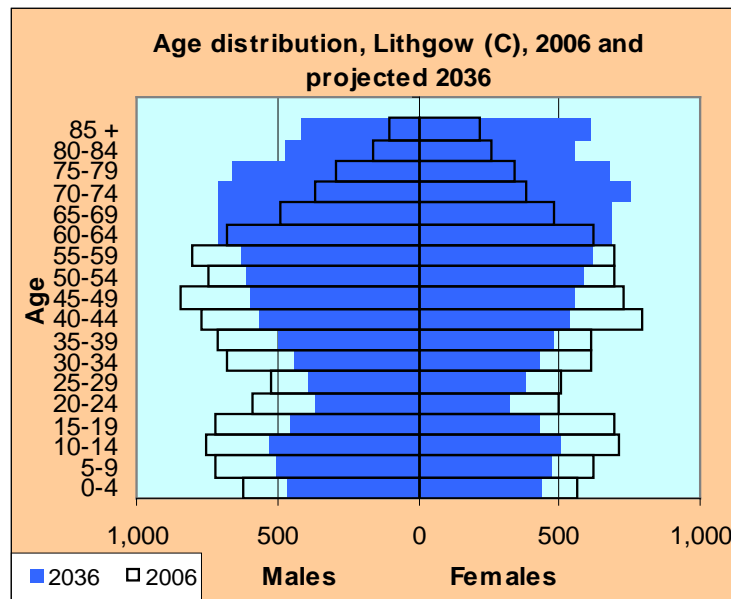
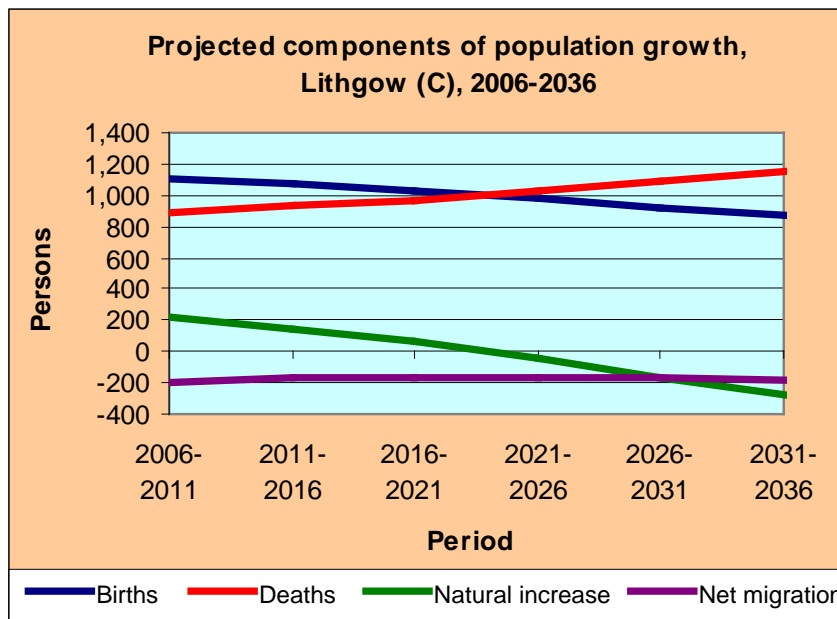


Figure 3.28 shows the projected components of population change for the period 2006-2036. This clearly shows that Lithgow’s population loss will be due to a decreasing birth rate and a steady net migration loss from Lithgow.

Figure 3.28



Source Figures 3.14-3.17: NSW Department of Planning and Infrastructure Population Projections for Statistical Local Areas, 2006 to 2036

4. Summary of Profile

The preceding profile shows that while the Lithgow population currently has a similar age distribution to NSW and Regional NSW, the population of Lithgow is ageing at a faster rate than both NSW and Regional NSW. There were 5,523 people aged 55+ at the 2006 Census, up from 3,966 at the 1996 Census – a 39% increase in 10 years.

Lithgow is projected to have either zero or negative population growth out to the year 2036 while NSW and the surrounding Bathurst and Blue Mountains LGA's are projected to have significant positive growth in the same period. It is projected that the Lithgow population will remain at around 20,600 people to the year 2016 after which it will fall back to around 19,500 by the year 2031.

In its 2007 Strategic Plan, Lithgow City Council established a growth rate target of 1% to 2% for the LGA. A 1% annual growth rate would bring the population to 25,496 in 2025 and a 2% annual growth rate would bring the population to 31,053 in 2025. Both targets are well above Department of Planning population projections. Both the draft Lithgow Land Use Strategy² and the Lithgow Economic Development Strategy 2010-2030³ recommend a revision downwards to 0.5-1% pa.

In tandem with the fall in the overall population, are projections that the percentage of people aged 55+ years in Lithgow will rise from 29% to 46% by 2036. Again, this is significantly higher than NSW, Regional NSW and Bathurst and Blue Mountains LGA's.

In numerical terms, there will be 3,000 more older people aged 55+ in the year 2036 than there were in 2006. This represents a 50% increase.

The median age of the Lithgow population is projected to rise from 40 years in 2006 to 51 years in 2036, at which time it will be about 10 years above the median age of Bathurst and Blue Mountains LGA's, but slightly less than Mid Western Regional Council LGA.

An increasing number of older people and a loss of children, youth and those in the working age groups will pose a major challenge to Council, other levels of government and to the local economy and service industry.

The profile also shows:

- There has been an increasing number of older Aboriginal and Torres Strait Islander people (defined as those aged 45+ years) in Lithgow, up from 58 people in 1996 to 141 people in 2006.
- The incomes of older people are generally low, with nearly 43% of older people earning less than \$250 per week at the time of the 2006 Census.
- People aged 55+ have higher rates of year 10 and above school completion than the rest of the Lithgow population with 22% of people aged 55+ having completed a degree or higher qualification 35% having completed a certificate level qualification.
- About 1 in 4 older people live on their own with women more likely than men to live on their own.

² Lithgow Land Use Strategy 2010-2030
Lithgow City Council 2011

³ Lithgow Economic Development Strategy 2010-14
Lithgow City Council 2011

Chapter 4 Lithgow Ageing Survey

A survey of people aged 55+ years was undertaken in June/July 2010 to gain the views of older people across a range of issues. Surveys were distributed through organisations that work with older people, copies were made available at Lithgow Library and Portland and Wallerawang Branch libraries and Council's Customer Service counter and were also distributed to people on a number of different days at Lithgow Valley Plaza.

An online version of the survey was also made available on Council's website. A total of 260 survey responses were received which represents almost 5% of the total population aged 55+ years. Council is very pleased with the number of survey respondents considering the length of the survey (49 questions) and that it was not possible to distribute the survey to every household. A copy of the survey is at Appendix 2. Following is the profile of the people who completed the survey.

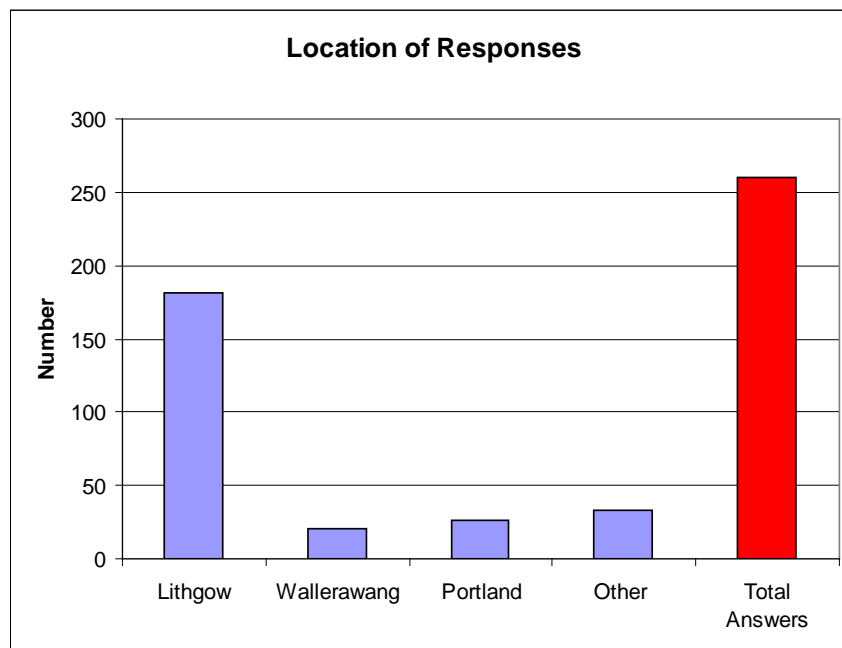


Responses to individual survey questions are included in the relevant chapters throughout this Ageing Strategy report. A full list of survey responses are shown at Appendix 4.

Profile of Survey Responses

Of the people who completed the survey, 70% live in Lithgow town although there are significant numbers of people living in the other townships within the Lithgow LGA.

Figure 4.1



More than 60% of survey respondents were women although there are also almost 100 male respondents.

Survey respondents represent all age groups with fairly equal numbers of people from the 60-64, 65-69, 70-74, 75-79 and 80+ age groups. A significant number of responses from mature couples and from people living on their own were also received.

Figure 4.2

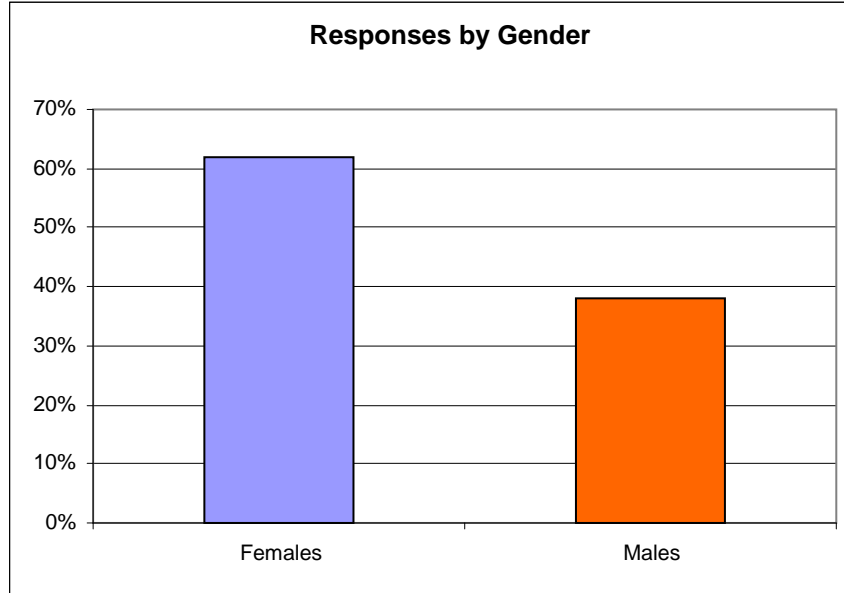


Figure 4.3

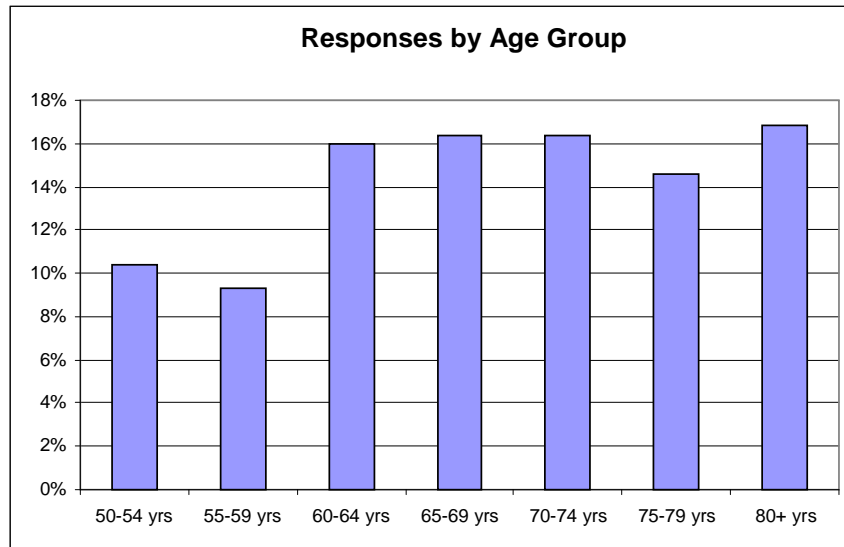
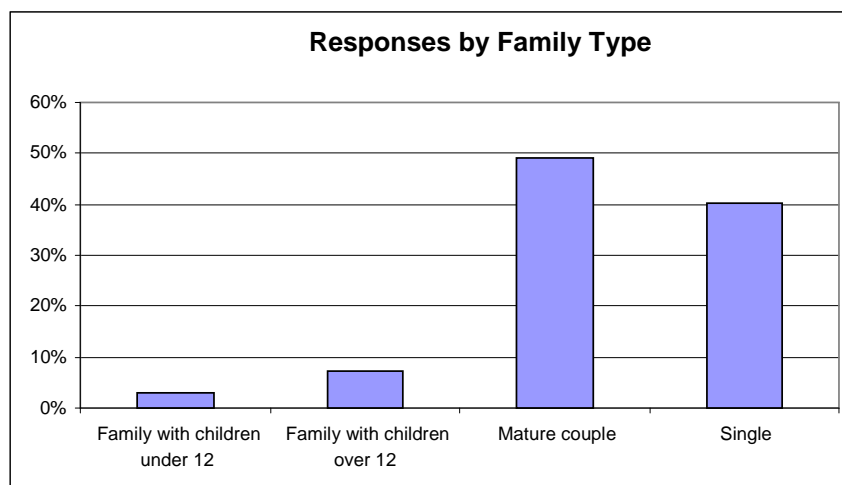


Figure 4.4



Question 1. How Long Have You Lived in Lithgow?

The survey asked people how long they have lived in Lithgow with 60% of respondents saying they were either born or have lived here for more than 20 years. Nearly 30% however have lived in Lithgow for 10 or less years which suggests a significant number of relative newcomers who may not have as strong family and other supports as those who have lived here longer. There are some gender differences, with men less likely to be born in Lithgow than women but more likely to have lived here for 10+ or 20+ years. Men are also more likely than women to be newcomers to Lithgow.

As might be expected, older people living in Portland and Lithgow town are more likely to have been born here although there are significant numbers of people living in Wallerawang and Hartley who although not born there, have lived in Lithgow LGA for more than 20 years.

Figure 4.5

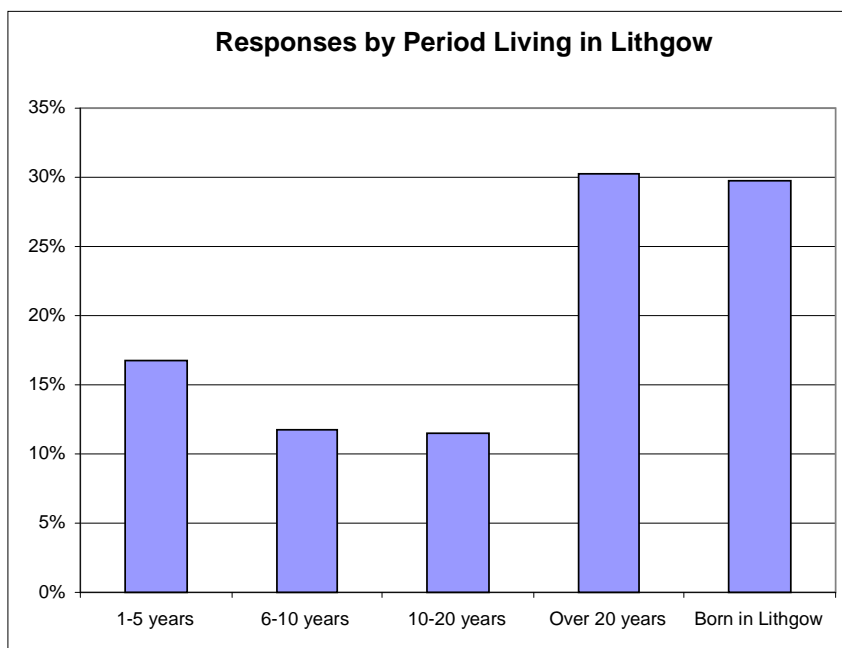
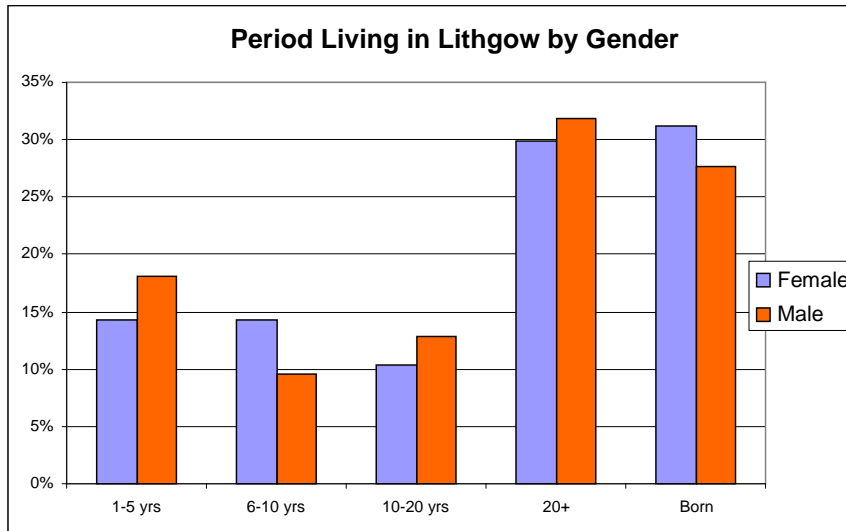
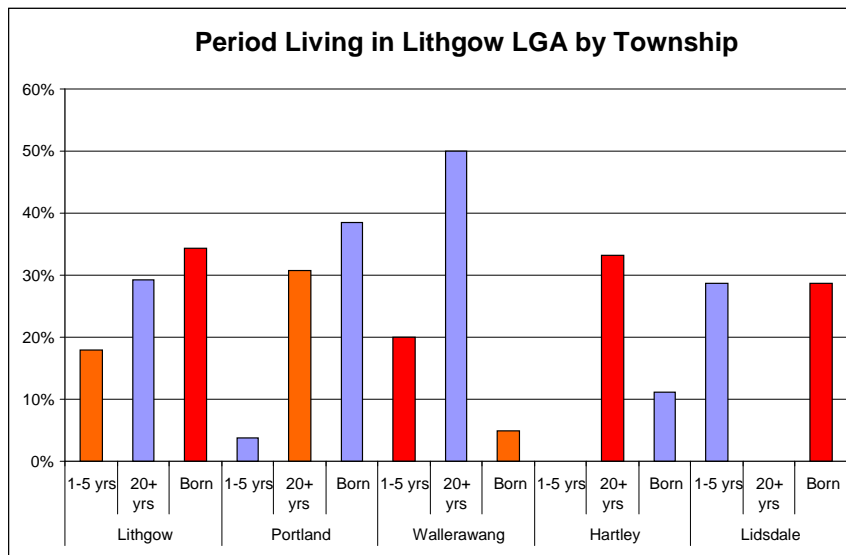


Figure 4.6



Question 2. Where Do You Live In Lithgow?

Figure 4.6



Chapter 5

Preparation for Ageing

5.1 Introduction

Perhaps now more than at any previous time in history, ageing is something that people prepare for. Longer life expectancies now mean that people are more likely to live well beyond the traditional retirement age. By the years 2007-2009, average Australian life expectancy was 79.3 years for males and 83.9 years for females. This represents a substantial increase from previous generations, including recent generations¹.

The widespread availability of superannuation incomes has also contributed to a change in attitudes to ageing. Significant numbers of older people can now look forward to a more secure financial situation in their older years and access to lifestyle and housing choices unknown in previous generations. Many in the next generation of older people, "the baby boomers", will likely have even higher wealth and higher expectations of retirement.



Conversely, older people without sufficient wealth and retirement income may face financial and other difficulties during their older years. As the Community Profile in Chapter 3 shows, the incomes of older people in Lithgow are generally low with nearly 43% of older people earning less than \$250 per week at the time of the 2006 Census.

5.2 Survey

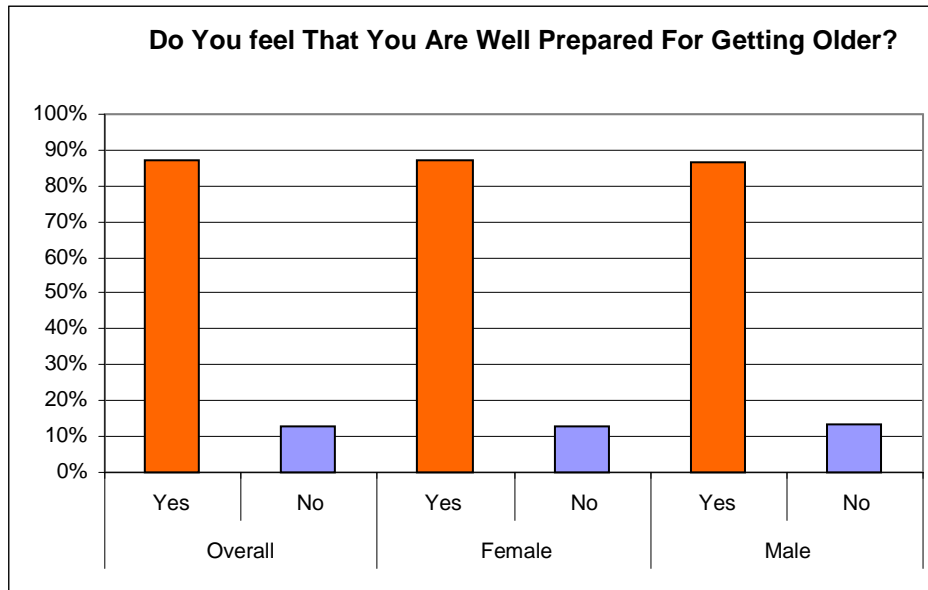
The survey asked a number of questions about how well people feel they are prepared for ageing. Figures 5.1 and 5.2 show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

Do You Feel You Are Well Prepared For Getting Older?

Figure 5.1 shows that almost 90% of survey respondents say they feel well prepared for getting older, with little difference between men and women. Those living in Lithgow, Wallerawang and Portland and those in the older age groups are more likely than the rest to say so. People living in a family with children over 12 years are less likely to say they are well prepared.

¹ Life Expectancy Trends – Australia
Australian Bureau Of Statistics
Canberra

Figure 5.1

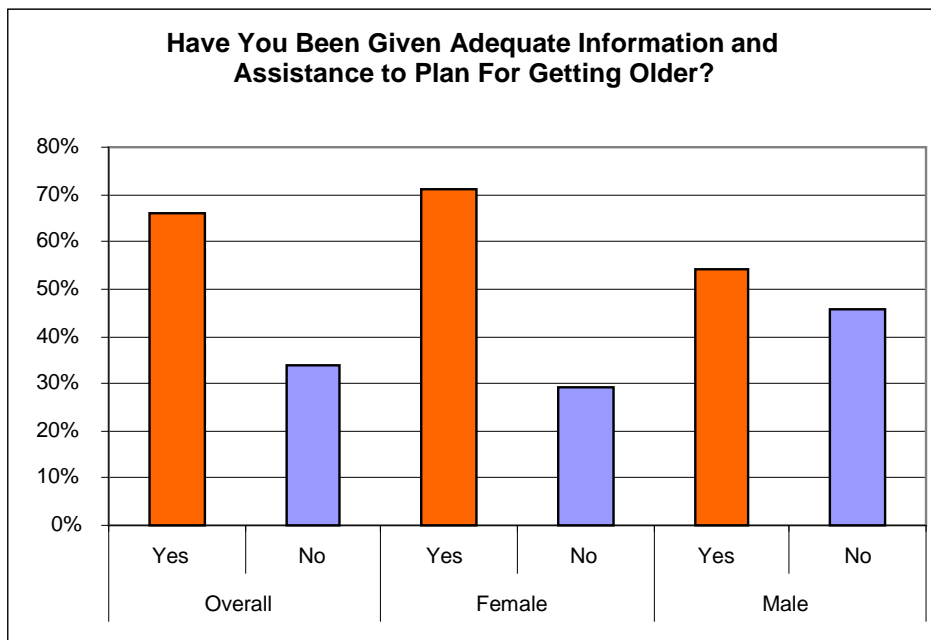


Have You Been Given Adequate Information And Assistance To Help You Plan For Getting Older?

The survey asked if people felt they had been given adequate information and assistance to plan for getting older with 66% of survey respondents saying they had, but 34% saying they hadn't.

Men are far less likely than women to say they had, with nearly 50% saying they hadn't been given adequate information and assistance. Significant numbers of people across all age groups say they haven't been given adequate information and assistance as do people living in families with children.

Figure 5.2



What Types Of Things Would Help Or Would Have Helped You To Better Prepare For Getting Older?

The survey asked people to list the types of things that would help or would have helped them to better prepare for getting older. The most common responses to this question were:

- better access to and availability of information
- community education and workshops
- recreational and exercise programs
- financial planning

5.3 Conclusions and Recommendations

As discussed in the introduction to this chapter, longer life expectancies mean that people are now more likely to live well beyond the traditional retirement age. This highlights the need for older people to plan for a long, healthy, socially engaged, active and financially secure retirement.

Some will have sufficient wealth and income for their older years, while many will not. An increasing number of older people will live alone and may face additional challenges.

Preparation for ageing involves consideration of a number of factors including finances, lifestyle, education, health, work, housing, and planning for the point at which people can no longer live independently. A very strong theme throughout the Ageing Strategy survey and consultations has been the strong connection that people feel to the community. Even where older people express a willingness to consider downsizing from their current housing situation, the overwhelmingly strong preference is to remain living in their current home. It is essential that as far as is possible, preparation for ageing supports the principle of “ageing in place” so that the connections and supports that older people value are maintained.



People stated a number of times during the community consultations that there is a lack of information available to assist them to prepare for ageing.

A number of these factors are considered in further detail in the different chapters of this report.

Retirement itself is a changing concept with increasing numbers of older people working part-time beyond age 65, either by choice or necessity. This will require the adoption of flexible working arrangements and recognition by employers and the community of the value of older employees.

Financial Planning

For many people approaching retirement, decisions about finances and housing will have a major long term impact on their retirement quality of life. Financial planning programs and seminars would provide quality and independent advice to older people as they plan for retirement.

Housing

See Chapter 9 Housing and Accommodation for recommendations to promote housing choice and to increase the supply of smaller dwellings suitable for older single people and located

close to shops and services; affordable housing including dual occupancy and granny flats, and; ensuring there is sufficient adaptable housing to allow older residents to age in place.

Work

Promotion of flexible working arrangements including part-time work and recognition by employers and the community of the value of older employees.

Education

Lithgow is a Learning City which seeks to foster lifelong education. Ongoing education can take many forms including community based education programs through to TAFE and university courses. Participation in these programs can offer social engagement opportunities for older people and the chance to learn the things they may have always wanted to, but lacked the time for.

See Chapter 6 Social Engagement recommendations.

Health

Access to hospital, medical and ancillary services is a critical issue for older people. Older people need to be aware of the range of medical and ancillary services that are available. Proximity to medical and hospital services is an important consideration at the time older people consider a change in their housing location.

See Chapter 10 Health and Community Care recommendations.

Information

Older people require information resources to assist them to plan and be prepared for ageing. There is a large amount of information from different sources on the various aspects of ageing which could be brought together in the form of an ageing resource kit. This could take the form of a sample bag that could be added to as the new information becomes available.

Council could also provide this information on the Council website and produce "What's on" newsletters for older people.

Access to Services

Access to services during their older years can enable people to live at home longer, in the community that they know and where they are known, with dignity, quality of life and independence. It is crucial that people are informed about the range of services available to them and how to navigate through the service network.

See Chapter 10 Health and Community Care recommendations.

Preparation for Ageing Action Plan			
Objective	Action	Key Partnerships	Priority*
Information Older people have the information resources to assist them to plan for ageing	Council to provide preparation for ageing information kits, information on the Council website and "What's On for Older People" newsletters	Council, aged service sector and media.	High
Financial Planning Older people receive quality and independent financial	Develop financial planning programs and seminars to older people prior to and during retirement	Council, aged services and finance sector	Medium

Preparation for Ageing Action Plan			
Objective	Action	Key Partnerships	Priority*
planning advice prior to and during retirement			
Work Older people have access to flexible working arrangements and part-time work	Promotion of flexible working arrangements including part-time work by Council and other employers, and recognition by employers and the community of the value of older employees	Council and business	Medium
	Employment programs to be targeted to older workers	Council and business	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 6 Social Engagement

6.1 Introduction

The benefits of social interaction with family, friends and community are well known. People who are engaged with others are more likely to have better physical and mental health.

The Australian newspaper has recently reported on overseas scientific research¹ that shows that social isolation and having a poor social network can be as harmful as smoking 15 cigarettes a day or heavy drinking of six units of alcohol a day.

A scientific review of 148 previous studies involving more than 300,000 people found that those with adequate social relationships were 50 per cent more likely to be alive after an average follow-up period of nearly eight years, compared to more socially isolated people.

The study found that social interaction benefited people of all ages and that social isolation is also worse for someone's health than such better-recognised health risks as avoiding exercise, and twice as bad for one's health as being obese.

Theories for why this is so include that the support of other people may reduce the harmful effects of stress, and the influence of others may also encourage behaviour that contributes to good health.

This research shows that clearly there are very good reasons for developing strategies and initiatives that promote social engagement.

A person's degree of social engagement is affected by a number of factors including the locality where they live, their family relationships, financial situation, health and mobility, transport availability and cultural background. The level of social cohesiveness within a community and the accessibility of networks and groups also affect the ability of people to engage. In communities experiencing rapid economic and demographic change, younger family members may leave, resulting in the loss of family supports for older people.

While Lithgow has generally been considered to have a fairly stable community with families remaining here across several generations, this appears to be changing which may have significant impacts on older people including a loss of family supports and an increasing need for carers and residential respite.



¹ The Australian Newspaper 29 July 2011 reporting on research led by Timothy B Smith Department of Psychology, Brigham Young University, Provo, Utah

The extent to which people are prepared to participate in community life is significantly influenced by community safety and perceptions of safety. This chapter considers the safety concerns of older people and discusses the work being undertaken by the Lithgow Crime Prevention Committee.

This chapter also considers the potential benefits for older people from engagement in educational opportunities.

6.2 Social Engagement

6.2.1 Lithgow Strategic Plan 2007

The 2007 Lithgow Strategic Plan² adopted the strategy of *Encouraging equitable access to services and facilities which meet the needs of the community*. Identified actions in the Strategic Plan included:

- provide support to community organisations through Council's Financial Assistance program to improve their ability to plan and deliver community services
- develop partnerships with community service providers
- celebrate and grow volunteering

See Appendix 5 Lithgow Strategic Plan for further detail.

The SWAHS Health Impact Assessment of the Strategic Plan³ recommended that Council:

- consider ways of encouraging older people to play meaningful roles in the community
- audit existing recreational areas for accessibility and plan progressive modifications
- develop strategies to address the causes of lack of social support and poor coping skills

See Appendix 5 Lithgow Strategic Plan for further detail.

6.2.2 Lithgow Social Plan 2006

When asked during development of the 2006 Social Plan⁴, what was good about living in the Lithgow LGA for older people, a number identified Beehive and the Lithgow Library Learning Centre. Beehive is a community based centre offering education and arts and crafts courses as well as social contact. The Library Learning Centre offers a comprehensive local history collection and Community Technology Centre (often utilised by Beehive, for seniors courses, and by other community groups.)

Older people also expressed a need for other educational opportunities including establishing a University of the Third Age.

See Appendix 6 for more detail.

6.2.3 Community Consultation

In general, people spoke very highly in the Ageing Strategy community consultations about the community of Lithgow. Common statements were that Lithgow is a lovely town and good spot to live, with friendly people. It was also stated that the town sticks together in a crisis, is resilient, generous and stable. People also mentioned some of the groups and activities that

² Lithgow Strategic Plan
Lithgow City Council 2007

³ Health Impact Assessment of the Lithgow Strategic Plan 2007
Sydney West Area Health Service 2008
Now Nepean Blue Mountains Local Health District

⁴ Lithgow Social Plan 2006-11
Lithgow City Council 2008

they felt contributed to making Lithgow a good place to live including the Workies, Bee Hive and Gorrie Ban.

6.2.4 Volunteering

There are a relatively large number of community and service organisations across Lithgow LGA which provide opportunities for social contact by older people, both as participants and volunteers. There are many examples where people of all ages volunteer, including Tidy Town organisations, environmental groups, delivering meals on wheels or visiting frail and isolated older people at home, cultural groups, sporting groups, service organisations and library volunteers to name a few. Volunteering is a great way for older people to contribute to the community and to have social contact with others. Many of the functions and services that we see and take for granted around the community, rely to some extent on the work of volunteers. Volunteering is an essential part of the social fabric of communities which builds connections between people irrespective of their gender, race or social situation.

An important challenge for many voluntary organisations is to maintain and renew their membership and to attract needed funding and resources. While volunteering may seem to be far more popular amongst older people, in fact many young people volunteer as well, especially in sporting, recreational and environmental areas. There are significant potential benefits for voluntary organisations from seeking to involve volunteers from a wider age range and social backgrounds. These include sustaining the group membership, enhancing the skill base and providing opportunities for the young and older members to mix, collaborate and learn.

6.2.5 Gorrie Ban

Gorrie Ban is a volunteer run activity centre that meets every Monday in the Fatima Hall Bowenfels. Their weekly program is very popular with up to 60-70 older people attending including both active and frail older people. Gorrie Ban has run successfully for many years on a volunteer base and with little outside assistance.

6.2.6 Lithgow Senior Citizens Centre

Lithgow Senior Citizens Centre has met for many years in the old Hoskins Building, owned by Council, on the corner of Mort and Bridge Streets Lithgow.

They meet every Thursday and Friday afternoon with about 30 people attending each week. Activities include cards, bingo, indoor bowls and afternoon tea.

This long established group is quite self-sufficient and attracts new members through word of mouth.

Unfortunately, their premises don't meet fire safety and other building requirements. Further, a proposal has been under consideration for the University of Western Sydney to establish a campus in the building.

Whether or not the UWS proposal proceeds, suitable alternative premises need to be found for the Senior Citizens Centre group. This may not mean dedicated premises, but shared premises with other groups. Lithgow Senior Citizens Centre is permanently set up for their current activities including indoor bowls. If shared premises were to be found, this might mean that they and each other user group would need to setup and pack-up after each session.

Lithgow Senior Citizens Centre highlighted the importance of their current location being close to the centre of town as many of their members don't drive. They made the point that Lithgow lacks a town hall/civic centre.

6.2.7 Men's Sheds

There are currently two men's sheds in the Lithgow LGA, one in Lithgow and another in Portland. As the Australian Men's Shed Association (AMSA) says⁵ " *The modern Men's Shed is an updated version of the shed in the backyard that has long been a part of Australian culture. Men's Sheds are springing up all around Australia. If you looked inside one you might see a number of men restoring furniture, perhaps restoring bicycles for a local school, maybe making Mynah bird traps or fixing lawn mowers or making a kids cubby house for Camp Quality to raffle. You might also see a few young men working with the older men learning new skills and maybe also learning something about life from the men they work with. You will see tea-bags, coffee cups and a comfortable area where men can sit and talk. You will probably also see an area where men can learn to cook for themselves or they can learn how to contact their families by computer.*

Most men have learned from our culture that they don't talk about feelings and emotions. There has been little encouragement for men to take an interest in their own health and well-being. Unlike women, most men are reluctant to talk about their emotions and that means that they usually don't ask for help. Probably because of this many men are less healthy than women, they drink more, take more risks and they suffer more from isolation, loneliness and depression. Relationship breakdown, retrenchment or early retirement from a job, loss of children following divorce, physical or mental illness are just some of the problems that men find it hard to deal with on their own.

Good health is based on many factors including feeling good about yourself, being productive and valuable to your community, connecting to friends and maintaining an active body and an active mind. Becoming a member of a Men's Shed gives a man that safe and busy environment where he can find many of these things in an atmosphere of old-fashioned mateship. And, importantly, there is no pressure. Men can just come and have a yarn and a cuppa if that is all they're looking for.

Members of Men's Sheds come from all walks of life – the bond that unites them is that they are men with time on their hands and they would like something meaningful to do with that time."

Both the Lithgow and Portland Men's Sheds have developed recently in response to a number of men wanting to provide opportunities for themselves and other men – mostly, but not exclusively, those in retirement age, to have a place to meet, talk and become involved in a worthwhile community project. This has been a very exciting development for the men of Lithgow. Council has provided financial support to both sheds to assist them become established. The Lithgow Men's Shed will initially be undertaking the renovation of the South Littleton Hall for future community use and will then be seeking permanent premises.

6.2.8 Survey

The survey asked a number of questions about how people feel about living in the Lithgow LGA, the extent to which they are engaged in the community, their contact



⁵ Australian Men's Shed Association website www.mensshed.org

with friends and family, the extent to which they volunteer and are in paid work, how they find information and internet use.

What Do You Like Best About Living In Lithgow LGA Now?

The survey asked people to say what they like best about living in Lithgow LGA now. The most common responses to this question were:

- friendly people and community spirit
- proximity to Sydney, the mountains and the country
- access to facilities, hospital and medical services
- country atmosphere, climate and lifestyle

What Did You Like Best About Living In Lithgow LGA 5 Years Ago?

The survey then asked people to say what they like best about living in Lithgow LGA 5 years ago. The most common responses to this question were:

- lifestyle
- access to family, facilities and services
- less crime

What Don't You Like About Living In Lithgow LGA Now?

The survey asked people to say what they don't like about living in Lithgow LGA now. The most common responses to this question were:

- the lack of recreational facilities and entertainment
- increased crime, anti-social behaviour and vandalism
- lack of Council direction and maintenance of facilities, roads and footpaths

What Didn't You Like About Living In Lithgow LGA 5 years Ago?

The survey asked people to say what they didn't like about living in Lithgow LGA 5 years ago. The most common responses to this question were:

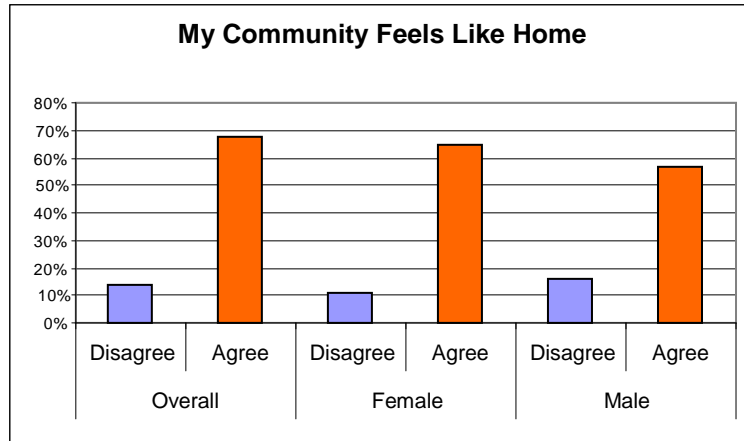
- anti-social behaviour
- lack of facilities

Survey respondents were also asked a series of questions about their involvement in the community and the level of support they feel the community provides them. They were asked to score the following 5 statements from 1 (strongly agree) to 10 (strongly disagree). These are grouped below as Agree (1-4) or Disagree (7-10). The following figures show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

My Community Feels Like Home

Nearly 70% of overall survey respondents say that their community feels like home, however women (64%) are more likely than men (57%) to say so. Residents of Portland are most likely to say that their community feels like home while residents of Wallerawang, Hartley and Capertee less so. People aged 55-59 (44%) and 70-74 (48%) years are also significantly less likely than people in other age groups to say that their community feels like home.

Figure 6.1

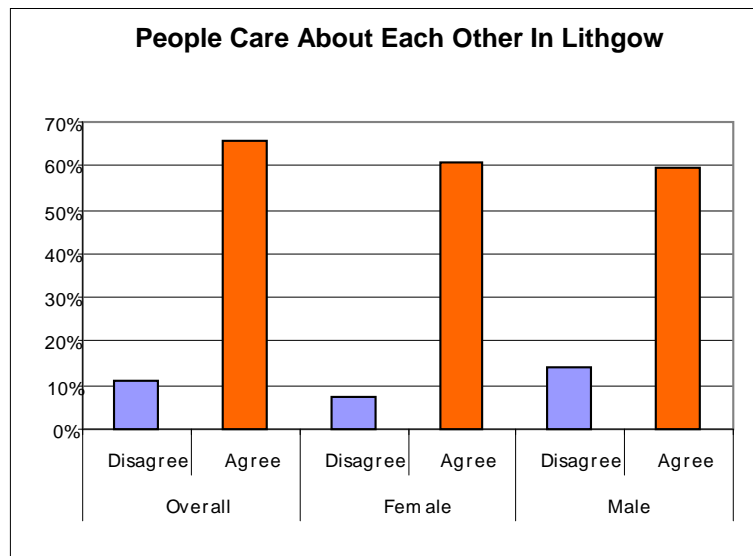


People Care About Each Other In Lithgow

65% of overall survey respondents say that people care about each other in Lithgow with almost no difference between men and women. Residents of Capertee and Lidsdale are most likely to say that people care about each other in Lithgow while residents of Wallerawang and Hartley significantly less so. Note that there were very few survey responses from residents of Capertee and Lidsdale so these results are not significant.

Again, people aged 55-59 (40%) and 70-74 (48%) years are also significantly less likely than people in other age groups to say that people care about each other in Lithgow.

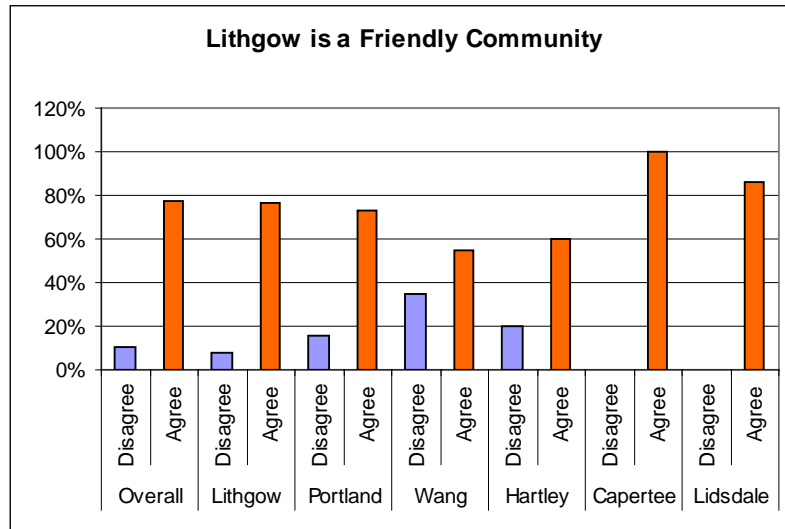
Figure 6.2



Lithgow is a Friendly Community

77% of overall survey respondents say that Lithgow is a friendly community with men (69%) less likely than women (74%) to say so. Residents of Capertee and Lidsdale are most likely to say that Lithgow is a friendly community while residents of Wallerawang and Hartley significantly less so. Note again the small number of results from Capertee and Lidsdale. People aged 70-74 years are significantly less likely than people in other age groups to say that Lithgow is a friendly community.

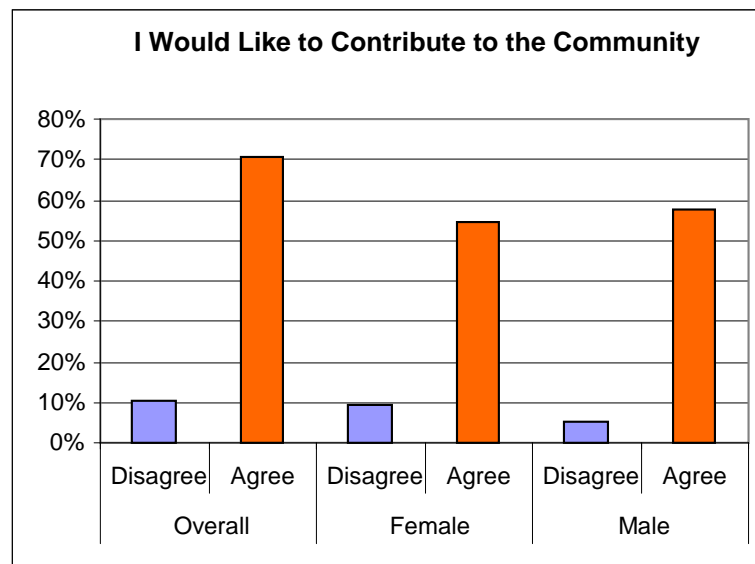
Figure 6.3



I Would Like To Contribute To The Community

Of overall survey respondents, 71% say that they would like to contribute to the community with men (58%) a little more likely than women (55%) to say so. Residents of Wallerawang are less likely than residents from elsewhere to say so. Again, people aged 70-74 years have provided different responses to the rest of the survey respondents with only 40% saying they would like to contribute to the community. This is less than all other age groups except those aged 80+ years.

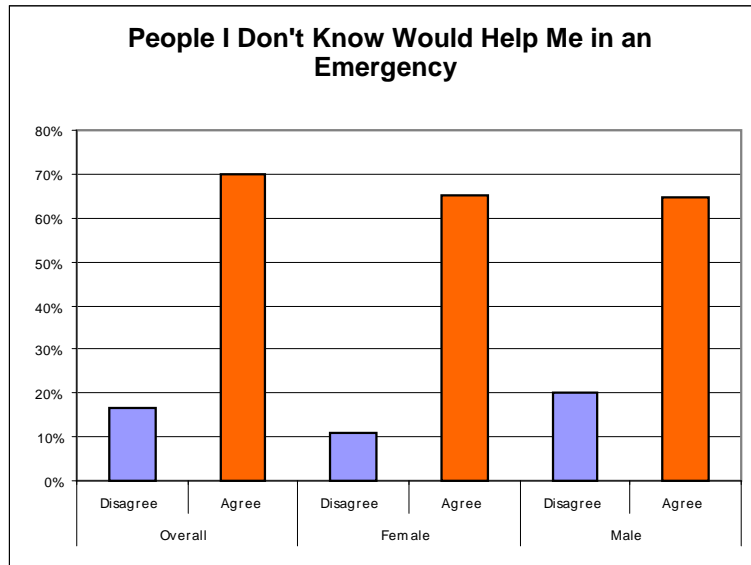
Figure 6.4



People I Don't Know Would Help Me In An Emergency

70% of overall survey respondents say that they think people they didn't know would help them in an emergency. While a similar percentage of men and women agree with this statement, men (20%) are significantly more likely than women (11%) to disagree. Survey respondents from Wallerawang are equally likely to agree as disagree, while respondents from other localities are far more likely to agree than disagree. Yet again, people aged 70-74 years have provided different responses to most other age groups with 48% agreeing and 23% disagreeing.

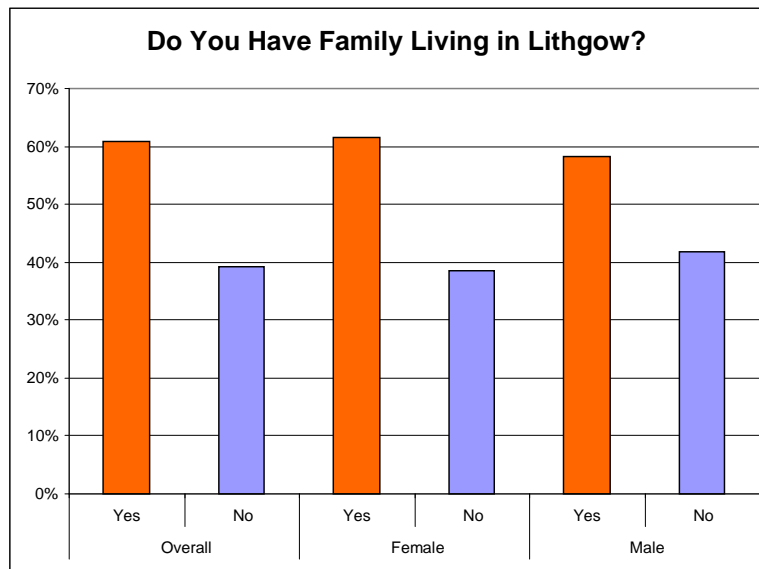
Figure 6.5



Do You Have Family Living In Lithgow LGA?

A little over 60% of survey respondents say they have family living in Lithgow with men slightly less likely to say so than women. This means however that around 40% of older people don't have any family in the local area. In some age groups and localities, the percentage of people with no local family is higher than 40% while almost 50% of single older people have no local family.

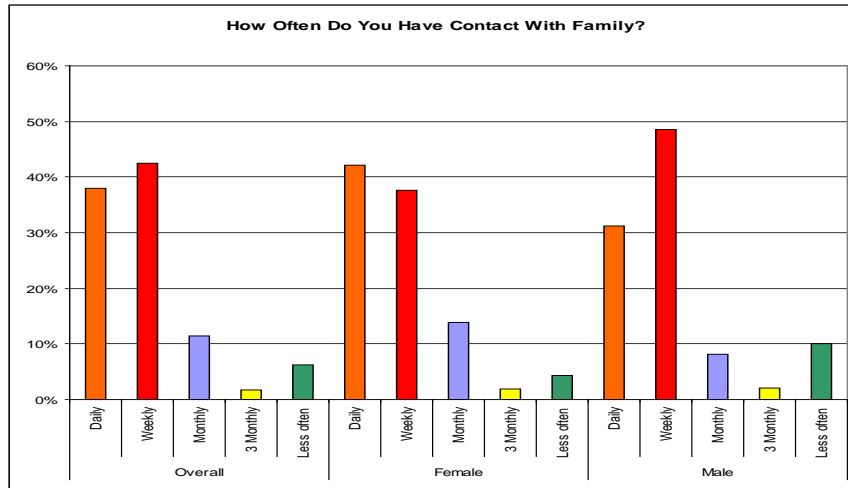
Figure 6.6



How Often Do You Have Contact With Family?

Around 80% of survey respondents have either daily or weekly contact with family. Women are more likely than men to have daily contact but men are more likely than women to have weekly contact. Approximately 20% of men and women have contact less often than weekly. People aged 80+ are more likely (50%) than those in other age groups to have daily contact with family, while those aged 70-74 are more likely to have less frequent family contact. Single people have less frequent contact than other family types although 73% of single people still have either daily or weekly contact.

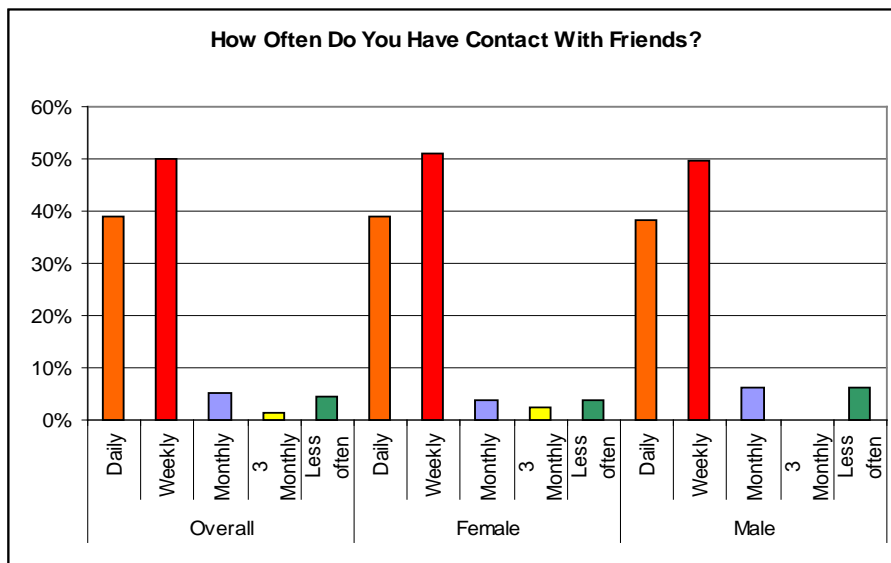
Figure 6.7



How Often Do You Have Contact With Friends?

Nearly 90% of survey respondents have either daily or weekly contact with friends with little difference between men and women. Those in the older age groups are more likely to have daily contact with friends than those in the younger age groups.

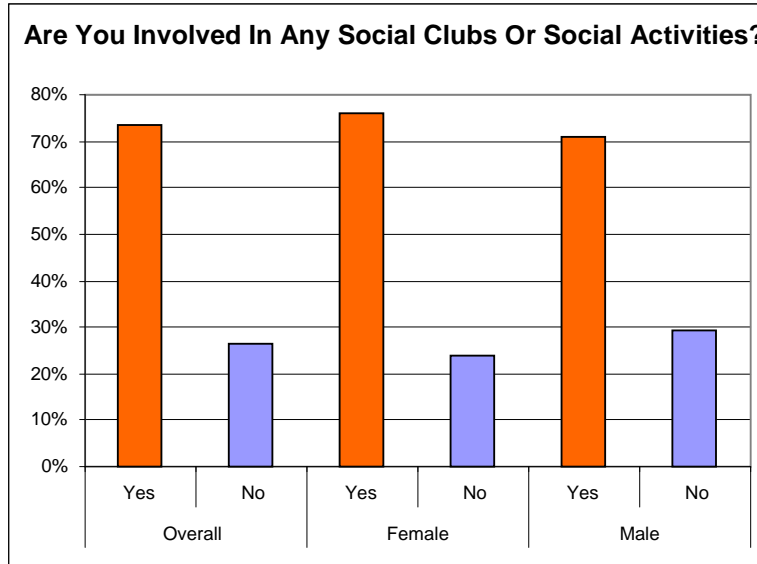
Figure 6.8



Are You Involved In Any Social Clubs Or Social Activities? (If Yes What Type Of Organisation?)

Over 70% of survey respondents are involved with a social club or social activities with women more so than men. People aged 50-54 are less likely to be involved however over 80% of people aged 75-79 and 70% of people aged 80+ are involved.

Figure 6.9



The survey asked people to list the type of activities they are involved in and how often. The most popular activities were clubs, followed by sports, music, arts and crafts and gardening.

Figure 6.10

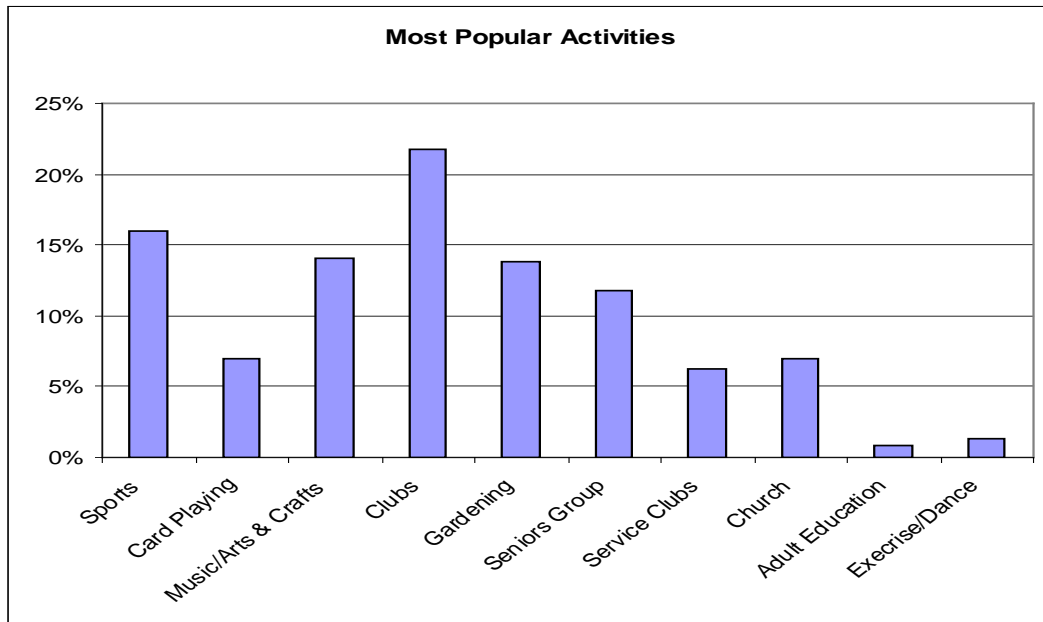
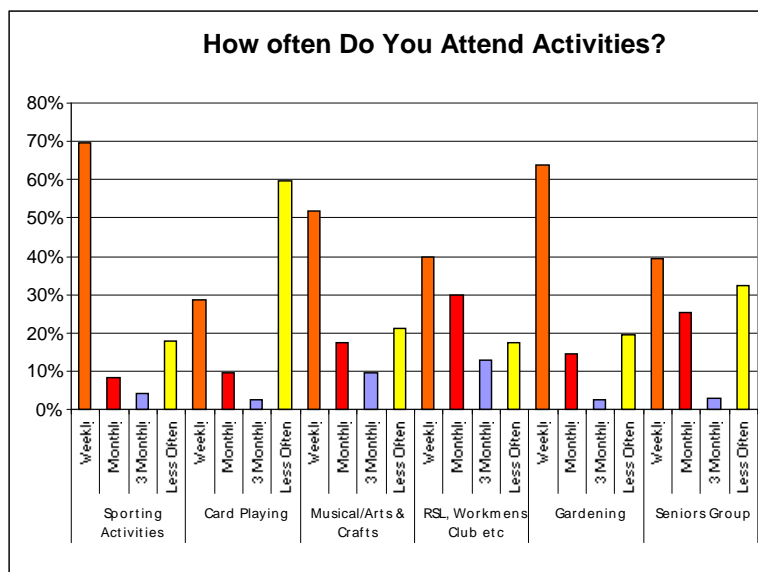


Figure 6.11



Do You Do Any Unpaid Voluntary Work and How often?

About 45% of people who answered the survey do voluntary work although women (50%) are more likely than men (38%) to do so. 75% of those who volunteer, do so weekly.

People aged 50-54 years (who may be still in the workforce) and those aged 75-79 and 80+ years are less likely to do voluntary work. Older people in families with children under 12 and mature couples are more likely than the average to volunteer. In the case of older people in families with children under 12, this may be volunteering activities that involve their children.

The most common type of organisations are social clubs, community transport, landcare and environment groups, sporting and church groups.

Figure 6.12

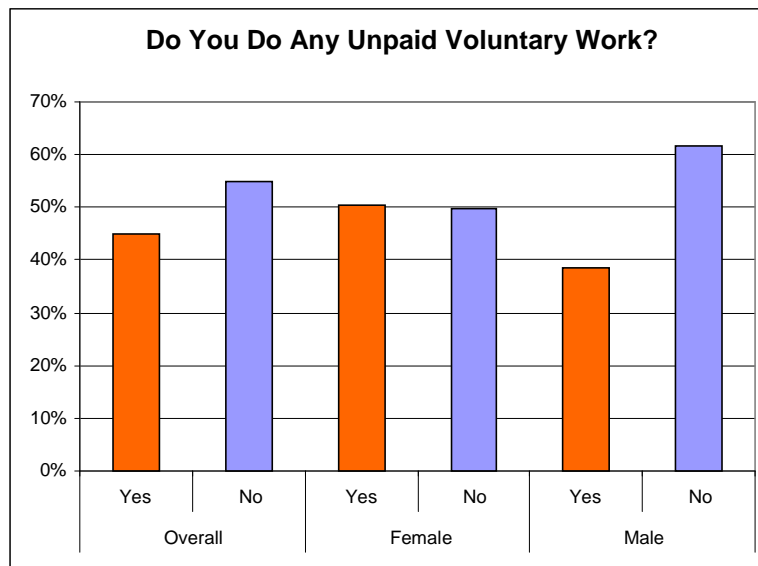
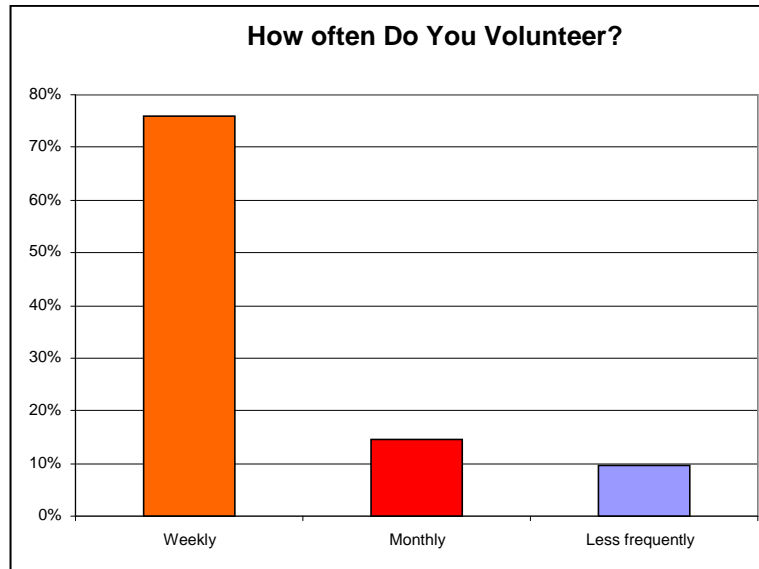


Figure 6.13



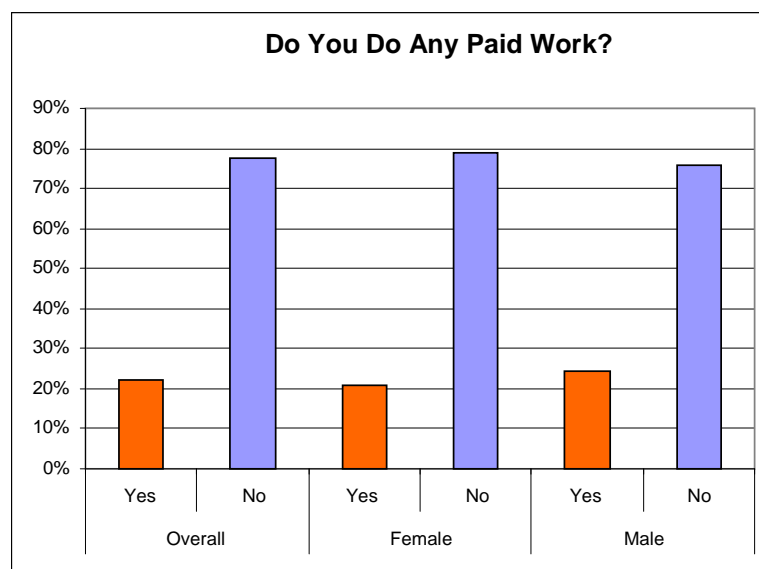
What Sort Of Things Have Prevented You From Volunteering Or Having Social Contact?

The survey asked people to list the sort of things that prevented them from volunteering or having social contact. The most common responses to this question were declining health and ageing in general, still in employment and other commitments.

Do You Do Any Paid Work?

Only about 20% of survey respondents do any paid work, with men slightly more likely than women to do so. 74% of 50-54 year olds are working while 36% of 55-59 year olds and 44% of 60-64 year olds are working. Older people with children are far more likely than the average to be working while single people are less likely to be working. About 90% of those who work, do so weekly.

Figure 6.14

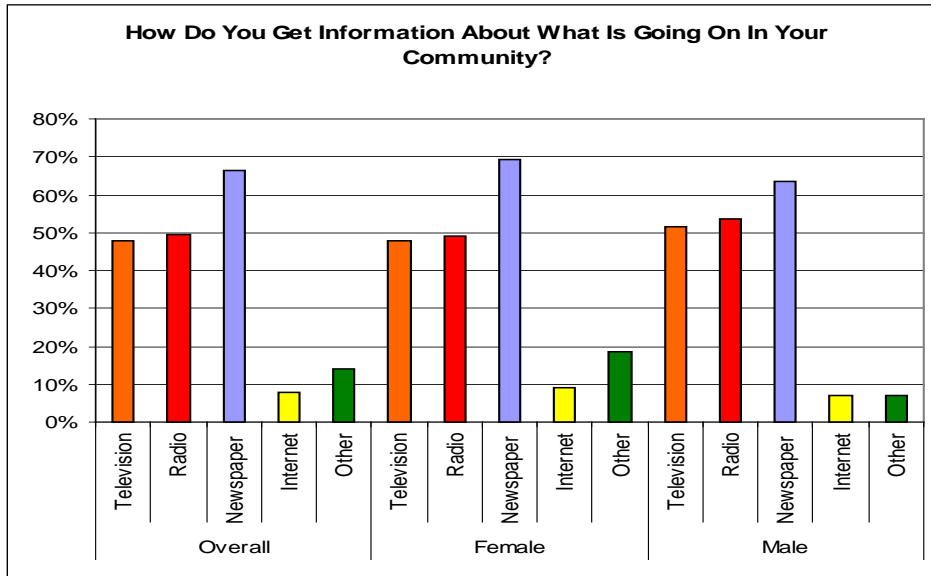


Information

How Do You Get Information About What Is Going On In Your Community?

Most survey respondents receive their information from the TV, radio and newspaper although the newspaper is more relied on than TV in Lidsdale and Hartley. Only 8% overall find out this information from the internet.

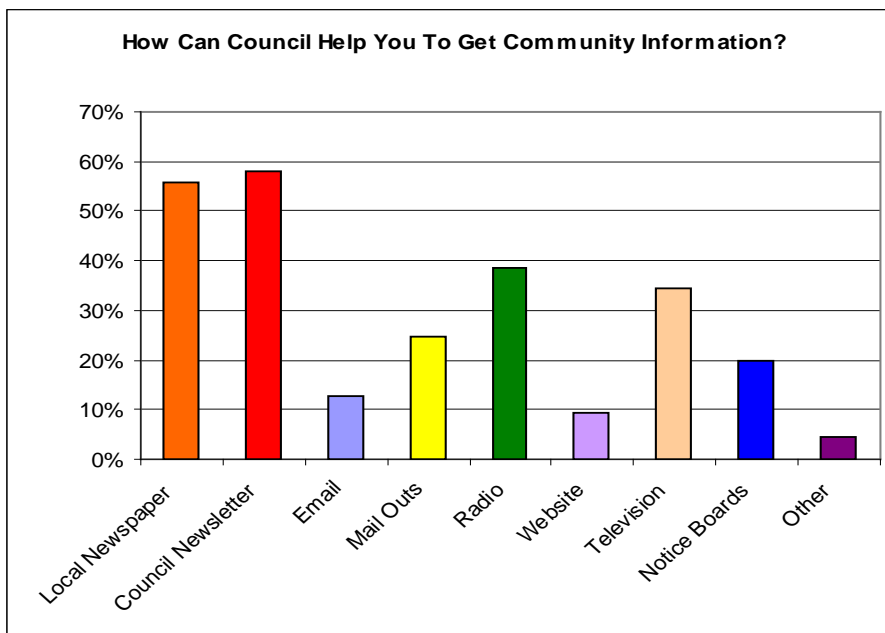
Figure 6.15



How Could Council Help You To Get Information About What Is Going On In Your Community?

The survey asked how Council could get information to people about what is going on in the community with the most common responses being newspaper, Council newsletter, radio and TV. Multiple answers were allowed.

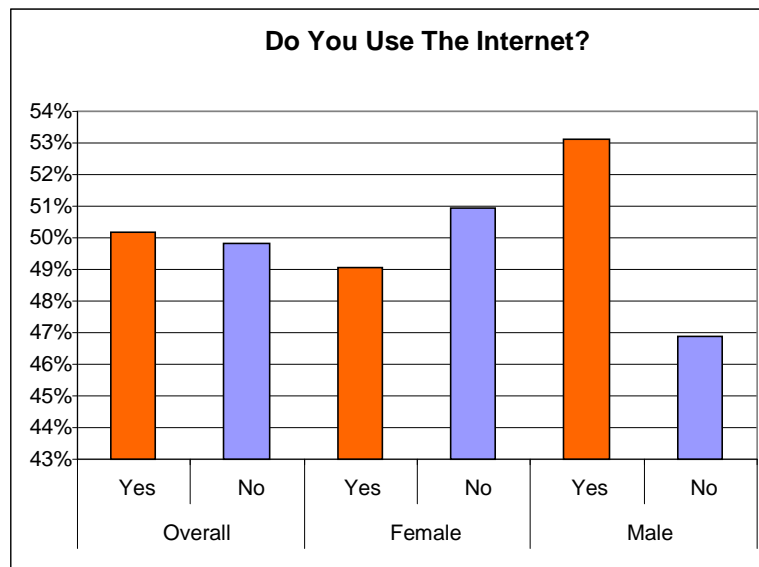
Figure 6.16



Do You Use the internet?

50% of survey respondents use the internet with men (53%) doing so more than women (49%). Internet use is high in the younger age groups but drops off from age 70.

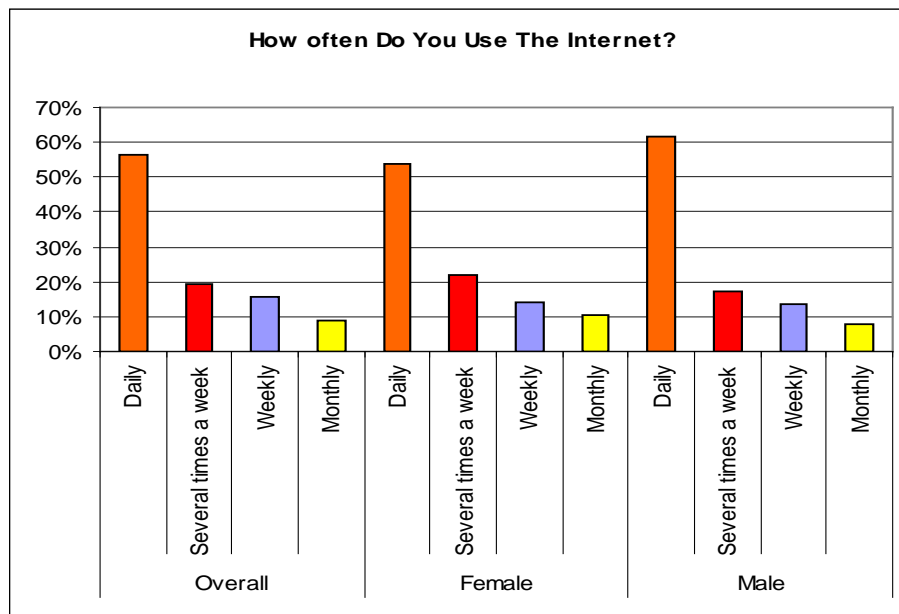
Figure 6.17



How often Do You Use The Internet?

56% of survey respondents use the internet daily and a further 20% several times a week with fairly similar results across all age groups. Men are more likely than women to use the internet daily.

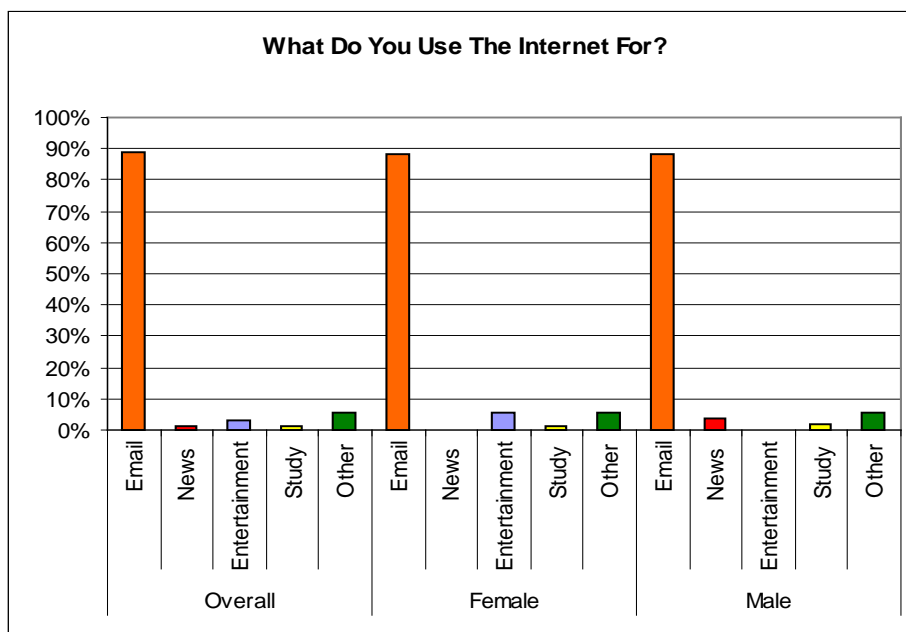
Figure 6.18



What Do You Use the Internet For?

Almost 90% of survey respondents use the internet for email only. Other identified uses include family research, paying bills and banking, news, entertainment and education.

Figure 6.19



6.2.9 Conclusions and Recommendations Social Engagement

Lithgow has a long and proud tradition as a friendly and welcoming place which looks out for its own. Lithgow has also faced a number of challenges over the past 100 years which have highlighted the LGA’s resilience and spirit. There is no doubt that these qualities are a big part of what makes Lithgow the place that so many of its residents are proud to call home. While these may be generalisations, none the less they demonstrate that there is a good level of social capital and social infrastructure within the LGA. The challenge is to harness these qualities in ways that benefit the whole community and to promote the social engagement of the socially isolated. For a number of reasons, some people are less engaged in the community and as a result face isolation and as discussed at the beginning of this chapter, there is also clear evidence that social exclusion is associated with poor health.

There are a range of strategies for Council and others to consider in relation to promoting social engagement.

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
Promote the benefits of active ageing	Hold an annual Active Ageing Expo and other initiatives that acknowledge the value, achievements and contributions of older people	Council, community organisations, government organisations and business	High
	Promote positive and active images of older people in local media and Council publications	Council, community organisations, government organisations,	High

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
		business and local media	
	Develop older person and youth interaction programs through the involvement of local schools.	Council, schools and community organisations	Medium
	Assist Lithgow Senior Citizens Centre to find new premises	Council, Lithgow Senior Citizens Centre and community organisations	High
	Provide support to Gorrie Ban, Beehive and other similar organisations for older people	Council and community organisations	Medium
	Provide support to Men's Sheds and other men's activities	Council, Men's Sheds and other community organisations	High
Volunteering Promote the community and individual benefits of volunteering	Develop programs, including recognition programs to encourage older people to volunteer	Council, community organisations and Volunteering Central West	High
	Encourage younger people to volunteer	Council, community organisations, schools and Volunteering Central West	Medium
Work Older people have access to flexible working arrangements and part-time work during retirement	Model best practice in offering flexible working arrangements to older employees in preparation for semi - retirement and planned retirement	Council, Lithgow Business Association and local business	Medium
	Advocate to employers the value of offering flexible working arrangements to older employees	Council and Lithgow Business Association	Medium
	Council to offer phased retirement programs for its older employees and to provide pre-retirement seminars to employees	Council	Medium
Information provision	Provide regular information on services and activities	Council, local organisations	High

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
Improve older people's awareness of local services and facilities	for older people through Council Connections, Council website, local media and other Council publications	and media	
	Encourage applications from the community for Council Financial Assistance to support older persons' organisations	Council, community organisations	High

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Section 6.3 Safety

6.3.1 Introduction

Safety was a frequent theme in the Ageing Strategy community consultations. Older people don't feel safe at night in public places, they are concerned about harassing behaviour, including aggression and swearing in public places, and with young people and children riding skateboards and bikes on footpaths.

People are also concerned about the level of Police presence and that the Police seem to be understaffed.

Concern was also expressed about the appropriate placement of older and other people together in Housing NSW accommodation.

Crime and safety issues have been a concern for Council for some time. The Lithgow Strategic Plan 2007⁶ adopted a number of actions to facilitate a safe community including preparation of a crime prevention plan and incorporating crime prevention through environmental design principles in development control plans and the design/upgrade of public places. See Appendix 5 for further detail.

The SWAHS Health Impact Assessment of the Strategic Plan⁷ recommended that Council improve safety and access for older people to the built environment and work with police and others to address alcohol related crime. See Appendix 5 for further detail.

6.3.2 Ageing Survey

The survey asked questions around people's sense of safety. While over 60% say they feel "very safe" or "quite safe", nearly 40% say they felt either a "little", "somewhat" or "very unsafe". Men are almost twice as likely as women to feel either "somewhat unsafe" or "very unsafe".

The following figures show overall responses and responses by

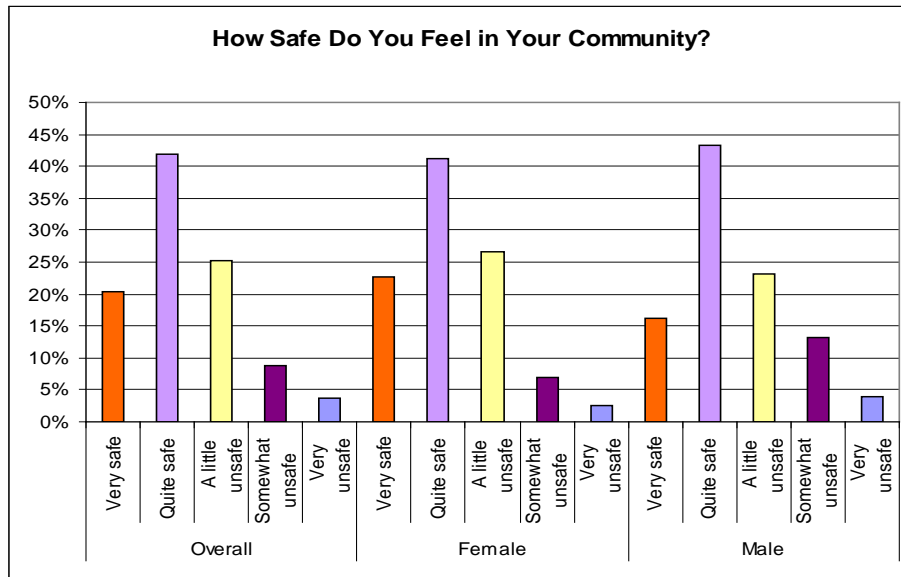


⁶ Lithgow Strategic Plan Op Cit

⁷ SWAHS (now Nepean Blue Mountains Local Health District) Op Cit

gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

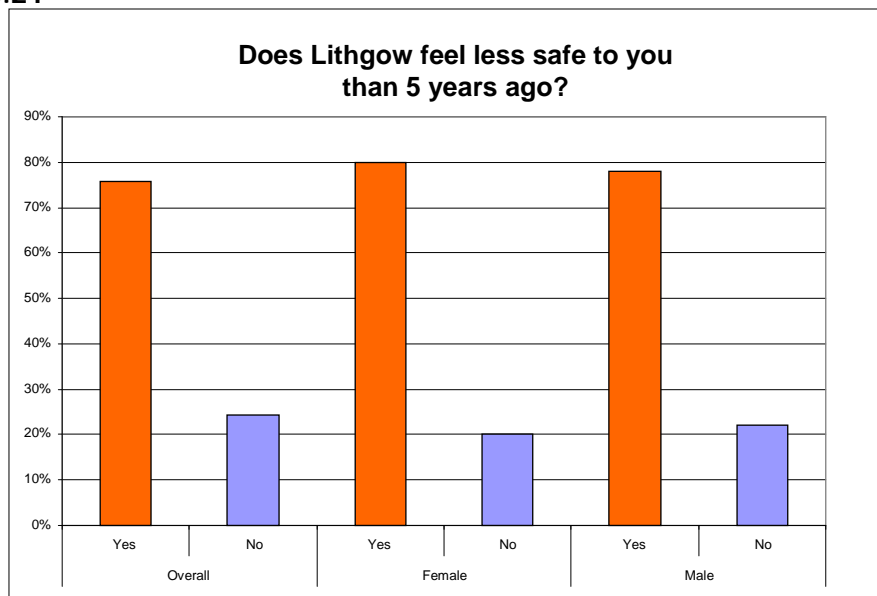
Figure 6.20



Does Lithgow Feel Less Safe Than 5 Years Ago?

76% of survey respondents say that Lithgow feels less safe than 5 years ago with similar results from men and women. There was little variation in the responses from different towns but some variation across the different age groups. People aged 70-74 years are more likely than all other age groups to agree that Lithgow feels less safe than 5 years ago while those aged 80+ years are far less likely to agree.

Figure 6.21



What Are Your Major Safety Concerns?

The survey asked people to say what their major safety concerns are. The most common responses to this question were:

- increased anti-social behaviour and violence on the streets
- fear of break-ins and home invasions
- intoxicated people

- fear about going out
- lack of Police patrols and Police presence generally
- vandalism against private and public property
- road and footpath hazards
- bike and skateboard hazards

What Sort Of Things Would Help Make The Community Safer?

The survey asked people to say what sort of things would help make the community safer. The most common responses to this question were:

- more active Police patrols and Police presence, especially at night
- improved street lighting
- CCTV cameras
- more recreational activities and employment for young people
- earlier closing times for licensed premises

6.3.4 Lithgow Crime Prevention Plan

Lithgow City Council commenced development of a Crime Prevention Plan in 2007/08 in response to widespread concerns within the community about local crime rates and a desire by Council to take a lead role in the development and implementation of crime prevention strategies. The Crime Prevention Plan was endorsed in May 2011 by the Attorney General and Minister for Justice as a Safe Community Compact under the Children (Protection and Parental Responsibility) Act 1997.

Key findings from the Crime Prevention plan are:

Crime Data: Rates of criminal incidents in the Lithgow LGA are in some cases, significantly above the NSW average and the average of a number of Central West LGA's. In particular, Lithgow stands out in relation to non-domestic violence related assault and malicious damage to property.

Community and Agency Consultations: Recurring themes during the consultations included:

- alcohol related violence and other behaviours, particularly in Main Street Lithgow
- malicious damage and harassment, including violence, vandalism and street bullying

Crime Prevention Strategies

This Crime Prevention Plan identifies the following strategies for action:

- **Establish a Crime Prevention Committee**
Council has established a Crime Prevention Committee with membership from key local organisations, including business, the Police and the community. The Crime Prevention Committee will implement crime prevention strategies and build on the partnerships that have already developed to, over time, develop and implement further crime prevention strategies.
- **Alcohol Related Violence and Related Behaviours**
This strategy involves developing a strong partnership between licensed premises, Lithgow Liquor Accord, Police, Crime Prevention Committee, the local community and local business to address alcohol related violence and related issues in the Lithgow CBD.



- **Malicious Damage** Targeting vandalism, including graffiti in hotspot locations across Lithgow.

6.3.5 Conclusions and Recommendations Safety

Crime and safety issues have been a recurring concern for many people in the community over a number of years and have also been a significant concern in the Ageing Strategy survey and consultation results.

The common reporting of crime in the media can also lead to a fear of crime, and a view that the community is becoming unsafe over time. This can have the effect of discouraging people, particularly older and vulnerable people from venturing into areas that are perceived to be unsafe.

The Ageing Strategy survey results show that there is a significant level of concern about safety with around 40% of survey respondents saying they feel either a little, somewhat or very unsafe. People in Lithgow urban area and Portland were less likely than the rest to feel very or quite safe. Further, 75% of survey respondents feel less safe than 5 years ago. The most common safety concerns raised in the Ageing Strategy survey and community consultations were anti-social and violent street behaviours, public intoxication, vandalism and a call for earlier closing times for licensed premises.

People are also concerned about the lack of Police patrols and Police presence generally.

Crime data used in the Lithgow Crime Prevention Plan⁸ showed that rates of alcohol related assault and malicious damage to property (crimes that can be closely related) in the Lithgow LGA are in some cases, significantly above the NSW average. Rates of other crimes are little different in Lithgow to elsewhere however.

In general, alcohol related violence occurs late at night on weekends, times that older people are less likely to be in public places. Older people using the railway station and those visiting licensed premises may still be affected by this crime however as will those who experience the effects of alcohol related violence in their home. The alcohol related violence problem also affects community perceptions about crime and safety. Further, malicious damage, including damaging letterboxes and street signs, together with rowdy behaviour on the way home from licensed premises along "corridors of crime", contributes to community unease.

The Crime Prevention Committee has commenced work on addressing these issues through conducting late night crime audits of the Lithgow CBD and working with the Liquor Accord, Police and licensees to introduce a late night transport service to get people home quickly and safely. Lithgow Police have also been making concerted efforts to address alcohol related violence in licensed premises and public places.

The Australian Local Government (ALGA) Age Friendly Built Environments resource⁹ recommends a number of actions for Councils to improve the safety of older people including:

- adopting crime prevention through environment design (CPTED) principles in the design and management of public places
- promoting safe and well lit public places
- constructing safer street crossings

⁸ Lithgow Crime Prevention Plan
Lithgow City Council 2010

⁹ Age-friendly Built Environments - Opportunities for
Local Government
Australian Local Government Association 2006

- ensuring the design of roads and intersections take account of the mobility, visual and hearing capacity of all community members, not just the young and the agile

Safety Action Plan			
Objective	Action	Key Partnerships	Priority*
Public places are designed with safety in mind	Incorporate crime prevention through environmental design principles in development control plans and the design/upgrade and maintenance of public places	Council and Crime Prevention Committee	High
Enhanced safety of older people using public places at night	Audit, and enhance where necessary, street lighting in areas of high pedestrian activity	Council and Crime Prevention Committee	Medium
Improved safety and community engagement of older people	Work with Housing NSW to develop strategies for enhancing the safety of older people and promoting community development in public housing areas	Housing NSW, Crime Prevention Committee and community	Medium
	Run a media campaign to encourage the community to report crime	Council, Police, community organisations	High
The needs of older people are considered in emergency planning and management	Develop an emergency management plan for vulnerable populations of older people	Police, emergency, health and welfare agencies	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Section 6.4 Education

6.4.1 Lithgow Learning City

In 2001 Lithgow City Council declared Lithgow to be the first Learning City in NSW, with the aim of re-invigorating the community and equipping people with the skills needed to survive and thrive in the 21st century.

The aim of Lithgow Learning City concept is to:

- develop partnerships to improve communication and co-operation between educational providers and business
- promote lifelong learning to assist people to upgrade their skills to maintain employability, provide recreational opportunities
- create a community that is open to change, is highly skilled, tolerant and adaptable

The Learning City concept developed out of a desire to respond to the 1990's economic downturn that resulted in the closure of local coal mines, clothing manufacturing industry, and the downsizing of ADI, State Rail and the Roads and Traffic Authority.

The Learning City concept had had success in mining communities in the United Kingdom, and it was hoped it would assist with re-skilling for tradespeople and labourers struggling with unemployment and limited future options.

Learning City initiatives have included:

- partnership development between industry, schools and training providers
- Spread the Word, a community literacy program which aims to encourage people to talk to, sing to, play with and read to children from birth
- Books for Babies involving the presentation of a book bag to all babies born at the Lithgow Hospital
- improved communication between government and private schools as well as increased involvement of the business sector in education and welfare programs

Ongoing education can take many forms including community based education programs and programs run through to TAFE and university courses. Participation in these programs can offer social engagement opportunities for older people and the chance to learn the things they may have always wanted to, but lacked the time for.

The Community Profile in Chapter 3 shows a number of features of the educational background of Lithgow people:

- the percentage of older Lithgow persons who completed year 10 at school and above was 49% compared to 56% for NSW. Interestingly, only 40% of younger Lithgow persons completed school at year 10 and above
- 22% of Lithgow people have a diploma, degree or higher qualification compared to 33% for NSW as a whole. Lithgow women (29%) were more likely than Lithgow men (17%) to have these qualifications
- on the other hand, 35% of older people in Lithgow have a certificate qualification compared to 30% for NSW as a whole. Men (50%) were more likely than women (14%) to have a certificate qualification

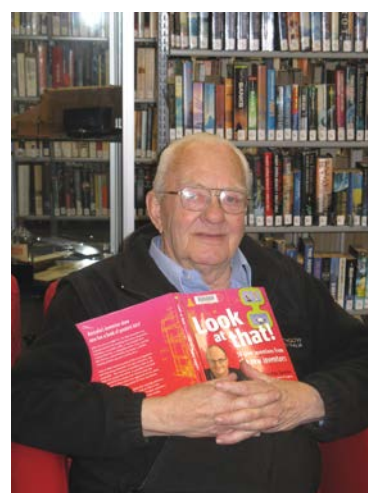
6.4.2 Lithgow Library

The Lithgow Library Learning Centre, which underwent a major upgrade in 2004, houses the public Library, Community Technology Centre and Learning Shop. This modern well-equipped facility is the physical symbol of the learning city concept. Council also provides modern branch library facilities in Portland Wallerawang.

An ageing population has profound implications for the Lithgow Library service as older people are its most frequently visiting patrons. There will need to be therefore a greater emphasis by the library on providing the materials and services that older people require including:

- more classes in all forms of technology - computers, mobile phones, digital cameras and e-readers
- more large print books and newspapers and talking books
- in the near future, e-book downloading facilities

Planning for a Housebound Library Service is already underway to meet the demand from people at home or in nursing homes and hospitals. Provision of this service will rely on the efforts of many volunteers.



Library volunteers provide valuable assistance to the library and are mostly older people themselves. They index and research local history, run book sales, staff the Rydal Deposit Station and, through the Friends of the Library Group, assist with catering and events. Many

bring professional and technical skills and years of experience. Like many organisations, the library would be much poorer without its strong volunteer body.

The Library Learning Centre also offers a comprehensive local history collection and Community Technology Centre (often utilised by Beehive, for Seniors' courses, and by other community groups.)

Other initiatives by the Library include:

- 'Books on Prescription' collection that is about to be made available to local health professionals
- 'Tea and Talk' monthly chat sessions, commencing July 2011, with an expert on a topic of local interest
- 'Lithgow Forum' which meets quarterly on a topic of interest
- major upgrades were undertaken to Wallerawang Library in 2009 and Portland Library in 2011 bringing both branches to a high standard
- the Library resources budget was enhanced in 2011/12
- Seniors Week, held in March each year, is enthusiastically supported by local and visiting older people who participate in reading programs, computer classes, an art and craft exhibition, cooking demonstrations, exercise classes and the special morning tea

The library also has a key role in maintaining the Learning City focus by providing detailed information on learning opportunities, and is also becoming a site of learning through the provision of formal and informal courses, developing links with universities, and offering excellent facilities for use by the community.

6.4.3 Conclusions and Recommendations Education

There is clearly an interest in the community in life-long learning. During development of the Lithgow Social plan 2006, people highlighted the importance of Beehive and the Lithgow Library Learning Centre. Older people also expressed a need for other educational opportunities including establishing a University of the Third Age.

Beehive is an important group in Lithgow providing non-vocational educational programs such as those provided in many other areas by community colleges (formerly known as day and evening colleges). Beehive provides educational, social, art and craft activities in both Lithgow and Portland including night programs in response to community need. These programs enable people to learn a new skill or acquire new knowledge at any time of their life.

Lithgow Library has a vital role in relation to education and to the social engagement of older people in general. The Library service has commenced a number of programs for older people including a greater focus on acquiring talking and large print books, planning for e-books and planning for the commencement of a housebound library service. The Library Technology Centre also offers all older people opportunities to participate in the online world irrespective of whether they have their own computer and internet access. Library Forums offer opportunities for older people to participate in wider discussions on issues of community interest and concern.

The following actions are designed to build on the existing Learning City concept to enhance the availability of informal and accessible educational opportunities for older people both in the Library and elsewhere.

Education Action Plan			
Objective	Action	Key Partnerships	Priority*
Education Older people have social engagement and learning opportunities in retirement	Maintain a continued focus on supporting and resourcing Learning City activities	Council, educational providers, industry, community	High
	Progressively implement a housebound library service for isolated older people	Council, community organisations	High
	Enhance Library resources for older people including talking books, large print books and e-books	Council, State Library of NSW	High
	Provide technology classes through the Library Technology Centre for older people	Council, Central West Community College, TAFE	High
	Continue to provide activities for older people at the Library including quarterly Lithgow Forums and during Seniors' Week	Council, Central West Community College, TAFE	High
	Provide expanded volunteering opportunities for older people at the Library	Council, Central West Volunteering and community organisations	High
	Encourage the establishment of tertiary education facilities in Lithgow	Council, tertiary institutions and TAFE	Medium
	Support Beehive to provide non-vocational community education facilities	Council and Beehive	Medium
	Work towards establishing a University of the Third Age in Lithgow	Council and community	Medium
	Improve the literacy levels of all age groups (including workplace literacy) and encourage further education	Council, TAFE and business	High

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 7 Transport and Access

7.1 Introduction

The availability of reliable, safe and convenient transport can make the difference to whether or not an older person can engage socially and access health services, shopping, friends and family. While people with their own transport, or access to transport provided by friends and family may be able to participate in the community and get to the services they need, people without these transport options rely on walking, public, private and community transport or staying at home.

The Lithgow Strategic Plan 2007 adopted a number of strategies to meet the vision of providing a choice of effective public and private transport options for those who live, work and visit our community including:

- promoting equitable access to public transport
- maximising the number of passenger train services terminating at Lithgow and provide a fast train service.
- improving and expanding the pedestrian and bicycle network



See Appendix 5 Lithgow Strategic Plan for further detail.

The SWAHS¹ Health Impact Assessment of the Lithgow Strategic Plan recommended the following actions in relation to transport and access:

- map transport access and walkability
- survey residents to determine transport needs
- develop innovative transport schemes to health services
- work to facilitate access to Lithgow Health Service
- work with neighbouring Councils to advocate for improved regional public transport
- promote safe pedestrian and cycle access

See Appendix 5 Lithgow Strategic Plan for further detail.

7.2 Community Consultations

A large number of issues were identified during community consultations in relation to transport and physical access including:

Access

- footpath safety and amenity
- car park spaces are too small for frail aged people
- poor signage and lighting
- access to shops and other buildings

Transport

- transport to Lithgow hospital
- trains do not feel safe at night
- difficult to get taxis after 6pm

¹ Now Nepean Blue Mountains Local Health District

- transport leaving Lithgow is infrequent and often one way
- difficulties faced by frail aged getting from the bus stop to home
- difficult to meet criteria for taxi voucher and taxis are too expensive

Traffic

- pedestrian crossing safety
- traffic lights do not allow enough time to for less mobile people to cross
- visibility on roads can be difficult due to overhanging trees etc
- intersections can be difficult to cross during peak traffic times

See Appendix 7 Community Consultation Results for further detail.

7.3 Lithgow Social Plan

Issues identified in the Lithgow Social Plan 2006 in relation to transport and physical access included:

- improve access to public transport for older people
- respond to physical access needs of older people
- address the road and footpath safety needs of older people

See Appendix 6 Lithgow Social Plan for further detail.

7.4 Survey

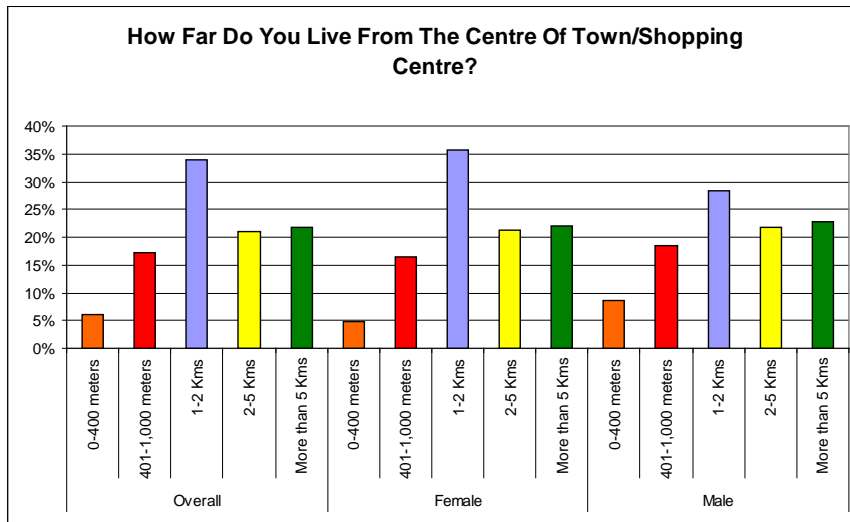
The survey asked a number of questions about where people live, how they get about and how they find access to public places and buildings. The following figures show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

Living Location from the centre of town/shopping centre

Figure 7.1 shows that most older people who completed the survey live beyond walking distance to the centre of town and shopping facilities, with only 6% living less than 400 meters and 17% living between 400 meters and 1 kilometre from the centre. Men seem to be better located with about 27% living closer than 1 kilometre, compared to 21% of women. 60% of Portland respondents live 1-2 kilometres from the centre although 24% live between 400 meters and 1 kilometre from the centre.

44% of Wallerawang respondents live more than 5 kilometres from the centre although it may be that they mean from Lithgow town. 46% of families with children over 12 years of age live more than 5 kilometres from the centre which may have significant implications as they age and their children leave home.

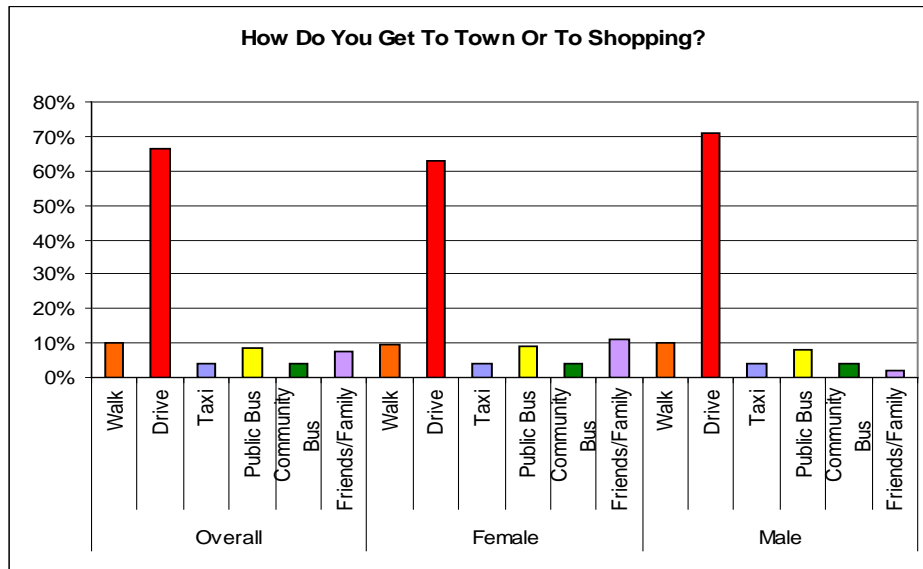
Figure 7.1



Means of Travel To Town and Shopping

Figure 7.2 shows that of all survey respondents, 66% drive to town or to shopping, 10% walk with the remainder using other forms of transport. Men drive more than women but women are nearly 5 times more likely than men to travel with friends and family. Driving is the most common form of transport in all areas, although more so in the rural areas of Hartley and Lidsdale. Walking is more common in Lithgow town and Portland and the use of community transport is more common in Portland and Capertee.

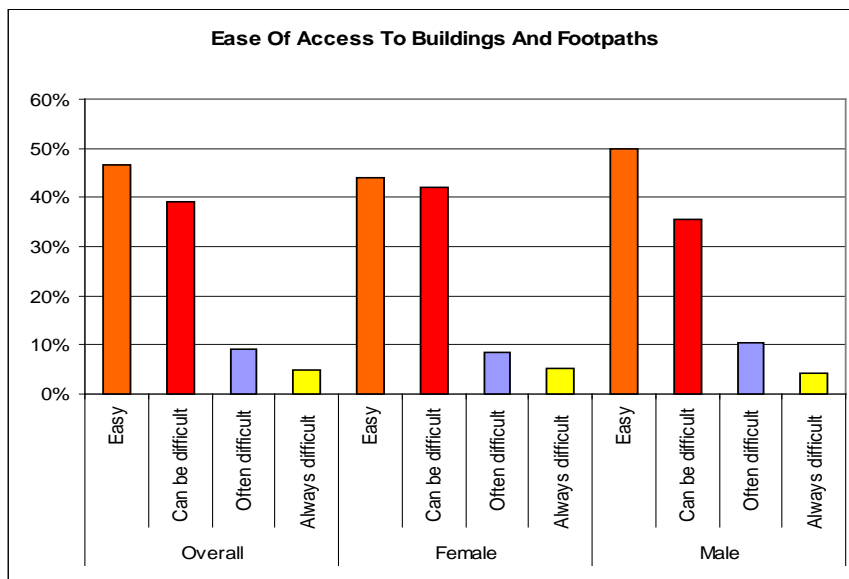
Figure 7.2



Access in relation to footpaths, buildings, across roads etc?

Figure 7.3 shows that nearly half of all survey respondents say that they find access easy although 39% say it can be difficult and 14% say it is often or always difficult. A greater percentage of men than women say they find it easy and a smaller percentage of men say it can be difficult.

Figure 7.3



Survey respondents were asked to provide detail on the access difficulties they face with the most common responses being:

- the pavers along Main Street footpath are slippery when wet and uneven in places
- the need for more paved footpaths around Lithgow
- trip hazards, bikes and skateboards and overhanging branches
- steps and stairs make access to buildings and shops difficult and more ramps are needed
- pedestrian risks from speeding cars and short timings at traffic lights

7.5 Lithgow Community Transport

Lithgow Community Transport (Translinc) is a not-for profit community organisation funded by the federal and state governments which provides transport for frail older people aged 65+ (aboriginal people aged 55+) and younger people with a permanent disability who do not drive or cannot use public transport as well as other transport disadvantaged people.

Translinc provides the following:

- a door to door transport service to local medical appointments
- transport, including waiting time to medical appointments in Sydney or the Central West
- transport for shopping and social trips subject to bookings being made prior to the day needed. Preference is given to medical transport
- transport to shopping and similar activities for people outside the HACC target group who live in isolated communities with no or limited public transport including Portland, Capertee, Glen Davis, Hartley and Hampton etc

Translinc also works with other transport services, including buses, taxis and other community organisations to provide transport services to clients during times of high demand.

A small amount of money is requested from clients to assist in the running of the service to supplement funding received from government.

Community transport is an important part of the mix of transport options for people to get to medical and other appointments or to shopping and other activities.



Buses provide an affordable alternative but do not always follow the routes and times that people require. Frail older passengers may not be able to walk to and from the nearest bus stop and may require a carer during their journey.

Taxis provide a point to point service at anytime, however affordability is a major constraint for older people. The return fare to Lithgow Hospital for example is unaffordable for many older people. People stated in the community consultations that it is difficult to meet the criteria for a taxi voucher and taxis are otherwise too expensive.

Translinc, through its fleet of 5 accessible vehicles, including a specialised van for wheelchair transportation, is able to provide an affordable and responsive alternative. Reliant on volunteer drivers, and facing increasing demands to drive clients to Sydney however, Translinc faces capacity constraints in meeting demand for local transport. This is the case for both people living in Lithgow town and particularly those in rural villages.

The availability of health transport funding would enable Translinc to provide transport services to a wider range of residents.

7.6 Conclusions and Recommendations

Transport and access have been raised as issues of concern over a long period of time through Council's Strategic Plan and Social Plan and more recently in the development of the Ageing Strategy.

Public transport, including buses and taxis aren't always suitable due to timetables, cost, distance from home to the bus stop and cost. The distance of the hospital from the centre of Lithgow has been a frequent concern. There are no buses to the Hospital on Saturday afternoon and Sunday and the return taxi fare is unaffordable for those ineligible for taxi vouchers. Frail aged people often find it difficult to use buses on their own, without the help of a carer.

People living in rural areas face additional hardships in accessing services.

Lack of affordable and suitable transport options can increase the isolation of older people and restrict their use of health and other services. As discussed in Chapter 10, the health impacts of social isolation are significant and well recognised.

Addressing these issues requires a collaborative approach involving transport providers, the Ministry of Transport and Council, as has occurred in the past with the Transport Working Group. Some of these issues, including bus and rail extend beyond the Lithgow LGA boundaries and therefore require working with neighbouring Councils to advocate for improved public transport at a regional level.

Translinc received praise during the Ageing Strategy consultations and survey as being a good service that is very helpful in assisting with shopping etc. Translinc faces a number of capacity constraints however that limit its capacity to provide local transport within Lithgow and from the rural areas to Lithgow. These capacity constraints arise in large part due to funding restrictions and the demand for transport to specialist medical services in Sydney which takes up much of the service's capacity.

Older people raised a number of concerns in the Ageing Strategy consultations and survey around pedestrian safety and access issues including safety on footpaths and pedestrian crossings, visibility issues, trip hazards, bikes and skateboards and overhanging branches, poor access to some buildings and shops, poor signage and lighting, car park spaces are too small for frail aged people and better indicators are needed for the vision impaired.

The only public toilets in the Lithgow CBD are at the very top of Main Street well away from the centre of retail and commercial activity. These toilets are old, not in a safe location and are not built to current standards of safety and design. Access to safe, well designed and accessible public toilets is very important for the whole community including older people, families with children and visitors.

Transport and Access Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved Transport Planning and provision	Re-establish the Transport Working Group	Ministry of Transport, local transport providers, Council and community	High

Transport and Access Action Plan			
Objective	Action	Key Partnerships	Priority*
	Improve transport access to Lithgow Hospital and Community Health Centre	Council, transport providers, the community and Lithgow Health Service	High
	Investigate options for improving transport in rural areas	Translinc, transport providers, Council and other partners	Medium
	Review Council's planning instruments and procedures to encourage public transport and footpath path and cycle ways in future development areas	Council, transport providers and community	Medium
	Expand the availability of community transport options within Lithgow including shopper bus services	Translinc, Council and other partners	High
	Audit bus shelters in areas where older people live and progressively upgrade with safe and weather protective shelters	Council and bus company	Medium
	Produce a transport information directory	Council, transport providers, LINC and other partners	Medium
Improve access to public buildings and places	Establish a Council access committee	Council, community and business community	High
	Develop a Disability Access Plan for Council's footpath and community facilities	Council, community, relevant service providers and business community	Medium
	Prepare a pedestrian access and mobility plan to improve walkability that focuses on access to Lithgow CBD area	Council, community and business community	High
	Install an accessible public	Council	High

Transport and Access Action Plan			
Objective	Action	Key Partnerships	Priority*
	toilet facility in the centre of Lithgow CBD		
Enhanced pedestrian safety and amenity	Introduce measures to improve pedestrian safety and amenity in areas of high pedestrian activity	Council	High
Enhanced road safety of older people	Promote Council's road safety programs to older people and develop specific road safety programs for older people	Council and RTA	High

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 8 Healthy Lifestyles and Recreation

8.1 Introduction

As discussed in the Health Chapter of this report^{1 & 2}, a number of issues stand out in relation to the health status of the Lithgow community:

- Lithgow has significantly higher rates of smoking and a significantly lower proportion of smoke free households than the NSW average
- Lithgow has higher rates of self reported asthma, overweight and obesity compared to the NSW and Sydney West Area Health Service (now Nepean Blue Mountains Local Health District) averages
- residents of Lithgow LGA had significantly higher hospitalization rates than SWAHS and NSW as a whole
- rates of hospitalization for cardiovascular disease were 27% and 43% higher in men and women respectively than in NSW as a whole. Rates of admission with a principal diagnosis of diabetes were also significantly higher in Lithgow than in NSW as a whole
- cardiovascular disease is the most common cause of death in Lithgow, but is not significantly higher, either in men or women, than in SWAHS or NSW as a whole

While the health status of the Lithgow community is generally not dramatically different to the rest of the SWAHS region, or to regional NSW, there are nonetheless a number of diseases and health conditions of concern that are related to lifestyle. Health status and quality of life can be improved through the adoption of healthy lifestyles and, as the SWAHS Health Impact Assessment (HIA) of the Strategic Plan says, by having access to employment and economic development, education, access to services, lifestyle, the natural and built environments etc.

The Lithgow Strategic Plan 2007 adopted the vision of *Creating a healthy community providing opportunities and facilities for a healthy lifestyle* and included a number of strategies and actions including:

- surveying the recreational needs of the community
- determining the future of the indoor pool proposal
- review Council land holdings including the classification of lands
- prepare community land plans of management in consultation with community
- develop initiatives to promote a healthy lifestyle
- form a community health committee

See Appendix 5 for further detail.

The SWAHS Health Impact Assessment of the Strategic Plan recommended that Council develop partnerships to facilitate healthy lifestyles that have the potential to address higher rates of hospitalisation and mortality related to risk factors of smoking, physical inactivity, overweight and obesity. The HIA recommended that Council:



¹ Social and Health Profile of Lithgow LGA (Version 3 SWAHS 2010)
Sydney West Area Health Services' (now Nepean Blue Mountains Local Health District) Centre for Epidemiology, Indicators, Research and Evaluation

² NSW Chief Health Officer's Report 2010

- implement healthy lifestyle programs including the Live Well Lithgow Project and falls prevention programs
- develop a comprehensive Tobacco Control Policy that will support smoke free environments
- audit existing recreational areas for accessibility and plan progressive modifications

Recreational needs identified in the Lithgow Social Plan 2006-13 included forums to prevent isolation, better seating in parks and playgrounds, a heated indoor pool and the need for open space planning to connect Wallerawang and Lake Wallace for active recreation.

See Appendix 6 Social Plan for further detail.

8.2 Lithgow Recreation Needs Study

It is timely that during the period that the Ageing Strategy was under development, Council also undertook an Open Space and Recreation Needs Study³.

The Open Space and Recreation Needs Study aims to provide Council with supporting information to understand the provision of sport and recreation facilities across the LGA, to assess the demand for open space and to develop a list of priorities for the future.

The study identified a number of current trends in relation to recreation and physical activity which are relevant to older people:

- walking is the single most frequently undertaken activity across the NSW population (35.8%)
- along with walking, aerobics/fitness (22.4%), swimming (14.5%), running (10.7%) and cycling (9.0%) are in the top five activities for the NSW population
- there is substantially higher participation in informal, unstructured activities than in organised sports
- older people are more likely to participate in informal, unstructured activities with young people being more likely to engage in organised sports
- women, older adults, married people (including those in de-facto relationships), people in lower income households and obese people are less likely to participate in sufficient physical activity

The study highlights the physical, economic, social and environmental benefits of a physically active community, including;

- minimising chronic disease
- increased social cohesion
- improved social/community networks and social capital
- reduction in air pollution and green house gases
- reduction in stress on road and infrastructure
- improvement of local neighbourhoods
- improved family and community connectedness



³ Lithgow City Council
Open Space And Recreation Needs Study
ROSS Planning
February 2011

A number of community consultations were undertaken during the Study with Councillors, Council staff, the community and sporting organisations. The most common negative issues identified during the Study consultations included:

- dissatisfaction with pool and aquatic facilities
- dissatisfaction with paths, play opportunities and access to shade
- dissatisfaction with the range of programs and services offered across key target groups

Priority areas identified in the Study consultations for improvement included:

- an all-year heated indoor pool
- more family-friendly recreation areas with infrastructure that is appealing to a range of age groups
- provision of quality parks and sports facilities in rural communities
- Hassans Walls lookout, as well as other natural features of the area, to be utilised to their full potential
- a better quality walk/cycle network, particularly for the ageing community, including the development of a walking cycling trail along Farmers Creek, linking a number of key recreational and cultural assets
- access to seats, water and shade in recreation areas

Priority recommendations from the Recreation Needs Study with most relevance to older people include:

- develop the recreation corridor along Farmers Creek, linking residential areas and key community hubs
- upgrade Endeavour Park and Queen Elizabeth Park to district level standard facilities including significant installation of play and picnic opportunities to meet the demands from the broader range of users (large families, play for different age cohorts etc)
- develop a master plan for the Tony Luchetti Sportsground/Lithgow Memorial Pool/Watsford Playing Field area linking with the pool and possible adventure playground
- development of a district park in Portland, preferably at Saville Park, to build on the existing assets and including an adventure play facility
- assess the asset condition of the Portland Olympic Pool

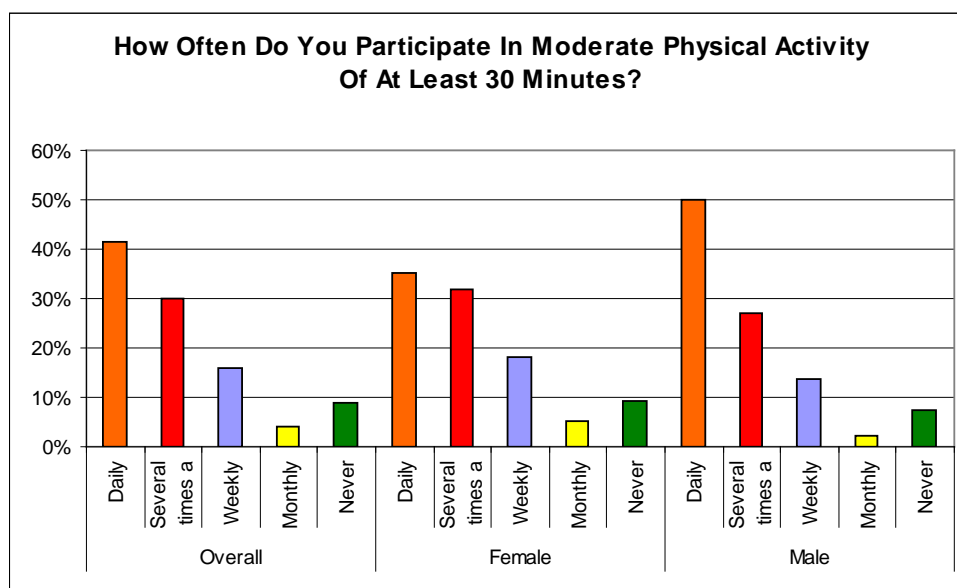


8.3 Ageing Strategy Survey

The survey asked people how often they undertake moderate physical activity of at least 30 Minutes. Figure 8.1 shows overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

Approximately 70% of survey respondents exercise either daily or several times a week. Nearly 77% of men exercise either daily or several times a week compared to 67% of women while 9% of women and 7% of men say they never exercise. Rates of daily exercise increase up to the 70-74 age group after which they decline, with 25% of people aged 80+ years saying they never exercise.

Figure 8.1



8.4 Live Well Lithgow Program

During 2009 and 2010, Council and Sydney West Area Health Service (now Nepean Blue Mountains Local Health District) undertook a joint initiative called the Live Well Lithgow program which aimed to raise community awareness and encourage behavioural change in relation to the importance of developing healthy habits. This was a very successful example of a health promotion program partnership.

There were three key aspects to Live Well Lithgow:

- the Live Well Lithgow Healthy Lifestyle Challenge
- Live Well Lithgow Calendar of Events
- Eat Well Lithgow Retail program

The Live Well Lithgow Healthy Lifestyle Challenge

The Challenge ran for twelve weeks and was open to all Lithgow residents and workers. Participants were encouraged to practice healthy lifestyle habits over this period and points were awarded for being active and eating fruit and vegetables with a range of prizes on offer. All participants received a LWL kit which included a pedometer and challenge diary.

Challenge participants were asked to complete a short pre-challenge questionnaire which included demographic information and five behavioural questions relating to eating and activity habits.

Approximately 1,350 people received a Live Well Lithgow Challenge kit, with 1,144 completing the pre-challenge survey.

Approximately 300-400 people submitted score cards in each of the first few mini-challenges, however this slowly reduced to less than 100 by the final mini-challenge. This was less than expected, however strong anecdotal evidence suggested that many people were practising healthy lifestyle habits even though they were not entering the competition.

A final survey was sent out to the 1,144 people who had completed the pre-challenge questionnaire, to obtain their feedback on the program. Of these, 86 responded within the allocated time period.

The key findings were:

- 88% of respondents claimed to know more about living a healthier lifestyle after the LWL challenge
- 86% had increased their consumption of fruit and vegetables in that period
- 85% of respondents had reduced their consumption of 'sometimes' foods such as sweets and fast food
- 86% of respondents claimed to be more active on a day-to-day basis
- 98% of respondents intended to continue to practice a healthier lifestyle in the future
- 85% of respondents stated that they felt healthier after the LWL challenge

In many cases the other 12-15% of respondents claimed to have been leading healthy lifestyles prior to commencement of the LWL challenge. The most popular events were the LWL Healthy Lifestyle Expo, the bushwalks and heritage walks and the fresh produce markets. Most respondents also supported the concept of another LWL challenge in 2010.

Live Well Lithgow Calendar of Events

A twelve week calendar of events supported the Live Well Lithgow Challenge and provided opportunities and incentives to practice healthier lifestyles and helped to maintain a high public profile for the Challenge.

A weekly walking group was introduced in Lithgow, which met on Thursday mornings at the Lithgow library and walked for an hour.

The walks were promoted under the Heart Foundation Walking program and catered to different abilities, with a longer and shorter route option offered each week. The walks were most popular with women aged 55 - 75.

Eat Well Lithgow Retail program

Over 30 retail cafes, restaurants, clubs, health food stores, grocers and hotels undertook to add healthy items to their menus, thus offering people healthy options when they dined out.



8.5 Conclusions and Recommendations

As discussed earlier in this chapter, and in more detail in the Health Chapter, Lithgow residents experience a number of lifestyle related diseases and health conditions at higher rates than the average of the Sydney West Area Health Service region and NSW.

While as SWAHS points out⁴, the determinants of these "lifestyle" diseases, include socio-economic conditions such as employment, education and access to services, there is no doubt that involvement in recreation, exercise, sport and leisure can have a substantial effect on health and fitness.

The Recreation Needs Study referred to earlier in this chapter, highlights the benefits of a physically active community in minimising chronic disease as well as in increasing community cohesion and community networks.

⁴ Health Impact Assessment of the Lithgow Strategic Plan 2007
Sydney West Area Health Service 2008

Ageing Survey respondents reported quite high rates of regular and moderate physical activity with more than 70% saying they exercise for at least 30 minutes either daily or several times a week.

Although the climate in Lithgow can be harsh at some times of the year, Lithgow is blessed with many beautiful and well located natural assets including Hassans Walls, Farmers Creek, Capertee Valley and Lakes Wallace and Lyall, to name a few and is also well serviced with sporting fields. In addition to these opportunities, it would appear there is a strong desire on the part of the community to utilise these environmental assets and to embrace healthy lifestyles.

There are however a number of areas where Council, sometimes in partnership with others, can bring about improvements to the physical infrastructure of recreational facilities and to the ways in which they are used. As the ALGA Age-friendly Built Environments report⁵ says:

Neighbourhood parks that are within walking and biking distance of a person's home or work can encourage greater physical activity. Trails that link homes, work, commercial centres, public transport and community facilities provide safe and attractive thoroughfares for pedestrians. These facilities, combined with educational programs about health and active living, can create opportunities for residents of all ages to be healthier.

The Recreation Needs Study highlighted a number of areas of community dissatisfaction including pool and aquatic facilities; paths, play opportunities and access to shade, and; the range of programs and services offered across key target groups.

It is important to remember that older people don't only use recreational facilities in their own right. They can be parents, grand parents, and in some cases the carers of others. Recreational and open space planning and management therefore needs to take account of the broad range of potential users. This includes access to seats, water, shade and public toilets.

The Live Well Lithgow project has been a very successful model for engaging the community in the adoption of healthy lifestyles. While this project is now completed, there are elements of it, for example the healthy lifestyle challenge and walking groups that could be replicated by Council in partnership with others.

Healthy Lifestyles and Recreation Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved recreation planning	Undertake strategic asset planning with the needs of older people in mind in relation to parks, playgrounds and recreation areas including play and picnic opportunities, seating, tables, BBQ's, water, shade and public toilets and consideration of safety	Council, user groups and community	High for Hassans Walls, Endeavour Park, Queen Elizabeth Park, Saville Park, Portland and Lake Wallace
	Develop and progressively implement the Farmers	Council, user groups and	High

⁵ Age-friendly Built Environments - Opportunities for Local Government Australian Local Government Association 2006

Healthy Lifestyles and Recreation Action Plan			
Objective	Action	Key Partnerships	Priority*
	Creek corridor concept linking residential areas and key points of interest and including access to seats, water, shade and public toilets and consideration of safety	community	
	Develop a master plan for the Tony Luchetti Sportsground/Lithgow Memorial Pool/Watsford Playing Field area and proceed with future stages of the indoor heated aquatic centre	Council, user groups and community	High
Adoption of healthy lifestyles within community	Promote social marketing programs that incorporate physical health, exercise, diet, emotional health and attitudes to ageing	Council, SWAHS and community	High
	Develop walking and cycling programs utilising community volunteers as leaders	Council, SWAHS and community	Medium
	Enhance the provision of exercise programs for older people	Council, SWAHS, sporting and recreation groups and community	Medium
	Promote health awareness programs relating to cardiovascular, respiratory, weight and diabetes	Council, SWAHS and community	High
	Develop a comprehensive Tobacco Control Policy to create smoke free environments in public places	Council, LBA, SWAHS and the community	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 9 Housing and Accommodation

Section 1 Housing

9.1.1 Introduction

The ageing of the population as detailed in the Chapter 3 Community Profile, will have significant implications for the local housing market.

Further, significant numbers of older people are living alone. At the 2006 Census, 26% of Lithgow residents aged 55+ were living alone, compared to the NSW average of 22%. The proportion of older people living alone increases with age with 38% of 75-84 year olds and 44% of people aged 85+ living in lone person households.

Women are more likely to be living alone than men, particularly as they age.

The need for affordable housing that is well located and appropriate to the needs of different age groups and family types has been of concern to Council for sometime. The Lithgow Strategic Plan¹ identified a number of actions in relation to housing including:

- provide for higher density development around transport and central business nodes
- identify sites for potential seniors living with easy access to services and facilities
- allow for a mixture of housing types in the comprehensive Lithgow Local Environmental plan and development control plans
- identify and protect land for future urban development including senior living in the Land Use Strategy and comprehensive Lithgow Local Environmental Plan
- encourage adaptable and affordable housing in medium density development

See Appendix 5 Strategic Plan for further detail.

The 2006 Lithgow Social Plan² also recognised the importance of Council's role in relation to regulating the supply, location and affordability of housing for older people and recommended a number of actions:

- develop and Promote Adaptable Housing Guidelines
- lobby Government for aged care facilities and services
- council to take a lobbying role with government with regard to affordable housing and crisis accommodation



See Appendix 6 Social Plan for further detail.

Figure 9.1 below shows the areas of highest concentration of people aged 65+ living in lone person households. **Figure 9.2** shows the areas in Lithgow where medium density housing is concentrated.

¹ Lithgow Strategic Plan
Lithgow City Council 2007

² Lithgow Social Plan 2006-11
Lithgow City Council 2008

Figure 9.1

Older (65 years and over) lone person households, Lithgow City 2006

(As a percentage of total households (a))



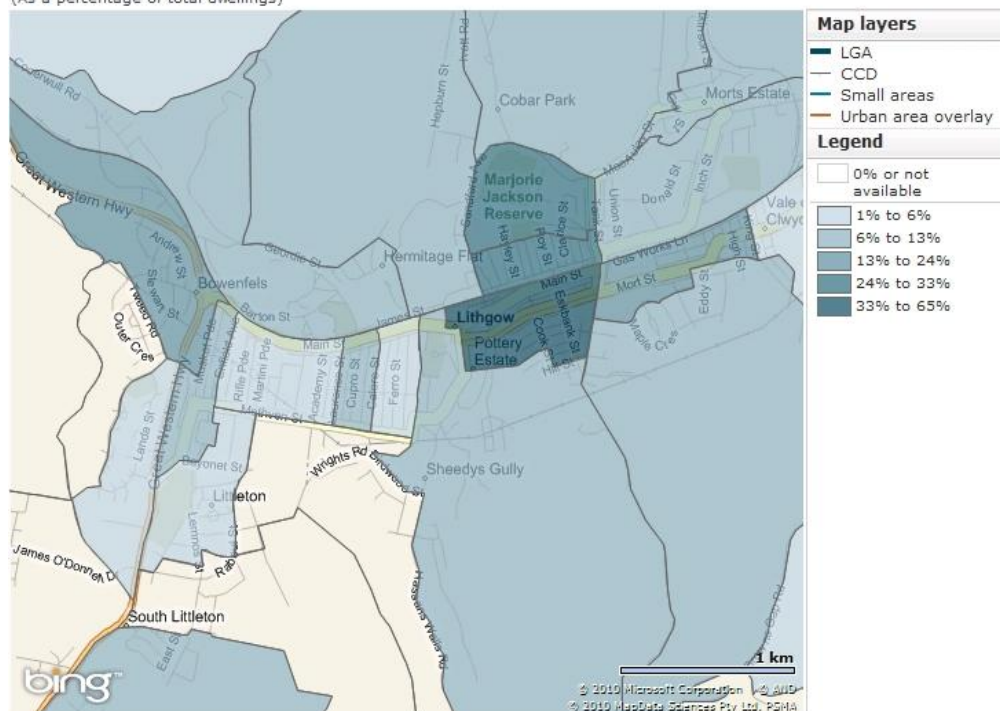
Source: ABS Census of Population and Housing 2006

Figure 9.2

Medium density dwellings, Lithgow City 2006

Semi-detached, row, terrace, townhouses and villa units, plus flats and apartments in blocks of 1 or 2 storeys

(As a percentage of total dwellings)



Source: ABS Census of Population and Housing 2006

9.1.2 Dwelling Construction

Table 9.1

Building approvals, Lithgow City Council 2002/03 -2009/10				Annual change ³		
Year (ending June 30)	Separate dwellings	Other dwellings	Total dwellings	Separate dwellings	Other dwellings	Total dwellings
2009-10	96	42	138	15	14	29
2008-09	81	28	109	12	1	13
2007-08	69	27	96	3	5	8
2006-07	66	22	88	30	16	46
2005-06	36	6	42	-36	-32	-68
2004-05	72	38	110	-37	21	-16
2003-04	109	17	126	15	-12	3
2002-03	94	29	123	--	--	

Source: Australian Bureau of Statistics, Building Activity, Australia

Table 9.1 shows changes in the number of building approvals over time for separate⁴ residential dwellings and other types of residential dwellings⁵. **Figures 9.3 and 9.4** present this data in graphic form. This gives a picture of building trends over time and an indication of whether changes are happening in the type of housing stock being built.

In general, separate dwelling approvals outnumbered approvals for other dwelling types for each year shown above by more than 2:1, although in 2009/10 30% of all residential dwelling approvals were 'other dwellings' which was the highest proportion of the 8 years from 2002/03 to 2009/10.

It will be interesting to see if this trend continues into 2010/11. The availability of a variety of housing is important for providing housing choice and housing affordability,



³ Annual change represents the difference in number from the preceding year. Negative numbers denote a drop in the number of approvals from the previous year, and positive numbers an increase

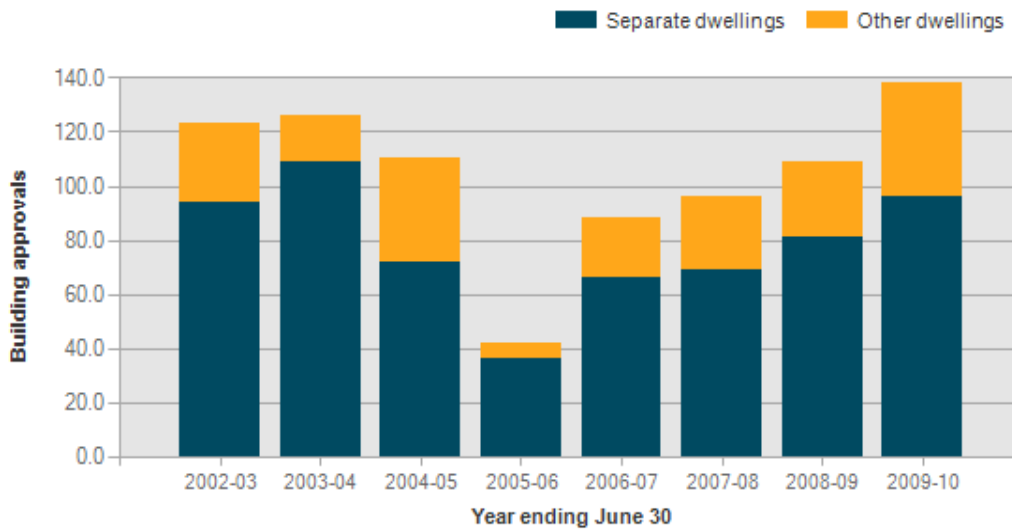
⁴ A dwelling (or residential building) is defined as: A building consisting of one or more dwelling units which can be either houses or other residential buildings.

⁵ An other residential building is a building other than a house primarily used for long-term residential purposes and contains more than one dwelling unit including: semi-detached, row or terrace house or townhouse with one storey; semi-detached, row or terrace house or townhouse with two or more storeys; flat, unit or apartment in a building of one or two storeys; flat, unit or apartment in a building of three storeys; flat, unit or apartment in a building of four or more storeys; flat, unit or apartment attached to a house; other/number of storeys unknown..

particularly for older people and those living alone.

Figure 9.3

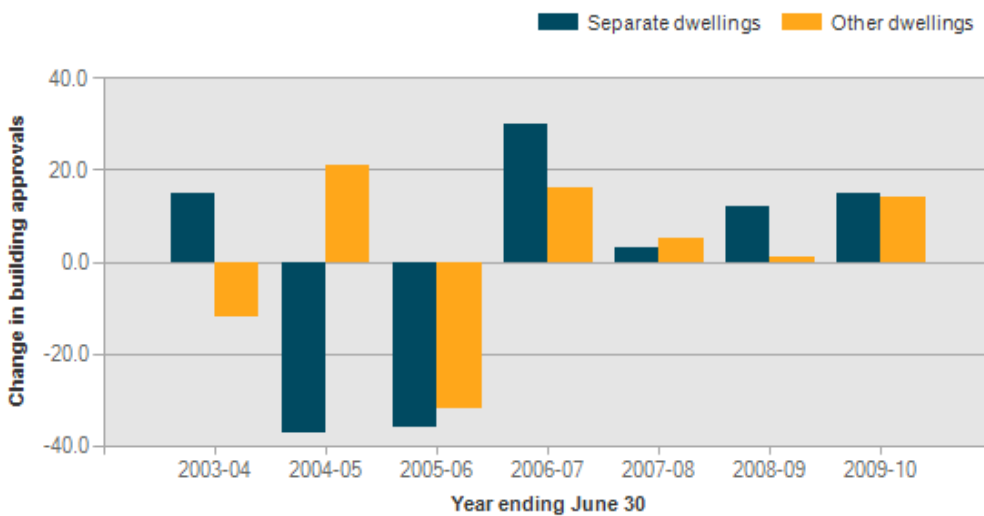
Residential Building approvals, Lithgow City Council



Source: Australian Bureau of Statistics, Building Activity, Australia, (catalogue number: 8752.0 to 8752.7)

Figure 9.4

Change in building approvals, Lithgow City Council



Source: Australian Bureau of Statistics, Building Activity, Australia, (catalogue number: 8752.0 to 8752.7)

9.1.3 The Lithgow Housing Market

A housing market analysis undertaken by Housing NSW in 2011⁶ provides an interesting insight into the Lithgow housing market with implications for older people.

⁶ Lithgow Housing Market
Housing NSW 2010

Occupancy Rate

At the 2006 Census, Lithgow had 7,742 occupied private dwellings (up by 5.6% from 7,329 in 2001), with an average occupancy rate of 2.55 persons per dwelling (down from 2.62 in 2001). Lithgow's 2006 occupancy rate is marginally above the average for non-metropolitan NSW and in the middle of the neighbouring LGA's of Bathurst, Weddin, Mid Western Regional and Orange.

Housing Diversity

At the 2006 Census, 0.6% of all dwellings in Lithgow were bedsits, 2.9% had one bedroom, 21.4% had two bedrooms, 49.8% had three bedrooms and 23.1% had four bedrooms. This means that at least 72.9% of dwellings in Lithgow had three or more bedrooms.

Separate houses are the predominant dwelling type in Lithgow, comprising 91.2% of dwellings, followed by attached houses (semi, row, terrace, townhouse) with 4.8%.

The overwhelming predominance of larger bedroom and separate dwelling stock indicates a serious lack of housing diversity.

Private Rental Market

The private rental market represents 15.8% of all occupied private dwellings in Lithgow LGA, compared to an average of 17.3% in non-metropolitan NSW and 21.9% for the Greater Metropolitan Region. Lithgow had a lower number and proportion of private rental stock in 2006 than at the 2001 Census (16.8%). The proportion of private rental stock in Lithgow is around the middle of the range of neighbouring local government areas (from 9.8% in Weddin to 20.7% in Bathurst), with a number of other LGA's in this housing market experiencing a loss of rental stock (Cabonne, Lachlan and Parkes).

Given that Lithgow experienced an increase in the total number of dwellings between 2001 and 2006, yet had a loss of rental stock over the same time frame, suggests there has been conversion of rental to owner occupation in Lithgow.

The loss of private rental stock reduces housing options, particularly for lower income earners.

People in Housing Stress

2009 Centrelink data shows that Lithgow has 1,135 residents receiving Commonwealth Rent Assistance (CRA) and of those, around 23% were in housing stress (paying more than 30% of their income in rent).

Single person households comprise 83% of all households in receipt of CRA and in stress with older residents on the age pension making up 24% of this total. This indicates that the private rental market in Lithgow is not catering adequately for single person households.

Caravan Parks

According to the 2001 Census, there were 24 households living permanently in caravan park accommodation in Lithgow. Centrelink data for the same year indicates that most households living in caravan park accommodation in Lithgow had a resident in receipt of a pension or benefit. This suggests that caravan parks are providing affordable housing for lower income earners, mostly in single person households.

Centrelink data from 2006 indicates there were around the same number of residents living in caravans in Lithgow who were in receipt of a pension or benefit as in 2001.

There are questions about the long term suitability of this kind of accommodation for older residents, particularly frail aged, people with mobility problems and a range of disabilities. In addition, these residents are particularly vulnerable to homelessness if there is any redevelopment of caravan park accommodation or change from long term to short term sites.

Rental Affordability

From the 2006 Census, 50% of all low⁷ and moderate⁸ income households renting in the private rental market in Lithgow are in housing stress, which is an increase from the 2001 Census. This compares with 45% in Orange, 49% in Mid Western Regional and 46% in Bathurst. There are considerably more low and moderate income renters in housing stress than there are purchasers in housing stress in Lithgow, and this trend is true generally across Australia.

At December 2010, the median rent in Lithgow for two bedroom dwellings (all dwellings, units and houses) was \$188 per week (up by 10% from 12 months previous), for three bedroom dwellings it was \$240 per week, up by over 9% from 12 months previous) and for four or more bedrooms it was \$305 per week.

Median rents in Lithgow are towards the middle of the range in the Central West housing market. Lithgow has experienced strong increases in median rents over the last twelve months.

Private Purchase

At December 2009, the proportion of dwellings affordable for purchase to households at 80% of median income⁹ was 45.3% in Lithgow (compared to an average of 23.6% in non-metropolitan NSW). Purchase affordability in Lithgow is above average for non-metropolitan NSW.

From the 2006 Census, the proportion of low and moderate income households in Lithgow who are purchasing and are in housing stress is 42%. This represented an increase of 14.3% between 2001 and 2006. The number of low and moderate income households purchasing and in housing stress in Lithgow is increasing at a faster rate (between 2001 and 2006) than the average for non-metropolitan NSW (10.8%). Lithgow has a marginally lower proportion of low and moderate income households purchasing and in housing stress than the average for non-metropolitan NSW (43%) and is at the upper end of the range compared with other LGA's in the Central West, which range from 25% in Lachlan to 49% in Bathurst.

Social Housing

There are currently around 540 social housing dwellings in Lithgow, with 499 public housing dwellings, 1 Aboriginal Housing Office dwelling and around 40 community housing properties. At the 2006 Census, public housing represented 5.6% of all housing in Lithgow, compared to an average of 3.5% in non-metropolitan NSW.

There is one public housing estate in Lithgow which represents around 60% of all public housing in Lithgow.

Public housing tenants (household heads) in Lithgow are predominantly in the 25-54 age group (56.2% compared with 52.8% on average for non-metropolitan NSW), with single person households accounting for 43.2% of tenants (compared with 45.7% on average in public housing in non-metropolitan NSW), followed by single parents (19.1% compared with 22.4% generally in non-metro NSW). There is a larger proportion of couples with children in public housing in Lithgow (10.1%) compared with the non metropolitan average (6.0%)

Key Issues

In Lithgow LGA, key housing issues include:

⁷ "Low income" households are those whose income is under 80% of the median household income.

⁸ "Moderate income" households are those whose income is between 80% and 120% of the median household income.

⁹ Based on 30% of income

- the need for more diversity of housing stock, including more one bedroom and two bedroom stock, studio dwellings, accessory dwellings or granny flats and boarding house type accommodation, to meet the needs of the community throughout the housing life cycle
- there is insufficient smaller bedroom stock to meet the needs of the community – with 83% of CRA recipients in housing stress in Lithgow being single person households. Other councils have used their DCP to require a mix of one, two and three bedroom stock in new residential developments. This would assist in meeting the needs of households through different stages of their housing life cycle, and in particular young people and older people
- new more self contained boarding house style development may also assist in meeting the needs of lower income earning single people in the private rental market.
- accessory or secondary dwellings (granny flats) may assist in meeting some of the demand for smaller dwellings in Lithgow. The fact that a significant proportion of CRA recipients in housing stress are on the Aged Pension suggests there are insufficient affordable housing opportunities for older lower income earners. Where lot sizes are large accessory dwellings could be encouraged to provide more affordable rental accommodation suitable for both younger and older residents
- the decline in rental housing stock is a key issue for Lithgow, by reducing the flexibility of the housing stock to meet the needs of the community. Increasing the attractiveness of investing in boarding houses and granny flats, which by their nature tend to be rental accommodation, may assist in resisting the trend to decline in private rental accommodation in Lithgow
- the need for more affordable rental housing. Census data shows 50% of all low and moderate income renters in Lithgow LGA are in housing stress. There are considerably more low and moderate income renters in housing stress than low and moderate income purchasers in stress in Lithgow. This is in spite of a relatively strong public housing presence
- there are also a number of CRA recipients living permanently in caravans. This indicates that there is insufficient affordable housing to meet demand. These residents are at risk of losing their housing if there is any move from long term to short term sites or redevelopment of the caravan parks. The loss of this low cost housing would have significant impacts for the residents and flow on effects to the local housing market
- given that a significant proportion of CRA recipients in housing stress are Aged Pensioners, there is a need for more housing suitable and affordable for older residents. Ensuring that there is sufficient adaptable housing to allow older residents to age in place is also important

9.1.4 Lithgow Land Use Study

Lithgow City Council has recently completed a draft Land Use Study (LUS)¹⁰ which incorporates a vision for land use planning in the LGA for the next 20 years. The LUS will inform the development of a new Local Environmental Plan (LEP) during 2011/12 which will replace the current LEP that dates from 1994.

The LUS identifies a number of issues in relation to population change, household formation and housing stock that have implications for older people:

- static to declining population out to the year 2031
- a trend to smaller household sizes
- a rapidly ageing population
- the need for housing diversity due to Lithgow having a low level of medium and high density housing. This has been due to the relative ease and affordability of new release development in the past which have reduced the viability of higher density housing in developed areas and to community apprehensions of higher density housing. There has

¹⁰ Lithgow Land Use Strategy 2010-2030
Lithgow City Council 2011

also been a low level of dual occupancy development in Lithgow which could meet the needs of older people

- as existing housing stock ages and the demand for smaller housing increases, there will be pressures on existing areas to accommodate higher densities
- the need for suitable housing to be well located and close to shops and services
- the need for seniors housing
- housing affordability issues

A key recommendation of the LUS is that a detailed Housing Strategy be developed, the first such Strategy for the Lithgow LGA.

9.1.5 Age Friendly Built Environments: Opportunities for Local Government Report

The Age Friendly Built Environments: Opportunities for Local Government report¹¹ has relevance to the situation in Lithgow and the challenges facing Council and others in relation to urban development and design:

In Australia, low density urban development, a characteristic of many communities, is not particularly age-friendly. Features, such as rapid suburbanisation, dispersed development patterns, the lack of footpaths, separation of land uses and automobile dependency all present significant obstacles to the independence of seniors.

Nevertheless, good urban design can play a major role in allowing seniors to age in place and remain active - both physically active and active in their local communities. A safe pedestrian environment, easy access to shopping centres, a mix of housing choices, nearby health centres and recreational facilities are all important elements that can positively affect the ageing experience.

Age Friendly Built Environments report identifies a number of areas where Council can encourage housing choice:

Increase housing options

- develop a community information strategy to promote housing options for seniors
- support and/or resource demonstration projects that encourage innovation in design and diversity of housing choice for seniors
- identify and explore opportunities for aged care accommodation

Ensure essential infrastructure provision and service delivery

- promote ageing-in-place as a preference for seniors with services such as home modification and maintenance program
- ensure the provision of adequate urban infrastructure to support ageing-in-place
- sponsor workshops that concern seniors - safety in the home, prevention of falls and injury prevention, care issues and home security

Enhance planning and development processes

- streamline approval processes to facilitate the production of seniors' housing developments, in particular residential aged care facilities
- develop an age friendly assessment procedure for housing development applications
- ensure seniors are consulted in the planning and location of aged housing developments
- promote universal design and 'smart housing' principles in housing developments
- establish mechanisms to encourage suitable housing outcomes for seniors such as developer contributions, inclusionary zoning and betterment levies

¹¹ Age Friendly Built Environments: Opportunities for Local Government
Australian Local Government Association 2006

9.1.6 Housing NSW Data on Lithgow

The following data has been provided by Housing NSW¹²:

- there are 89 total applicants for public housing
- there are 19 public housing applicants aged 55+ years (3 couples, 12 single persons and 2 single parents)
- Housing NSW has 442 properties in Lithgow
- 89 of these properties are designated pensioner housing
- there are 174 one and two bedroom units which can be used by older persons

Housing NSW has recently constructed a number of housing units in Barton Street Lithgow, a number of which are for well aged people.

9.1.7 What Do People Say In The Survey?

The survey asked questions about housing tenure and housing suitability.

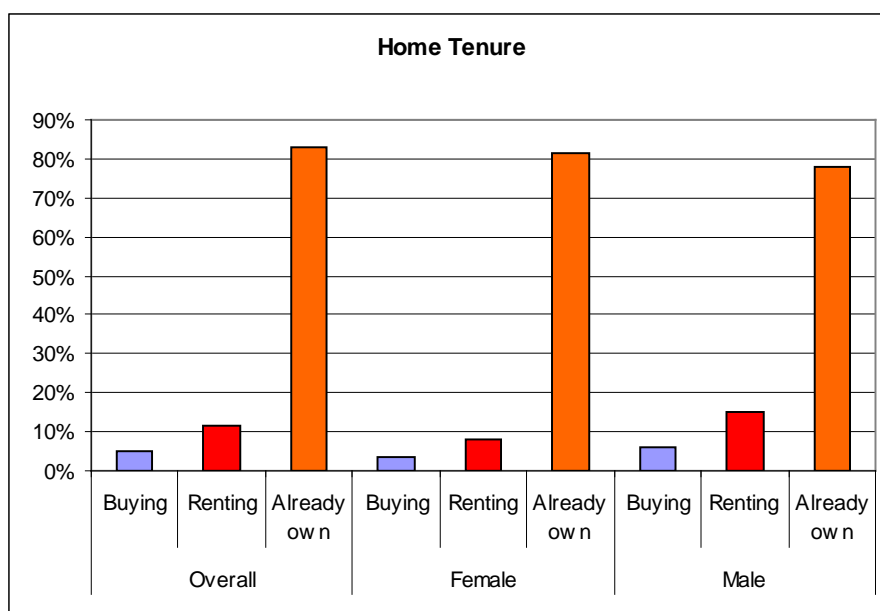
Figures 9.5-9.7 show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

Housing Tenure

More than 80% of survey respondents already own their own home although men are almost twice as likely as women to be renting. People living in Lithgow town, Portland and Lidsdale (although the Lidsdale numbers are small) have higher rates of renting than people living elsewhere while 25% of people aged 50-54 are renting, which is twice the average.

Single people are slightly less likely than couples to own their home and more likely to be renting. Older people in families with children are less likely than the rest to own their own home and nearly 40% of families with children under 12 years are renting.

Figure 9.5



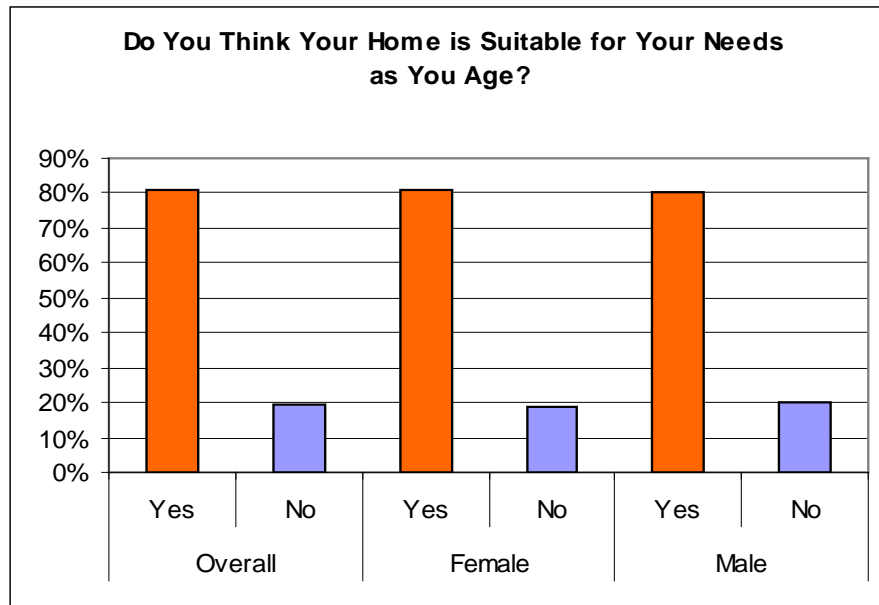
¹² Housing NSW Current at December 2009

Housing Suitability

The survey asked questions about the suitability of the current home in terms of access, location, heating, general condition, and the type of housing that would best suit their needs as they grow older. 80% of survey respondents think their current home is suitable however 20% say it isn't. Of note, is that 36% of Portland respondents say their current home isn't suitable as do respondents from the rural communities of Hartley, Capertee and Lidsdale.

People in the older age groups are more likely to think their current home is suitable (which might reflect their unwillingness to consider moving at this stage of their life) while those in the younger age groups, and those with children are more likely to think it isn't suitable.

Figure 9.6



Changes Needed To Make the Home Safe, Comfortable And Suitable

The survey asked people to list what changes they think are needed to make their home safe, comfortable and suitable as they age. The most common responses to this question were:

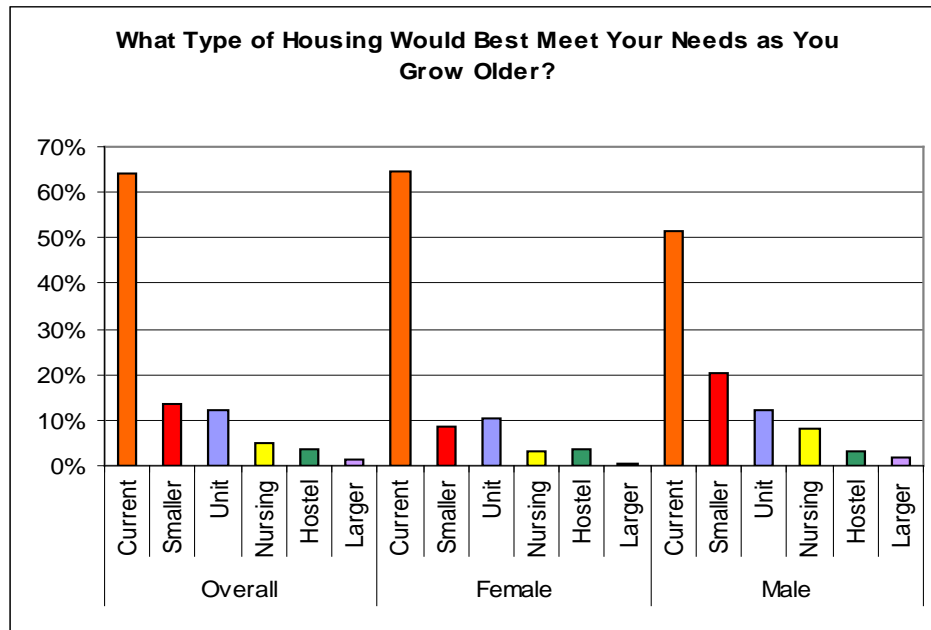
- assistance with gardening
- assistance with cleaning and home maintenance
- improved heating
- relocating to a smaller house

Type Of Housing that Would Best Meet Needs As people Grow Older?

The survey asked people to identify the type of housing that would best meet their needs as they grow older. Although 64% say their current house would be suitable, it is notable that a significant percentage (35%) of people indicate that they are prepared to consider smaller alternatives. Men are far less likely than women to consider their current housing to be suitable and twice as likely as women to consider a smaller house or a nursing home.

Survey respondents from Wallerawang are far more likely than those living elsewhere to consider downsizing to a smaller house and respondents from Portland are far more likely to consider living in a unit. Survey respondents across all age groups say they are prepared to consider downsizing with those in the younger age groups more so. People living with children are far less likely than people living without children to consider a smaller house or unit.

Figure 9.7



5.1.8 Conclusions and Recommendations Housing

The current and forecast demographic trends in Lithgow are striking.

As detailed earlier in this report, the number of people aged 55+ in Lithgow LGA has already increased by 39% or 1,557 people between 1996 and 2006 and population projections project an extra 3,000 older people in the year 2036.

While much of this increase will be due to the ageing of the existing population rather than newcomers, the housing needs of existing residents may be quite different to their current housing situation, that is they may be living alone due to the death of a partner and children leaving home or their current home may not be suitable in terms of size, manageability, location and accessibility.

More and more people are living alone with 1 in 4 Lithgow residents aged 55+ living alone at the time of the 2006 census. Further, the proportion of older people living alone increases with age with 38% of 75-84 year olds and 44% of people aged 85+ living in lone person households. Women are more likely to be living alone than men, particularly as they age.

It is clear from the above that there is a mismatch between the housing needs of older people and the available housing stock. Despite the high number of older people living alone, the majority of new housing stock has been multi-bedroomed separate dwellings. In the period 2002/03 to 2009/10 separate dwelling approvals in Lithgow outnumber approvals for other dwellings by more than 2:1.



This highlights a lack of housing diversity in Lithgow which limits housing choice and housing affordability, particularly for older people and those living alone.

The housing market analysis undertaken by Housing NSW in 2011 has a number of very telling points to make about the Lithgow housing market. It identifies the need for: more diversity of housing stock; more affordable rental housing; more housing suitable and affordable for older residents, and; ensuring that there is sufficient adaptable housing to allow older residents to age in place.

Council's 2010 Land Use Study also identifies a number of issues with implications for older people, including the low level of medium and high density housing and dual occupancy development in Lithgow, the need for suitable housing to be well located and close to shops and services and the need for seniors housing.

The ageing survey results showed that most older people (over 80%) own their own home, although men are almost twice as likely as women to be renting.

While 80% of survey respondents think their current home is suitable in terms of access, location, heating and general condition, 20% say it isn't.

The most common changes people think are needed to make their home safe, comfortable and suitable as they age were:

- assistance with gardening
- assistance with cleaning and home maintenance
- improved heating
- relocating to a smaller house

Although 64% say their current house would be suitable, it is notable that a significant percentage of people (35%), indicate that they are prepared to consider smaller alternatives.



Survey respondents across all age groups say they are prepared to consider downsizing with those in the younger age groups more so.

Being prepared to consider downsizing doesn't necessarily mean that people will actually downsize when the time comes, but it does suggest that there is a significant mismatch between the community desire for smaller and more suitable housing, and the supply of this housing.

Issues raised during consultations included the need for home modifications in relation to grab rails and baths, houses are not heated appropriately for the climate, many houses are not suitable for wheelchairs, adaptable housing should be considered to meet needs of the elderly and frail aged.

A key recommendation is that a housing strategy be developed during 2011/12 in line with the Land Use Study recommendation. This housing study should have a priority focus on identifying strategies to increase the supply of smaller dwellings suitable for older single people and located close to shops and services; affordable housing including dual occupancy and granny flats, and; ensuring there is sufficient adaptable housing to allow older residents to age in place. Attention needs to be given to the differing needs of men and women and people of different age groups.

Housing Action Plan			
Objective	Action	Key Partnerships	Priority*
Increased housing choice. Improved housing affordability and location	Develop a Lithgow housing strategy	Council, Housing NSW, older people, private sector, residential care providers	High
	Review current LEP and development control plans and policies to facilitate the development of mixed densities around transport and service nodes	Council, community and housing industry	Medium
	Provide fact sheets for older people & developers on aged housing	Council, community and housing industry	Medium
	Identify well located sites for seniors housing	Council, housing industry, Housing NSW and community	Medium
	Develop and actively promote Adaptable Housing Guidelines	Council, housing industry, and community	Medium
	Develop a community information strategy to promote housing options for seniors	Council, housing industry, Housing NSW and community	High
	Develop collaborative partnerships and joint-ventures to facilitate the provision of seniors housing, including singles housing	Council, housing industry, Housing NSW and community	Medium
Improved safety in the home	Sponsor workshops and provide information on safety in the home, prevention of falls and injury prevention, care issues and home security	Council, SWAHS ¹³ , Housing NSW and community organisations.	Medium
	Develop collaborative arrangements for reducing the incidence of and for responding to domestic squalor	Council, SWAHS, Housing NSW and community organisations	Medium
Improved energy efficiency and housing suitability	Encourage energy efficient and sustainable housing	Council, housing industry, Housing NSW	Medium
	Enhance the provision of home modification and maintenance services	Department Ageing Disability and Home Care and community organisations	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

¹³ Now Nepean Blue Mountains Local Health District

Section 9.2 Residential Aged Care

9.2.1 Introduction

Demographic trends as detailed in Chapter 3 point to a likely increasing demand for residential care places in Lithgow. These trends include an increasing number of older people in the population, a decreasing number of younger people to care for them and more and more people living alone and living longer.

Housing suitability and location, health and the extent to which there are support services, are important determinants of whether older people remain at home or relocate to residential care. Lithgow has prided itself on looking after its own and there being strong networks of family and friends to support older people at home. Certainly these community strengths were reported by many people in the survey and community consultations. As the community changes and younger people leave however, these community and family supports may not be there to the extent they now are.

Further, more and more people are living alone, particularly women in their later years.

The lack of housing diversity in Lithgow, as detailed earlier in this Chapter, limits housing choice and housing affordability, particularly for older people and those living alone and diminishes the ability of older residents to age in place.

9.2.2 Residential Aged Care in Australia

The Residential Aged Care in Australia 2008 - 09, a Statistical Overview by Institute of Health and Ageing¹⁴ provides some interesting insights into the current and future of residential care in Australia.



- nationally, the number of Residential Aged Care Places (RACP's) is continuing to increase with over 178,000 operational places at 30 June 2009, up from 175,500 the year before
- at 30 June 2009, there were 87 RACP's per 1,000 people aged 70+ years. The target is 88 per 1,000 people aged 70+ years by June 2011
- at June 2009, 55% of residents in residential aged care were aged 85+ years; there were 2 women for every man; 75% were assessed for high level care and 25% for low level care

¹⁴ Residential Aged Care in Australia 2008 – 09
a Statistical Overview by Institute of Health
and Ageing Canberra

Permanent Care

Permanent residential aged care is offered to people who are no longer able to be supported living in the community and is offered at two levels of care: low-care and high-care (depending on a person's assessed needs).

Respite Care

Residential respite care provides short-term care. It supports elderly people in transition stages of health, and is used by carers to provide them with a break from their caring duties. Residential respite care is either planned or emergency based, and is provided as either low- or high-care.

National Targets and Provision ratios

A specified national target ratio is used to determine the geographic distribution and types of aged care places to be made available. The aim of the target ratio is to ensure that there is equity of access to services between metropolitan, regional, rural and remote areas. It also aims to ensure that the growth in the number of aged care places available across Australia matches the growth in the aged population.

Under this target ratio, the Australian Government seeks to achieve and maintain a national provision level of 88 subsidised operational aged care places for every 1,000 people aged 70+ years. This is to be achieved by June 2011. Of those 88 residential aged care places, 44 are for high-care places and 44 for low-care places

Number of Facilities and Location

The Residential Aged Care in Australia report showed that:

- between June 2008 and June 2009 there was a fall in the number of facilities across Australia but an increase in the number of residents. This is a general trend
- at June 2009, 61% of facilities were in major cities and 25% in inner regional areas like Lithgow
- there is a trend towards larger facilities as follows:
 - In 1999, 52% of facilities Australia wide had 1-40 places. This fell to 32% in 2008. At 30 June 2008, 39% of facilities had 61+ places and 30% 41-60 places
 - In 2008, 4% of all facilities in NSW were 120+ places but it was 40% in cities
 - At 30 June 2009, 40% of NSW facilities were 61+ places but only 20% of inner regional facilities were 61+

Resident Profile of Residential Aged Care Places

Australia wide:

- there are more than twice as many women as men
- 28% were aged 85-89 years
- there is a trend towards older residents
- men in residential care tend to be younger and are more likely to be married therefore, their wife may be left at home. At June 30 2009, 56.3% of male respite residents were married compared to 22.2% of women
- people who live alone are more likely to go into permanent care and those who live with family are more likely to go into respite. Men who live alone are less likely than those with family to go into permanent residential care
- at June 30 2009, 89% of residents receive a pension and only 9% self funded retirees

9.2.3 Residential Aged Care in Lithgow

Consultations were undertaken with residential aged care providers in Lithgow during development of the Ageing Strategy. There are four residential aged care providers in Lithgow LGA with a total of 172 places, Tanderra (47 places), Cooina (49 places) and Three Tree Lodge (54 places) in Lithgow and Tabulam Cottages in Portland (22 places).

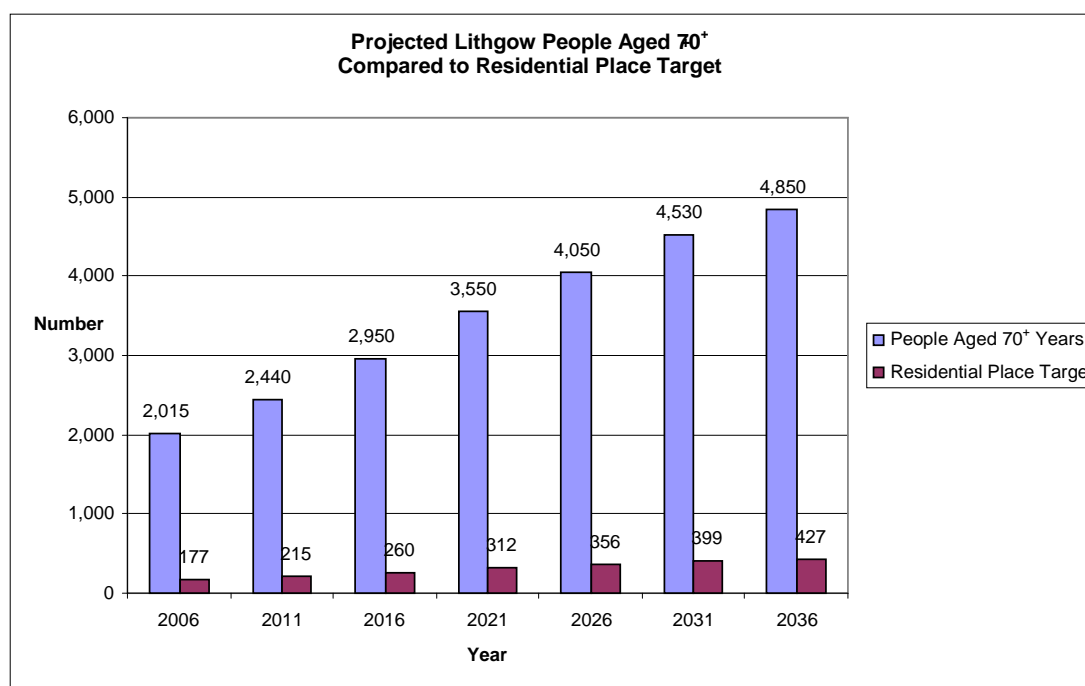
A comparison of the Commonwealth target for residential care places with the actual situation in Lithgow, shows that Lithgow has a current deficit of places, a deficit that will increase unless additional places are established.

At the 2006 Census, the Lithgow population aged 70+ years was 2,015 and is projected to rise to 2,950 by the year 2016 and 4,850 by the year 2036.

Figure 9.8 below compares the projected population aged 70+ years over time with the June 2011 Commonwealth target of 88 residential places per 1,000 people aged 70+ years and shows that, based on the Commonwealth target, there should be 215 residential places in 2011, rising to 260 in the year 2016 and 312 in the year 2021.

In 2011 there were 172 residential aged care places in the Lithgow LGA, spread across four service providers. This represents a shortfall of 5 places compared to the actual number of people aged 70+ years at the 2006 Census and a shortfall of 43 places compared to the projected number of people aged 70+ years in 2011. If no new places were to be established in Lithgow, this shortfall will rise to 88 places in 2016 and 140 places in 2021. This highlights the urgent need for planning to be undertaken for the expansion in the number and range of residential places in Lithgow.

Figure 9.8



Source: NSW Department of Planning Population Projections for Statistical Local Areas, 2006 to 2036

Note: 2006 number is actual number from ABS 2006 Census

The Commonwealth Residential Place Target is 88 beds per 1,000 population aged 70+ as at 30 June 2011

The number of available places affects both the ability of older people to access residential care at the time they need it, the availability of respite care and the viability of the residential care facilities themselves.

The Institute of Health and Ageing report highlights a number of trends within the aged care sector of relevance to the situation in Lithgow:

- a trend towards older residents with high level care needs. Despite this, 44 of the Commonwealth 88 residential place target are for low care places

- residents are twice as likely to be women than men
- over time, the number of residential care facilities has fallen across Australia but the number of residents in each facility is increasing. There is a trend to larger facilities, particularly in major cities. At June 2009, 40% of NSW residential aged care facilities had 61+ places, but again, facilities tended to be smaller in regional areas

The trend towards larger facilities and questions of viability and resident affordability have been under consideration by residential care facilities in Lithgow.

Tanderra

Discussions with the Tanderra Board highlighted the following issues:

- Despite increasing need for respite places, Tanderra find it difficult to offer respite care due to the demand for permanent places. Tanderra has no dedicated respite beds and can take no respite bookings but will try to use a vacant bed after someone leaves and before it is filled permanently.
- In the Tanderra Board's opinion, many people feel that they can stay at home instead of entering residential care but their homes are often not suitable and/or accessible. This view has been supported by other agencies that have said that in-home care appears to be provided longer in Lithgow than in other areas (eg Blue Mountains) because there seems to be good social and family networks in Lithgow. This places higher demands on carers at the same time that there are insufficient carer support services.
- Tanderra has been considering options for expanding for a number of years. They don't have the land or space to extend and expanding upwards is not considered a viable option.
- Tanderra also has 8 x 4 bed rooms that don't meet the current standards. A lack of land to expand prevents them building more rooms, including respite beds and makes it impossible to meet accreditation standards.
- They consider that a 70-90 bed facility would provide the synergy needed to operate the facility viably.
- Tanderra have been in discussions with Council over a long period to find a suitable alternative site. Tanderra have looked at all the currently available land and have found nothing suitable other than a Council owned site on the corner of Sandford Avenue and Coalbrook Street. They consider that they need about 2 hectares.
- Tanderra would like Council to undertake the necessary community consultation as part of the processing of making land available for residential care facilities.

Cooinda

Discussions with the Cooinda Board highlighted the following issues:

- Cooinda has 49 places and 1 emergency respite bed. They have a waiting list
- 90% of their residents are 90+ years
- considers that there will be increasing demand for places. They don't want people to have to leave the area for accommodation and recognise the need for additional places in Lithgow
- considers that people are in some cases staying at home longer than they should and facing depression and anxiety as a result
- support the need for more day programs like Gorrie Ban and LINC that can improve the quality of life of people living at home
- Cooinda wants to maintain the local identity of residential care services

Three Tree Lodge

Discussions with the Three Tree Lodge Board highlighted the following issues:

- while they experience peaks and troughs in demand, there is a generally increasing demand for places. Like Tanderra, they have no dedicated respite beds
- there is an increasing trend towards user pays and a reliance on bonds

- there is limited capital funding available through the Commonwealth and a competitive bidding system for new beds
- they have no current plans for new beds and have a restricted amount of available land to expand
- they face increasing costs, particularly electricity which represents a very large cost
- the Board made a number of suggestions in relation to the potential benefits from cooperation between residential facilities including joint purchase, staff pooling and training

Tabulam

Discussions with the Lithgow Health Service Manager highlighted the following issues:

- Tabulam has 22 beds and can provide day respite up to 2 days pw. Around 10 of the 22 beds are respite beds. These are always full and with a waiting list
- dementia care is a growing need which is difficult for facilities to manage
- public transport is very difficult in Portland. There is no taxi service or community transport. For this reason, Tabulam provides its own transport
- considers that Lithgow has sufficient residential age care beds, partly due to the trend for people in Lithgow, compared to those in other areas, to stay at home longer
- considers that there is a trend towards people only moving to residential care for the last period of their life. Which is how it should be, provided people receive quality care while still at home
- there is a growing focus on providing transition care through ComPacks and the Transitional Care program to people leaving hospital to prevent re-hospitalisation

9.2.4 Conclusions and Recommendations Residential Aged Care

Residential care is an essential component of the mix of housing options for people as they age. There will without doubt, be an increasing need for growth in the number of residential places in Lithgow from the current 172 places. Using the current Commonwealth target of 88 places per 1,000 people aged 70+, there is already a shortfall. This shortfall will increase considerably in future years if new places aren't created.

There is generally an awareness within the management of the four residential care providers in Lithgow, of the challenges they face. In addition to the need to provide additional places, they face additional challenges due to the shortage of respite beds, accreditation standards, an increasing number of residents with dementia, rising costs and skills shortages.

The shortage of respite beds, which was raised many times during the community consultations, is placing a considerable burden on families, carers, and the hospital system. The availability of respite is crucial for maintaining people in the community by giving carers and families a break.

The closure in early 2011 of Coleman House residential facility in Portland after many years of operation due to financial viability reasons, removed another residential option for older people. Although a small facility with a capacity of 13, Coleman House offered an important alternative to people with low level care needs.

The network of in-home care services, including aged care packages, which are designed to help people stay at home for as long as they choose and to maintain their health, independence and quality of life, is a very important but imperfect system. Waiting lists and limited service capacity can mean that people are staying at home in less than ideal circumstances. In many cases, people are not aware of the services they are eligible for, or are not prepared to accept them.

As discussed earlier in this chapter, a number of concerns have been raised by the community and service providers about the suitability of many of the homes of older people including the need for home modifications in relation to grab rails and baths, houses are not

heated appropriately for the climate, many houses are not suitable for wheelchairs, and the need for adaptable housing.

Further, survey respondents say they are prepared to consider downsizing which suggests that there is a significant mismatch between the community desire for smaller and more suitable housing, and the supply of this housing.

There is likely as a result, to be a significant level of potential demand for residential care places that is not being quantified.

Further, there is a need for staged residential care that allows residents to move in to higher level care as they require, without the need to relocate to a different facility. To age in place.

Some of the constraints facing Lithgow residential care providers have been discussed earlier in this chapter. Tanderra has identified the need to expand to meet accreditation requirements, to meet demand for places and for viability reasons. Tanderra considers that expansion will necessitate relocating to a different site as there is insufficient land on their current site and building an additional level would involve additional recurrent staffing costs as accreditation standards require a registered nurse to be on duty for each level. Building an additional level would also involve considerable disruption to their current operations.

Further, Tanderra has a number of 4 bed rooms accommodating 32 residents which do not meet current accreditation standards that require that all bedrooms be either single or double with their own showers and toilets. Tanderra is concerned that the requirement to meet the current accreditation standards could be triggered if they were to undertake any building work on the current site or on the Cooina site if both organisations were to merge (see below). Converting 4 bed rooms to 2 bed rooms would result in the loss of 16 residential places, unless additional rooms could be constructed.

While in the longer term it would seem desirable that these 4 bed rooms be converted to double rooms, or single bed rooms in line with changing community tastes, this is not possible on the current Tanderra site without the loss of approximately 30% of its residential places.

For some time a concept has been under consideration by Tanderra to relocate to the former Hermitage site on Sandford Avenue, a concept that would require rezoning and re-classification of the site. The availability and suitability of this site has also not yet been determined. The Lithgow Open Space and Recreation Needs Study 2011¹⁵ recommends however, subject to review in a year, that the site be protected for potential future use as a sports park.

No business plan exists for this proposal. Further, the limited capital funding available from the Commonwealth, the availability of low or no-interest loans and the increasing need to rely on resident bonds, are further issues to be resolved before such a proposal could be adopted.

A proposal has also recently been developed for the merger of both Tanderra and Cooina. This proposal is in its infancy at the time of writing this report and will require detailed planning around issues of financial management, management structure, staffing arrangements, service improvement and expansion etc.

There are a number of potential benefits from such a merger in relation to resource sharing, joint purchase, and the sharing of management and clinical expertise across both facilities. These benefits would most likely be greater if both facilities adjoin each other, whether on their current sites or on a new site.

¹⁵ Lithgow Open Space And Recreation Needs Study
ROSS Planning February 2011

Cooinda has a site area of approximately 1 hectare and Tanderra approximately 0.7 hectare. Both sites are constrained by slope and limited suitable building land. Detailed site planning will be required to determine if there is capacity on the combined adjoining Tanderra and Cooinda sites to expand so as to increase the number of places above the current 97 combined, to allow for future growth and to replace the loss of beds in Tanderra from meeting accreditation standards.

A business plan will also need to be developed to investigate the viability of such a proposal. Important considerations in this process include the differing policies, practices and cultures of each organisation, the value of allowing older people to age in place and minimising disruption to residents.

If it is found that expansion is not viable on the current sites, careful consideration needs to be given to the costs and benefits of relocating to a different site, in particular if this involves one facility moving and the other remaining on its current site. The benefits of organisational amalgamation are likely to be greater when both facilities adjoin each other as this will allow for the sharing of clinical expertise and staffing.

As detailed earlier in this chapter, there is an Australia wide trend towards larger residential facilities. It would seem logical and highly desirable for the inevitable growth in demand for residential care places to be met by the existing local facilities. This would require a substantial and coordinated effort by all facilities to undertake joint planning.

Amalgamations and expansions aside, there are also significant potential benefits from cooperation between residential facilities. Operating costs are very high in relation to staffing, utilities, services and food. Joint purchase of services and resource sharing arrangements in relation to staff pooling and training could offer substantial savings to facilities. This would also require a significant level of cooperation between facilities.

Residential Care Action Plan			
Objective	Action	Key Partnerships	Priority*
Ensure there are adequate residential aged care places to meet current and projected need	Facilitate the amalgamation of Tanderra and Cooinda residential care facilities	Council, Cooinda and Tanderra management	High
	Undertake a management and operational review of both facilities to identify opportunities for efficiencies and the sharing of resources and expertise	Council, Cooinda and Tanderra management	High
	Undertake a detailed site assessment of the Tanderra and Cooinda sites to determine their suitability for expansion to meet current and future need	Council, Cooinda and Tanderra management	High
	Undertake a detailed site assessment of the former Hermitage site to determine its suitability for	Council and aged care providers	High

Residential Care Action Plan			
Objective	Action	Key Partnerships	Priority*
	residential aged care		
	Develop a business plan including indicative costs and potential funding sources for both options of expansion on current sites or relocation to alternative site	Council, Cooinda and Tanderra management	High
Ensure that there are sufficient short-term respite beds to meet community need	Expand the provision of respite beds in residential care, hospital and community based settings	Residential care facilities, Lithgow Health Service, community organisations and Council	High
Promote efficient management and operation of residential facilities	Encourage cooperation, resource sharing and joint purchase arrangements between all residential facilities	Residential facilities, Council	Medium
Promote access to residential places for couples	Consider the needs of couples in residential aged care planning	Residential facilities, Council	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 10 Health and Community Care

Section 10.1 Health

10.1.1 Health Status

Information on the health status in Lithgow has been based on the Social and Health Profile of Lithgow LGA published by Sydney West Area Health Service¹ and the NSW Chief Health Officer's Report². Information in each of these reports is derived essentially from the same data sources. The periods over which these data are aggregated varies, and for some particularly rare conditions this causes significant differences in reported rates of health behaviours or disease.

These rates are compared with other Area Health Services in NSW and with NSW as a whole. When comparing rates in Lithgow with other areas, it is important to remember that Lithgow is among the smaller Local Government Areas, which can sometimes result in higher or lower rates of illness or wellness by chance alone.

Health Behaviours

- Lithgow had a significantly higher proportion of current smokers (30%) than NSW (19%)
- Lithgow (79%) also had a significantly lower proportion of households that were smoke-free than SWAHS (88%) and state as a whole (88%)
- Lithgow had similar rates to SWAHS and NSW for recommended serves of vegetables, adequate physical activity and vaccinations against influenza and pneumococcal diseases
- residents of Lithgow experienced a higher prevalence of self reported rates of asthma, overweight and obesity compared to residents of SWAHS and NSW. The proportion of Lithgow residents who were overweight and obese (60.6%) was significantly higher than that for NSW (51.7%)



Maternal and Child Health

- from 1996 to 2005, the total fertility rate of Lithgow women was consistently higher than NSW
- from 2001 to 2005, 31% of Lithgow babies were born to mothers who smoked during pregnancy
- between 2001 and 2005, 13 babies in Lithgow (11 per 1,000 births) died during the perinatal period, 114 babies (9.6%) were born prematurely and 113 babies (9.5%) had a low birth weight. These rates and proportions were consistently higher than those for the SWAHS region and NSW

¹ Social and Health Profile of Lithgow LGA (Version 3 SWAHS 2010)

Sydney West Area Health Services' (now Nepean Blue Mountains Local Health District)
Centre for Epidemiology, Indicators, Research and Evaluation

² NSW Chief Health Officer's Report 2010

Cancer

- age adjusted cancer death rates for Lithgow between 2002 and 2006 (177.5 per 100,000) were comparable to the NSW rate (180.4)
- age adjusted new cancer rates between 2004 and 2008 for Lithgow (481.3 per 100,000) were comparable to NSW (475.8 per 100,000)

Hospitalisations

Residents of Lithgow LGA had significantly higher hospitalisation rates than SWAHS and NSW as a whole. It should be noted that rates of hospitalisation are in general higher in rural as compared to urban areas for many conditions. As is inevitable when making comparisons of this kind, four of the 9 local government areas in SWAHS had hospitalisation rates greater than the average for SWAHS.

Rates of hospital separations from all causes have increased by approximately 10% for both men and women in the period 1990-2009.

As might be expected, rates of hospitalisation in Lithgow were increased for the most common causes of hospitalisation:

- rates of hospitalisation for cardiovascular disease were 27% and 43% higher in men and women respectively than in NSW as a whole. Rates of admission with a principal diagnosis of diabetes were also significantly higher in Lithgow than in NSW as a whole
- rates of hospitalisation for all causes of injury - motor vehicle accidents, falls and suicide were 62.9 % higher in Lithgow than in the SWAHS and NSW as a whole, and rates of injury seem to be on the increase
- Lithgow and Blacktown LGA's (within SWAHS) have higher rates of hospitalisation for asthma, particularly in young children, than in SWAHS and NSW as a whole. The causes for this increase are not clear but higher rates of smoking and smoking pregnancy in these two LGA's is noted

Life Expectancy

- based on the mortality experienced by residents in the five years period 2002–2006, the life expectancy at birth for Lithgow's residents was 76.2 years for males and 81.7 years for females which was slightly lower than the SWAHS (78.1 for males and 82.5 for females) and NSW (78 for males and 82.8 for females) averages

Mortality

- in general, mortality rates of Lithgow males and females are not significantly different to rates in SWAHS and NSW
- premature (before the age of 75) and potentially avoidable deaths, either by primary care or health and hospital interventions in Lithgow are not significantly higher than in SWAHS or NSW as a whole
- cardiovascular disease is most common cause of death, and in Lithgow rates of death from this condition are not significantly higher, either in men or women, than in SWAHS or NSW as a whole

10.1.2 Council's Strategic Plan in Relation to Health

Council's Strategic Plan³ incorporated the vision of *creating a healthy community providing opportunities and facilities for a healthy lifestyle.*

³ Lithgow Strategic Plan 2007
Lithgow City Council



The following key actions were identified:

- determine adequacy of health services in light of the local profile and population modelling
- facilitate improved access to the Lithgow Health Service through public transport and pedestrian access
- establish a health committee

See Appendix 5 for further detail.

The SWAHS Health Impact Assessment (HIA) of the Strategic Plan⁴ made a number of recommendations for Council to consider, in some cases in partnership with SWAHS:

- Council to develop a comprehensive Tobacco Control Policy that will support smoke free environments
- Council and SWAHS to consider strategies for addressing the insufficient number of GPs, hours of opening and access to bulk billing
- implement falls prevention programs
- develop innovative transport schemes to health services
- work to facilitate access to Lithgow Health Service
- Council to work with other stakeholders to increase the range of support services that assist older people to stay at home
- identify gaps in respite services and identify suitable models of respite care service delivery
- Council to implement healthy lifestyle programs including Live Well Lithgow Project.
- maintain Council's Solid Fuel rebate program to encourage people to convert from coal heating
- promote safe, energy efficient and sustainable housing stock for summer cooling and winter heating

See Appendix 5 for further detail.

10.1.3 Lithgow Social Plan 2006-11

Recommendations from the Social Plan 2006-13⁵ in relation to health include:

- Council to establish a Health Committee
- Council to establish an annual scholarship in partnership with SWAHS for a physiotherapist at Lithgow Hospital
- Council to assess the issue of water fluoridation and conduct a survey of the community regarding fluoridation of the water supply in the Lithgow LGA

See Appendix 6 for further detail.

10.1.4 Ageing Survey

The survey asked a number of questions about health matters.

The following figures show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

How Would You Rate Your Health Compared To A Year Ago?

Approximately 58% of survey respondents say that their health is either the same or better compared to a year ago. 60% of women and 55% of men say the same. Nearly 42% of

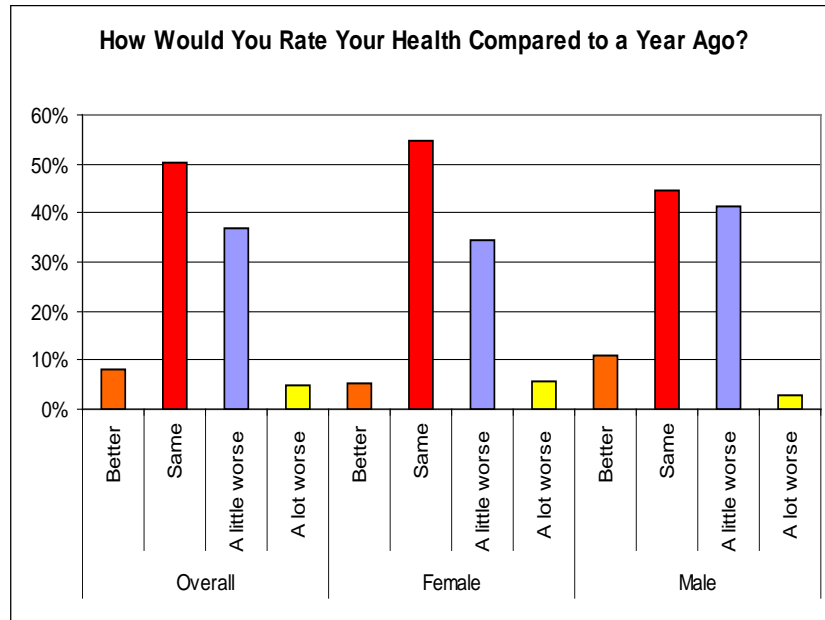
⁴ Health Impact Assessment of the Strategic Plan 2007
Sydney West Area Health Service 2008

⁵ Lithgow Social Plan 2006-11
Lithgow City Council

people say however that their health is a little or a lot worse compared to a year ago with more men than women saying so.

Single people are more likely than people living in other family types to say their health is a little or a lot worse than 12 months ago.

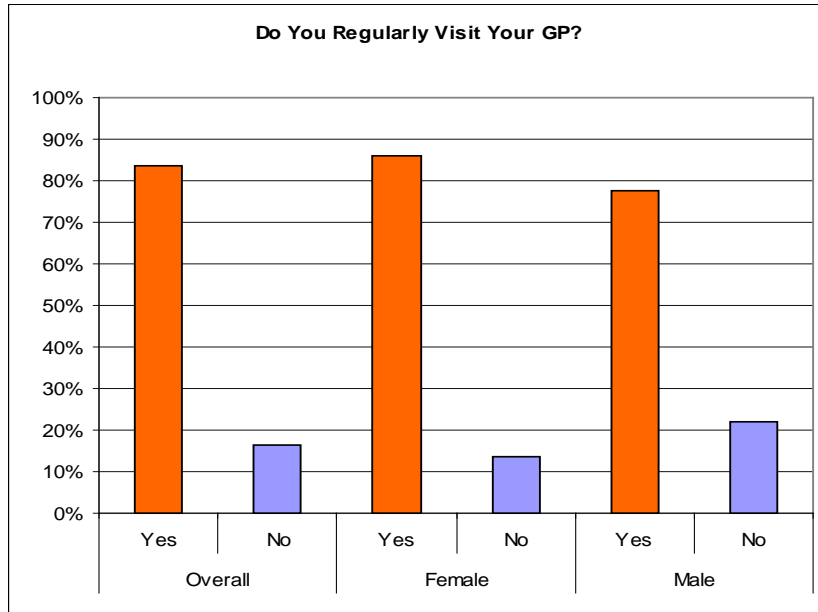
Figure 10.1



Do You Regularly Visit Your GP?

Over 80% of survey respondents regularly visit their GP with men less likely than women to do so. In general, "yes" responses to this question increase with age however there were few significant variations according to place of residence or family type.

Figure 10.2

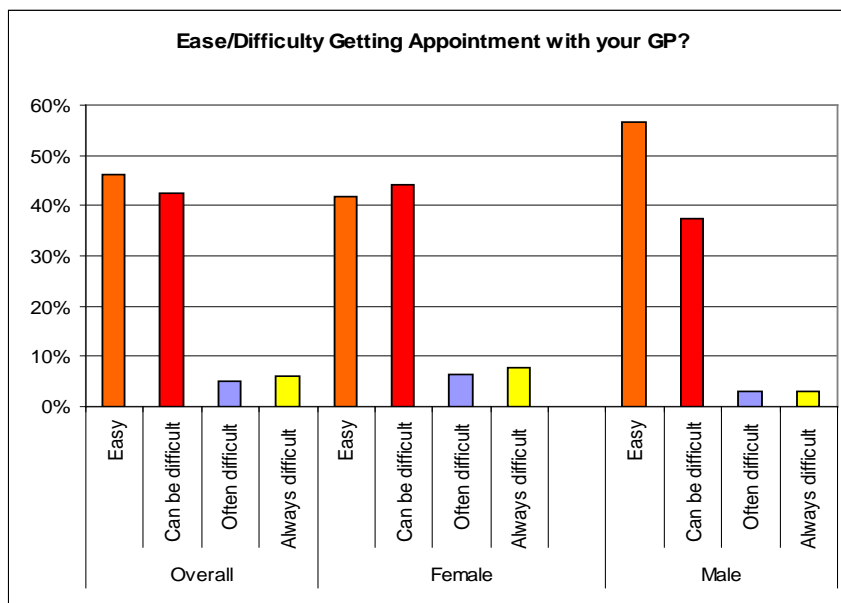


How Easy/Difficult Is It To Get An Appointment With Your GP When You Need One?

46% of survey respondents say that they find it easy to get a GP appointment although males (57%) find it far easier than women (42%). 14% of women and 6% of men say that is “often difficult” or “always difficult” to make a GP appointment. This suggests that men might be more content to wait longer for an appointment.

Older people with children find it easier than people living in other family types to get a GP appointment which may indicate that it is easier to make appointments for children. Single older people find it significantly easier than mature couples to get an appointment. Again, this could possibly be due to priority being given to single people. Older people living in Wallerawang and Portland also find it easier than those living elsewhere to get a GP appointment.

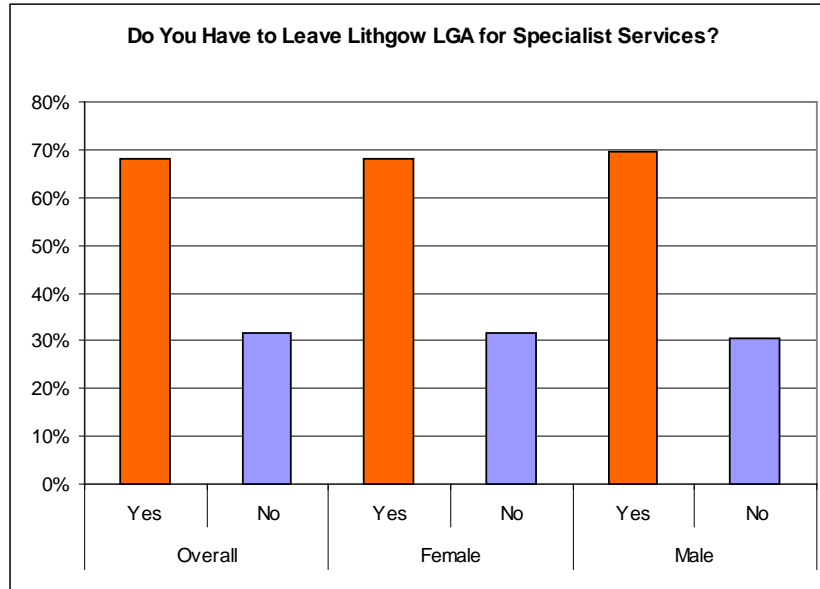
Figure 10.3



Do You Have To Leave Lithgow LGA For Specialist Services?

Nearly 70% of survey respondents say that they have to leave Lithgow LGA for specialist medical services. Survey results were similar across all age groups although those aged 80+ years were less likely than those in other age groups to have to leave Lithgow LGA.

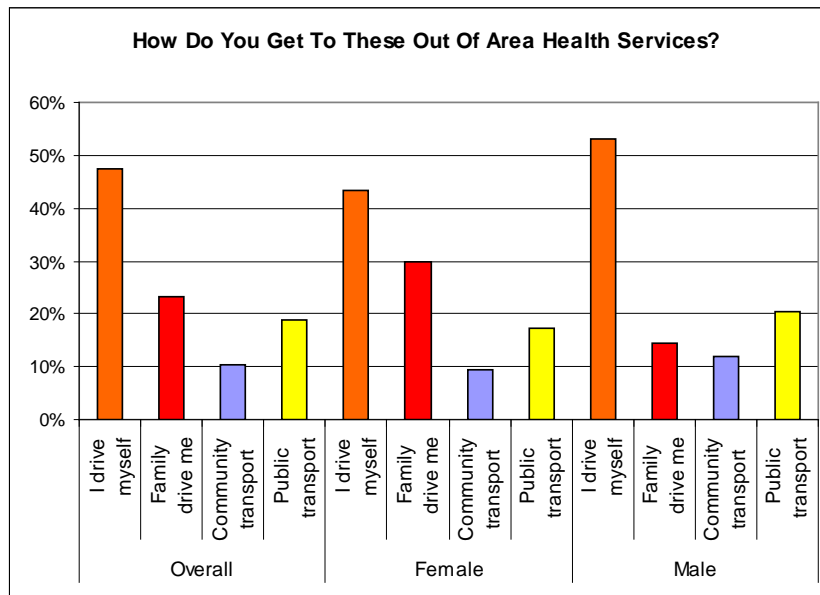
Figure 10.4



How Often Do You Have To Leave Lithgow LGA For Specialist Services?

Although about 60% of survey respondents say they have to leave Lithgow LGA for specialist services less often than every 2-3 months, nearly 11% have to do so either weekly or monthly. A significant proportion of those in the younger aged groups have to leave weekly.

Figure 10.5



How Do You Get To These Out Of Area Services?

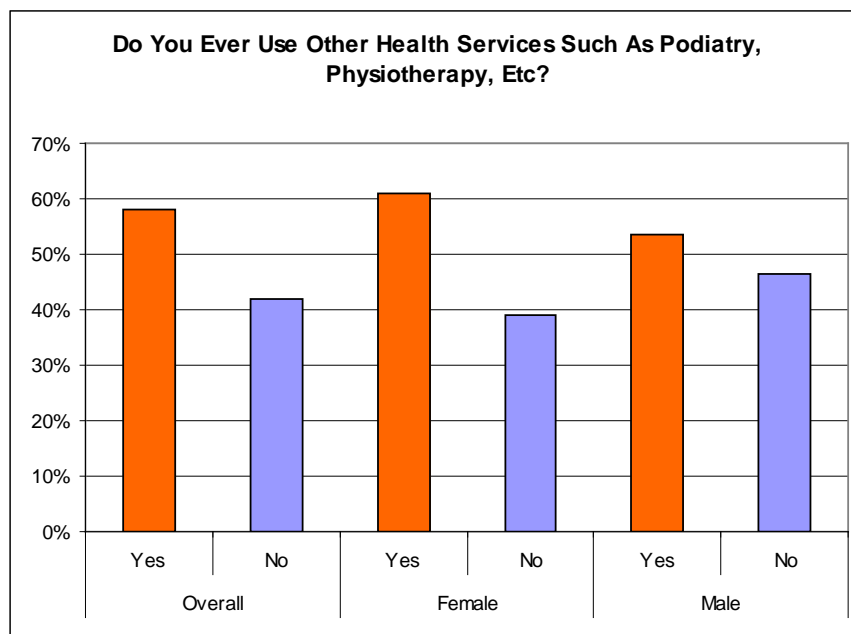
Nearly 70% of survey respondents either drive themselves or are driven by family members to out of area health services with men far more likely than women to drive themselves. About 10% use community transport and nearly 20% use public transport. Predictably, those

in the older age groups are less likely to drive and more likely to be driven by a family member or use community or public transport.

Do You Ever Use Other Health Services Such As Podiatry, Physiotherapy, Etc?

Nearly 60% of survey respondents use allied health services including podiatry and physiotherapy with women more so than men. The proportion of people using these services increases with age.

Figure 10.6



10.1.5 Community Consultations

Health and access to health services was a concern to many during the community consultation process. Although there were a number of concerns, there were also a number of positive statements made about the health system.

People consulted at Gorrie Ban said that the health system has generally improved and there are a good number of medical centres. There is a shortage of specialist doctors however and more podiatrists are needed.

People who attended the Lithgow consultation stated concerns about the loss of health services, longer waiting times and fewer specialists. It was further stated that as health positions become vacant, they are often not refilled. It was also felt that palliative care services are minimal and there is a need for a hospice

Issues raised at other consultations included:

- while it is generally possible to get a same day appointment at medical centres, other doctors generally have set patient lists and long waiting times for appointments
- continuity of care – GP's rarely visit their patients in hospital or undertake home visits
- gaps in specialist services
- long waiting lists for dental services
- there are no visiting GP's at Capertee with people having to travel to Portland or Lithgow
- power station emissions are a concern
- public transport to Lithgow Hospital including limited buses to the hospital on Saturday afternoon and Sunday
- the need for additional community nursing and allied health positions
- there are no specific nursing services in Lithgow for veterans

- on the positive side, there appears to be a growing focus on providing transition care to people leaving hospital so as to prevent re-hospitalisation. Compact Packages provide help with showering, meal preparation and transport etc for up to 6 weeks following hospital discharge. The Transitional Care Program provides short term assistance to people aged over 70 years (or indigenous people over 50 years) in their own home after hospital discharge and includes physiotherapy, occupation therapy, social work, community care, geriatric and nursing assistance

10.1.7. Conclusions and Recommendations Health

Health is a topic of great interest and passion within the community, particularly for those groups, including older people, who use health services regularly.

It is beyond the scope of this Ageing Strategy to audit the range and appropriateness of the current mix of local health services, private and public. Nevertheless, a number of significant themes are apparent from the health status data on the Lithgow population and the information provided by the community through the Ageing Survey and community and agency consultations.

There was both praise and criticism made by people during the community and agency consultations about the health system. Some said the health system has generally improved and there are a good number of medical centres, but a shortage of specialist doctors and podiatrists.

There were concerns about the loss of some health services, including oncology, dialysis and radiology services, longer waiting times and fewer specialists. It was further stated that as health positions become vacant, they are often not refilled. This has been a concern to Council as well. Concerns were also expressed about the lack of palliative care services and the need for a hospice.

Other issues raised included long waiting times for GP appointments, continuity of care issues related to GP's not visiting their patients in hospital or at home, gaps in specialist services and long waiting lists for dental services.

On the positive side, there appears to be a growing focus on providing transition care to people leaving hospital to prevent re-hospitalisation. This was an issue of considerable concern to survey respondents.

Health Status

In relation to health status, a number of issues stand out including high rates of smoking and relatively higher rates of self reported asthma, overweight and obesity, hospitalization, hospitalization for cardiovascular disease and diabetes.

Nearly 42% of Ageing Strategy Survey respondents say that their health is a little or a lot worse compared to a year ago with more men than women saying so. Single people are more likely to say their health is a little or a lot worse than 12 months ago.

Use of Medical Services

Over 80% of survey respondents regularly visit their GP although men are less likely than women to do so.

More than half of survey respondents find it "often difficult" or "always difficult" to make a GP appointment.

Getting to Health Services

Access to Lithgow Hospital and Community Health Centre has been a concern by many for a number of years. Public transport is not always available or suitable, taxis can be unaffordable and community transport is not always available at the required times.

Nearly 70% of survey respondents say that they have to leave Lithgow LGA for specialist medical services. Nearly 11% have to do so either weekly or monthly.

Nearly 70% of survey respondents either drive themselves or are driven by family members to out of area health services with men far more likely than women to drive themselves. About 10% use community transport and nearly 20% use public transport.

Driving oneself or being driven by a family member can be convenient and involve less waiting time between scheduled appointments and transport timetables. It can however involve considerable expense for the individual and their family, particularly to attend specialist services in Sydney. Using community transport is a great option for those without a vehicle or family member to drive them but also involves a significant cost and can, when a number of patients are being transported to different appointments, involve travelling for an entire day.

Public transport is the most affordable option for getting to Sydney although less so to Bathurst and Orange, but can be the most inconvenient transport option when timetables don't match appointment times. In some cases people will be unwell after treatment and unable to use public transport, particularly when they don't have a carer to travel with them.

See Chapter 7 Transport and Access

Allied Health Services

Nearly 60% of survey respondents use allied health services including podiatry and physiotherapy with women more so than men. The proportion of people using these services increases with age.

Concerns were raised about the lack of information being provided to the community on available ancillary health services like podiatry and chiropractic services. GP's don't appear to know or don't inform their patients about the availability of these services under Medicare.

Health Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved range of local health services	Establish a Section 355 Council Health Committee to advocate community needs in relation to health services	Council, Nepean Blue Mountains Local Health District, health practitioners and community	High
Encourage health promotion programs	Implement falls prevention programs	Nepean Blue Mountains Local Health District, Department of Health and Ageing and community organisations	High
	Develop a comprehensive Tobacco Control Policy for Lithgow. See Chapter 8		

Health Action Plan			
Objective	Action	Key Partnerships	Priority*
	Healthy lifestyles and recreation recommendations		
Improved environmental health	Maintain Solid Fuel rebate program to encourage people to convert from coal heating	Council	Ongoing
Ensure there is a skilled local health workforce	Facilitate workforce planning to ensure there are adequate numbers of trained health staff	Council, Lithgow Health Service and medical practitioners	Medium

*High = within 12 months Medium = 1-3 years Low = 3-5 years

Section 10.2 Community Care

10.2.1 Introduction

The Home and Community Care (HACC) Program is a joint Commonwealth/ State Initiative. The program provides services such as domestic assistance, personal care as well as professional allied health care and nursing services, in order to support older Australians, younger people with a disability and their carers to be more independent at home and in the community and to reduce the potential or inappropriate need for admission to residential care.⁶

Some of the services funded through the HACC Program include:

- nursing care
- allied health care
- meals and other food services
- domestic assistance
- personal care
- home modification and maintenance
- social support
- community access
- transport
- respite care
- counselling, support, information and advocacy
- assessment



The availability of these services and supports is crucial for maintaining the independence, quality of life and community participation of older people. These services aim to allow people to “age in place” by preventing premature entry to residential aged care and maintaining

⁶ Commonwealth Department of Health and Ageing

people in the community in which they live. Access to services during their older years can enable people to live at home longer, in the community that they know and where they are known, with dignity, quality of life and independence.

During development of the Ageing Strategy, an inventory of services for older people and their carers was developed with the assistance of the Advisory Committee. The inventory is shown at Appendix 3.

Following is a list of current services in Lithgow:

LINC HACC Services

Providing Food Services, Community Lunches, Home Modification and Maintenance, Social Support, Aged Day Centre, Telephone Companion Service and Overnight Respite Care

Evans Community Options

Provides Case Management, Respite, Neighbour Aid, Social Support and ComPack. Other services include: Personal Care, Domestic Assistance, Respite, Social Support, Shopping Assistance and Referral.

Aged Care Packages

These are provided by a number of agencies including: Catholic Care Bathurst, Hammond Care Bathurst, Southern Cross and Australian Home Care.

Department of Veterans Affairs

Services for war veterans brokered through local agencies.

Home Care Service of NSW

General home care, personal care and shopping services.

Uniting Care

Providing in-home and community based respite care, Frail Aged Afternoon Program, Lifestyle Choices, Active Ageing, Saturday Programs, Social Support And Overnight Respite House

Community Transport

Provides Transport for the frail, aged and disadvantaged within Lithgow LGA and to medical appointments outside the LGA.

Uniting Church Community Visitors Scheme

Provides volunteers to visit residents of aged care homes.

Commonwealth Respite & Carelink Centre, Central West

Telephone information and referral service to assist carers of people who have a chronic illness or are frail aged to access respite options including emergency respite and a residential booking service.

Aged Care Assessment Team

Assessment for residential care and Aged Care Packages, education and liaison for older people and their carers.

Community Health

Chronic and Complex Care including Community Nursing, Wound Care, Palliative Care, Continence, Chronic Care Management, Allied Health.

Compack Packages

A coordinated package of community care for people being discharged from a participating NSW public hospital to enable them to safely return home. Services include help with

showering, meal preparation and transport etc. Available for up to a maximum of 6 weeks following hospital discharge.

Transitional Care Program

Provides short term assistance to people aged over 70 years (or indigenous people over 50 years) in their own home after hospital discharge. Includes physiotherapy, occupation therapy, social work, community care, geriatric and nursing assistance.

There are a range of unfunded, volunteer run activities for older people including:

Gorrie Ban

Meets every Monday and provides entertainment, social interaction, and monthly outings.

Senior Citizens Club

Social activities for people 50 years and over

Combined Pensioners and Superannuants Association of NSW

Pensioner Support and social group.

Beehive Re- Creative Centre Lithgow

Education, social, art and craft activities.

Beehive, Portland Uniting Church

Social and learning centre

The Ageing Strategy will not attempt to undertake a detailed assessment of the supply and demand for each service type, but to make some broader observations about the level and type of services in Lithgow and the particular characteristics of the community that impact on service demand.

10.2.2 Community Profile

Figure 10.7 below, from the 2006 Census shows that the percentage of older Lithgow people aged 55+ requiring assistance with a core activity was 12% which was the same as NSW as a whole. Women (14%) were more likely than men (11%) to require assistance.

Figure 10.7

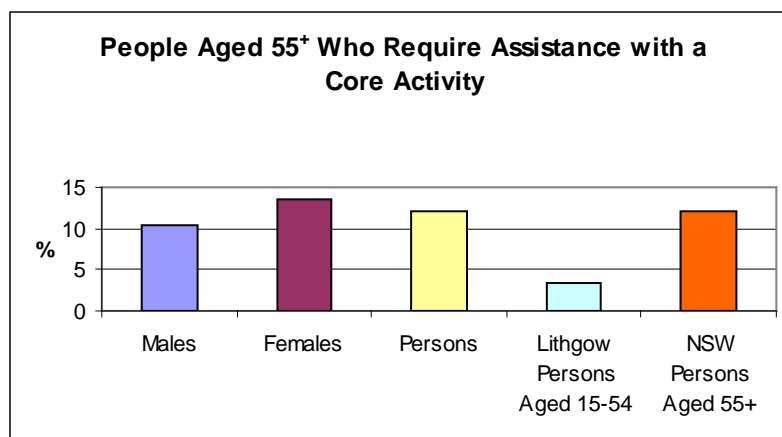
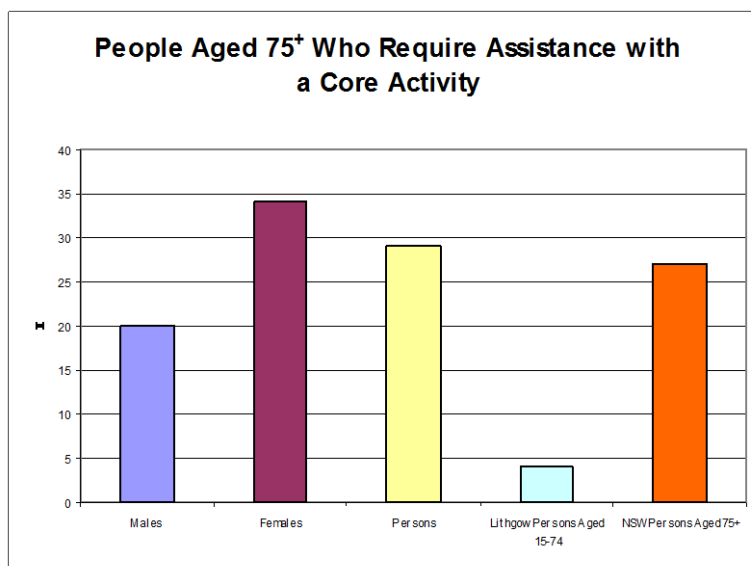


Figure 10.8 shows that the percentage requiring assistance increases considerably with age with almost 30% of people aged 75+ requiring assistance. Women aged 75+ were far more likely than men to be requiring assistance.

Figure 10.8



The Core Activity Need for Assistance variable measures the number of people with a profound or severe disability needing help or assistance in one or more of three core activity areas of self-care, mobility and communication because of a disability, long term health condition or old age – source ABS.

10.2.3 Survey

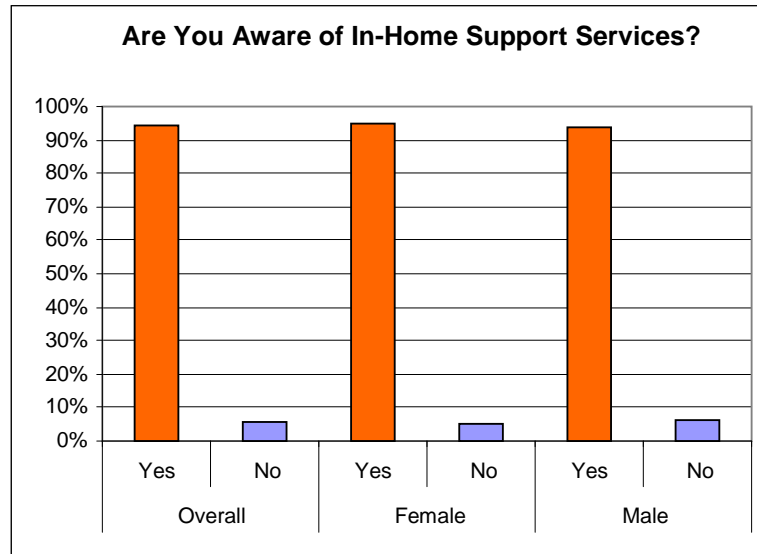
The survey asked a series of questions about people's knowledge of the range of support services, such as meals on wheels, respite care, social support, community transport etc, that exist in the community and how they would navigate getting in touch with these services. These services are generally funded through the Home and Community Care program.

The following figures show overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

Awareness of In-Home Support Services

The following figures show that over 90% of survey respondents are aware of these types of services with few differences across gender, location and age group. Single older people however are less likely than other family types to be aware of these types of services.

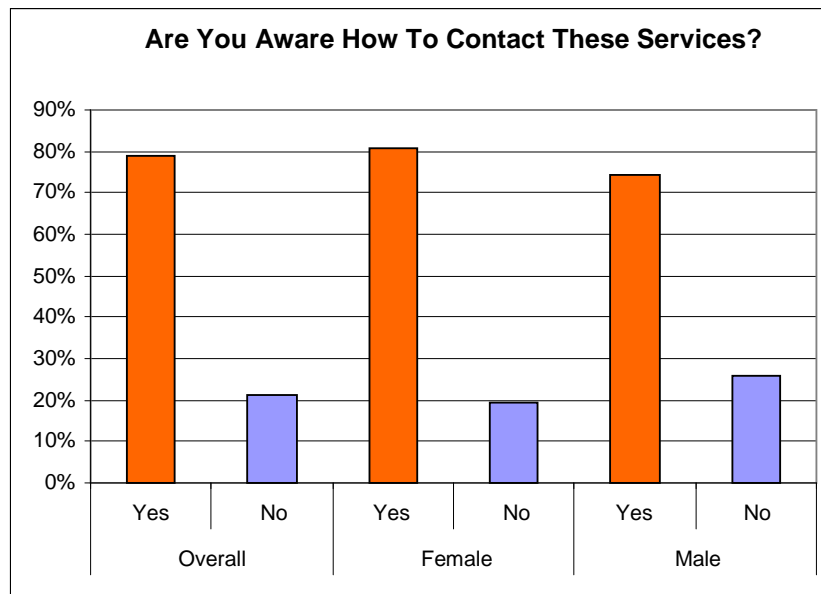
Figure 10.9



Awareness of How to Contact Services

Nearly 80% of survey respondents say they know how to contact these services, although around 25% of men don't know how to contact services. People living in the smaller villages are also less likely to be aware of how to contact services.

Figure 10.10

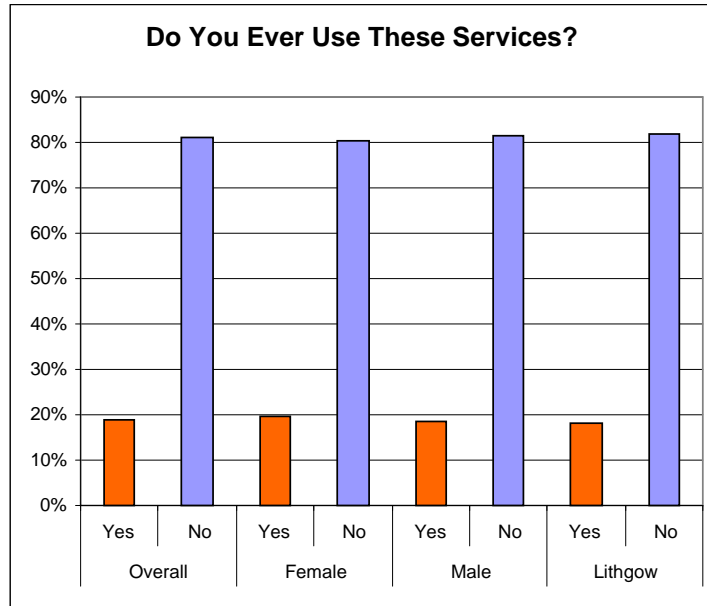


Use of Services

Despite a generally high level of awareness of available services, only 19% of survey respondents have ever used these services, although this increases with age, with 37% of people aged 80+ years and 29% of people aged 70-74 years having used them.

Survey respondents were also asked to list the support services that they currently use. The most commonly used services by respondents are meals on wheels and community transport followed by home care type services. A lack of respite and high level residential care were also reported by respondents.

Figure 10.11



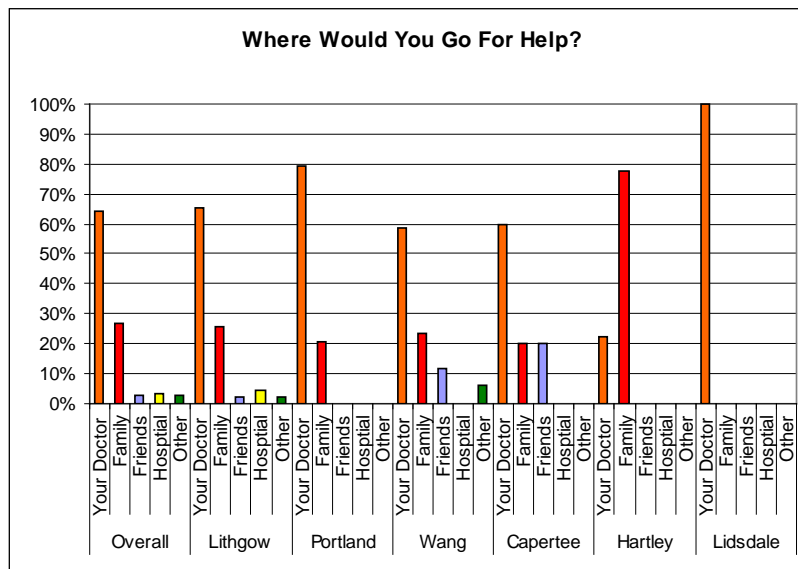
Services Needed As People Age

The survey asked people to list the services they think they will need as they get older. The most common responses to this question were community transport; meals on wheels; home maintenance, and; medical assistance. A common response was that people didn't know what services they would need.

Where Would People Go For Help?

More than 60% of survey respondents said they would go to their doctor for help if they or their partner could no longer manage at home while 27% said they would go to their family for help. Men and women gave similar responses. Residents of Portland are more likely than those living elsewhere to go to their doctor for help while those aged 80+ years are less likely than the average to go to their doctor but more likely to go to their family for help.

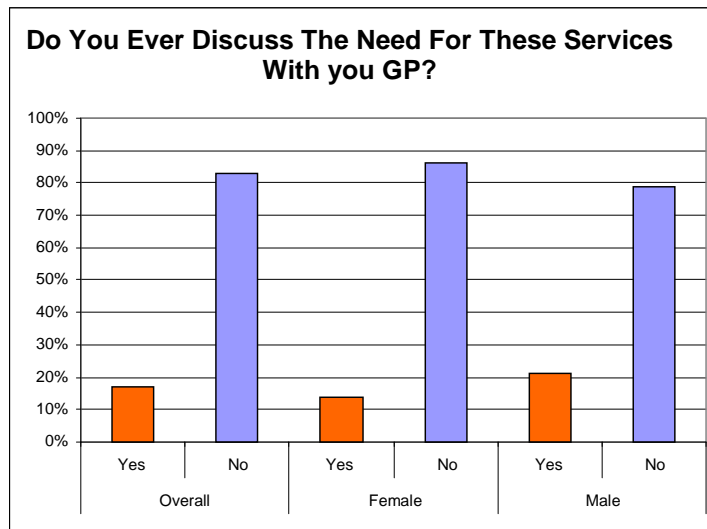
Figure 10.12



Discussing the Need For These Services With GP's

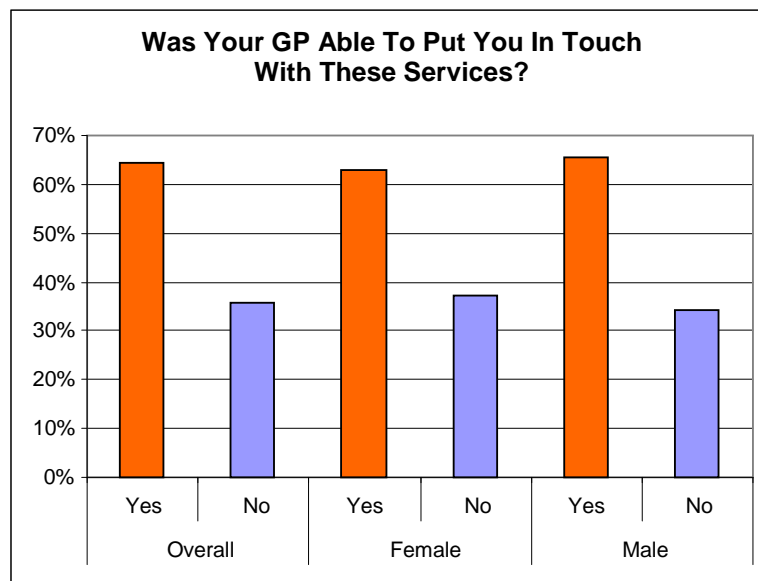
Despite the intention as discussed above to go to their doctor for help, only 17% of overall survey respondents have ever discussed the need for these services with their GP, although 21% of men, 27% of Portland residents and 31% of people aged 80+ years have done so.

Figure 10.13



Of those who have discussed this need with their GP, 64% overall and 88% of Portland residents say that their GP was able to put them in contact with those services.

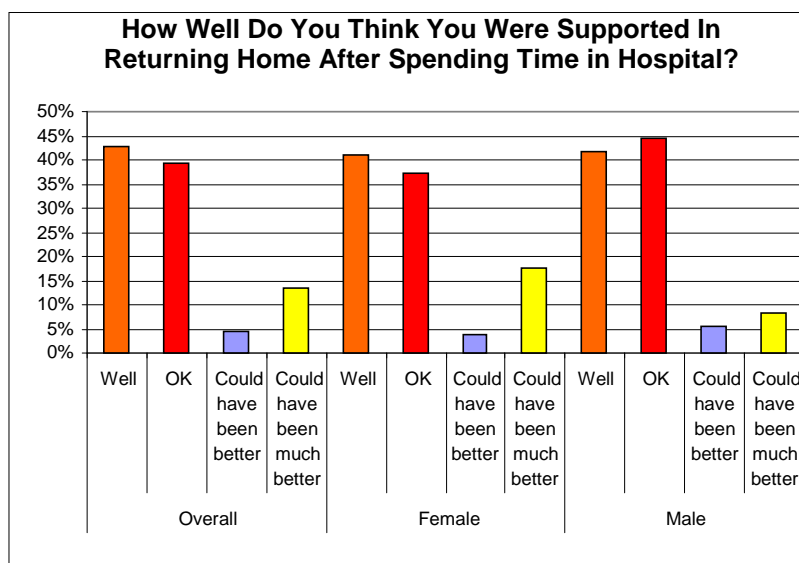
Figure 10.14



How Well Do You Think You Were Supported In Returning Home After Spending Time In Hospital?

43% of survey respondents say they were well supported in returning home after a hospital stay, 39% say it was ok, 4% say it could have been better and 13% say it could have been much better. 18% of women say it could have been much better compared to 8% of men. Portland residents are more likely to say they were well supported but also more likely to say they could have been much better supported.

Figure 10.15



What Type Of Services Would Have Helped You To Return Home?

The survey asked people to list the type of services that would have assisted them to return home after a hospital stay. The most common responses were:

- home help
- follow up care and assistance

10.2.4 Community Consultations

Issues raised during the community consultations included:

Information

- lack of information on options for people wanting to stay at home
- carers don't know where to go for help or resources
- GP's can be hard to engage in referring to HACC services
- the Aged Care Assessment Team, which undertakes assessments for residential care and Aged Care Packages, no longer operates full-time in Lithgow. Some people have reported long waiting times for assessments

In-Home Supports

- GP's don't tend to know of or refer to HACC and HACC related services
- home modification services are needed to make homes more suitable and education is needed around the housing requirements of older people
- despite the identified need, there is little demand for Aged Care packages in Lithgow
- few Aboriginal people are accessing HACC services
- people in Capertee find it difficult to get service due to remoteness and lack of staff

10.2.5 The Service Network

A number of issues were identified through consultation with agencies including those represented on the Ageing Strategy Advisory Committee:

- the need to identify the needs of older people living at home and any service gaps
- the affordability of services
- the need for a collaborative, planned and strategic approach to providing HACC services rather than individual services requesting funding and resources which can result in limited or splintered services which may not resolve gaps in service provision

- the need to acknowledge that gaps remain even when HACC services are available. Home maintenance, eg. lawn mowing, small repairs, changing light bulbs, high reach tasks, and property clearances are well known to be an identified need which are not being met
- more older people are carers of grandchildren or adult children with a disability. There is a need for education and support services for the older carer which includes planning for their own future and the future of their child/grandchild in the event that the carer role can not be maintained due to changes in health or capacity
- Lithgow requires a local resource list of HACC services with a lead agency tasked to keep the resource list updated and well distributed
- in-home care appears to be provided longer in Lithgow than in other areas (eg Blue Mountains). This may be a very good thing that in part reflects the strong family and community bonds that exist in Lithgow. On the other hand, the Lithgow community is changing with more people migrating in and out which will possibly weaken these family and community bonds. The tendency to stay at home longer also places higher demand on partners and other carers and unless there are adequate support services in place, may result in people living in unsuitable housing and with inadequate services
- there is a shortage of in-home respite that is really only consistently available through aged care packages, although intermittent respite is available through Homecare and Uniting Care.
- there is an under-utilisation of aged day centre groups
- there is an identified need for additional community nursing and allied health positions
- it is difficult to access respite residential care in a nursing home although it is slightly easier in low level hostels. Families often have to access respite out of area
- lack of carer support services in Lithgow
- Homecare is difficult to access due to high demand
- in addition to funding residential aged care, the Commonwealth funds Aged Care Packages, for people assessed as eligible for at least low level residential aged care, to help them stay in their own homes
 - there are 4 Community Aged Care Package providers. Packages average 4-6 hours per week
 - there are 2 Extended Aged Care package providers. Packages average 14 hours of service per week
 - there is 1 Extended Aged Care package (Dementia) provider. Packages average 16 hrs per week of care in home

The national target ratio for aged care package provision⁷ is 25 community care places per 1,000 persons aged 70⁺ years, to be achieved by June 2011. At the 2006 Census, the Lithgow population aged 70⁺ years was 2,015 which equates to 50 aged care places. The population is projected to rise to 2,950 (74 aged care places) by the year 2016 and 4,850 (121 aged care places) by the year 2036.

Some report that package clients are not getting their full allocated hours due to staff shortages. It has been further reported that despite the identified need, there is little demand for Aged Care packages in Lithgow.

10.2.6 Carers

12% of survey respondents care for a spouse or offspring with a similar percentage of people across all age groups, including those aged 80⁺ saying they are a carer. Although more than 20% of people aged 50-54 years say that they are a carer, this is likely due to caring for young children. Figure 10.16 shows overall responses and responses by gender. Figures showing responses by age group, location and family type are shown in Appendix 4.

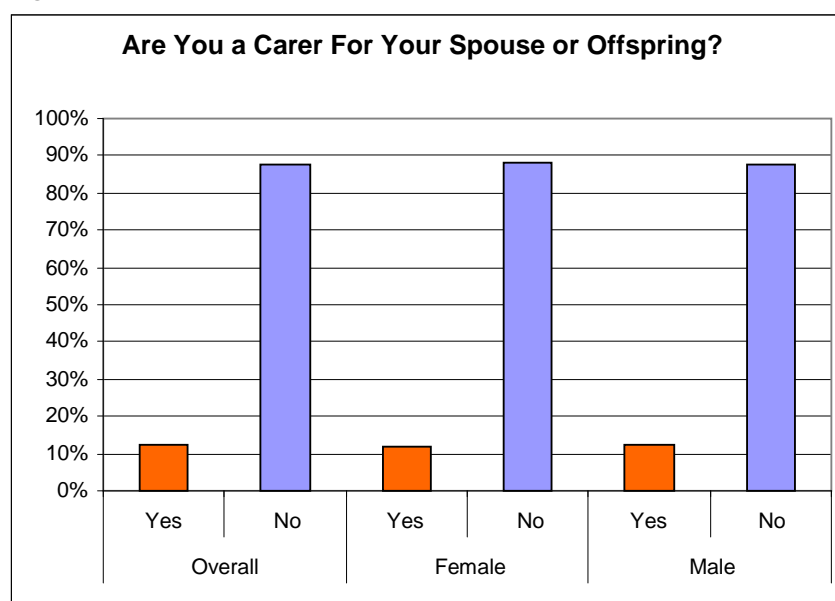
⁷ Residential Aged Care in Australia 2008–09:
A statistical overview
Australian Institute of Health and Welfare, Canberra

A report titled "Report on People with a Disability and their Carers in NSW: Based on the 2006 Census of Population and Housing"⁸, analyses published and unpublished data from the 2006 Census on people who have a need for assistance in core activities such as mobility, self care and communication because of a long term health condition, a disability or old age.

It profiles people with a need for assistance and their carers in terms of age, sex, Aboriginal status, living arrangements, location, education, labour force status and other variables.

Over 50% of people with a need for assistance were aged over 70 years, indicating age related health and support requirements, not necessarily a disability.

Figure 10.16



The Ageing Strategy Survey asked whether respondents care for a spouse or offspring with the following results:

- more than 50% were female – a result of women’s longevity, not disability or ill health
- The proportion of people requiring assistance spikes sharply in the older age brackets, at 47.8% for those aged 85 and over compared to 7.9% for 65-74 year olds
- females aged below 65 years were less likely to need assistance than males in the same age group. This reversed in the over 65 year group
- women live longer but are in poorer health than men at the higher age brackets
- women were most likely to be unpaid carers up to the age of 75 years, after which men became the dominant carer group
- 83% of Aboriginal people needing assistance were aged less than 65 years, compared to



⁸ Report on People with a Disability and their Carers in NSW: Based on the 2006 Census of Population and Housing Oct 2009 NSW Department of Ageing, Disability and Home Care (ADHC) Business Improvement Unit.

- 43% of non-Aborigines. The proportion of people needing assistance was spread more evenly across Aboriginal age groups than the overall population
- data from the 2006 Census for Lithgow shows that the percentage of older people in Lithgow requiring assistance with a core activity was 12% which was the same as NSW as a whole. Women (14%) were more likely than men (11%) to require assistance

10.2.8 Conclusions and Recommendations Community Care

The availability of a comprehensive network of services and supports is crucial for maintaining the independence, quality of life and community participation of older people. These services aim to allow people to “age in place” by preventing premature entry to residential aged care and maintaining people in the community in which they live. Access to services during their older years can enable people to live at home longer, in the community that they know and where they are known, with dignity, quality of life and independence.

This requires services to be designed and delivered in ways that meet the broad range of needs of older people. Further, older people, the consumers of these services, and their families, need to be aware of the available services and willing to use them. This is a challenge not only in terms of service advertising and promotion, but of the design and marketing of services to older people who may not consider that they need them or who may, based on experience from the past, have misconceptions or prejudices against using them. Each generation of older people is different to the previous one and, as is often suggested, the next generation of older people – “the baby boomers” will likely have different and higher expectations of the services they receive.

A recurring theme during the consultations was the change in the operation of the Aged Care Assessment Team (ACAT) which in the past had a full-time worker based in Lithgow and but now operates out of Lawson Community Health Centre, is shared with the Blue Mountains and is only in Lithgow for 2 days per week. Priority for assessments to gain entry to residential care is also being given to those in hospital, rather than those living at home.

ACAT's assist the older people, their families and carers to make informed decisions about housing and the level of care required, whether at home with community support, in a supported residential service, an aged hostel or nursing home. An ACAT assessment is required before someone can move into residential care. ACAT provides an important service to assist families, often in stressful situations, to navigate their way through the various options available for their aged family member. A locally based ACAT service with good local knowledge of the service network plays a vital role in linking older people who are on a waiting list for residential care, to community care services.

The withdrawal of ACAT resources from Lithgow is a concern at a time when the population is ageing rapidly and the demand for residential and community care is increasing.

Service Gaps and Service Planning

The Community Profile section of this report shows that there has already been a significant increase in the number of people aged 55+ years in Lithgow and that the older population is projected to increase significantly in future years.

This underscores the need for collaborative and strategic local service delivery planning that includes identifying current service gaps, new models of service, changing community needs and service affordability. This requires an effective partnership between funding bodies, Council and service providers, together with community consultation, that focuses on the best and most innovative ways of meeting community need and which are not necessarily based on current service delivery arrangements. Services have a key role to play in relation to service design, marketing and service delivery practices.

Few Indigenous people are using local HACC services despite attempts over time by some services to engage Indigenous people. The number of older Indigenous people in Lithgow is

increasing (Indigenous people aged 45⁺ are defined as older due to their significantly lower life expectancy). At the 2006 census, there were 141 Indigenous people aged 45⁺, up from 94 at the 2001 census and 58 at the 1996 census. In 2006, 1 in 4 Indigenous people were aged 45⁺, up from 1 in 6 in 2001 and 1 in 7 in 1996. Clearly, a greater proportion of the Indigenous population is ageing which is likely to be placing demands on their families and carers, more so if they are not using local services.

With an increasing proportion of the older population of Lithgow being men⁹, planning is needed around targeting services to this group.

A number of service gaps and areas for attention were identified in the survey and community consultations:

- community transport (see Chapter 7 Transport and Access)
- meals on wheels
- home modification services to make homes more suitable and education around the housing requirements of older people
- home help and follow up care and assistance on return home after a hospital stay
- support and resources for carers
- a lack of respite services, including in-home respite
- waiting lists for Home Care and home maintenance
- getting services into remote areas
- the need for additional community nursing and allied health positions
- available service levels are often inadequate to meet the needs of high level clients
- the need for improved and flexible service delivery

Awareness of Services

Most older people (more than 90%) said in the Ageing Strategy Survey that they are aware of in-home support services and nearly 80% said they know how to contact these services, although men less so than women.

Despite the high level awareness of services, only 19% of survey respondents have ever used these services, although this percentage increases with age.

More than 60% of survey respondents said they would go to their doctor for help, although few had actually done so. Of those who had, over 60% said their doctor was able to put them in touch with these services, although this percentage varied considerably according to where people live and their age. Some people said during the community consultations that GP's can be hard to engage in making a referral to HACC services and that they don't know of the range of HACC and related services.

Clearly, GP's have a critical role to play in be attuned to the needs of their patients for in-home support, being aware of the service network and being able to refer their patients to services.

The service network can be difficult for frail older people and their families to navigate, especially when they are suddenly faced with a crisis, times that can be stressful and bewildering. Information on the full range of available services is not always easy to find, even for service providers themselves.

The Commonwealth Government has recently announced the introduction of a new 1800 national information line which will provide information on local care services to older people and their carers.

⁹ Chapter 3 Community Profile
Table 3.7

The loss of the ACAT position from Lithgow will also have a negative impact on the level of awareness by older people and their families/carers about available services.

Service Coordination

There is generally a good level of informal information sharing between the various organisations that provide services to older people in Lithgow. This has been helped by there being a multi-service agency, Lithgow Information and Neighbourhood Centre, which provides a number of services including food services, home modification and maintenance, social support and carer respite services.

There are also a number of other well established and known services in Lithgow, including Home Care, Transline Community Transport, Evans Community Options and Uniting Care to name some. There are also a number of service providers, including those providing aged care packages, located outside of Lithgow.

Interagency collaboration such as through the Lithgow Home and Community Care Forum, can provide opportunities for information sharing, joint learning, joint planning and marketing, consideration of service gaps, barriers to accessing services faced by disadvantaged groups including Aboriginal people and resource sharing etc.

Regular and productive networking offers significant potential benefits for the services themselves and for creating a better service environment for clients.

Community Care Action Plan			
Objective	Action	Key Partnerships	Priority*
Coordinated service planning	Lithgow HACC Forum, with the support of the Central West HACC Development Officer to develop a service planning and service improvement focus including identifying service gaps and how the service network can best meet the needs of older people to remain at home	Department of Ageing Disability and Home Care, Council, Nepean Blue Mountains Health Service, Centrelink, Department of Health and Ageing and community organisations	High
Improved service coordination	Council to seek funding to assist in employing an Aged/Disability Development Officer	Department of Ageing Disability and Home Care, Department of Health and Ageing and Department of Families, Housing, Community Services and Indigenous Affairs	High
	Council to seek reinstatement of a full-time ACAT service based in Lithgow	Council and community organisations	High

Community Care Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved service information	Council to assist with the regular update and wide distribution of the <i>Helping you at Home</i> directory of services for older people in Lithgow	Council, LINC and other community organisations.	High
	Council and local services to identify and promote a local telephone contact point for information on available services	Council, GP's, LINC, other community organisations and Commonwealth Respite and Carelink Centre	High

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Chapter 11 Issues for Council

11.1 Population Growth

As detailed in the Chapter 3 Community Profile, Lithgow is projected to have either zero or negative population growth out to the year 2036 while NSW and the surrounding Bathurst and Blue Mountains LGA's are projected to have significant positive growth in the same period.

In tandem with the fall in the overall population, are projections that the percentage of people aged 55+ years in Lithgow will rise from 29% to 46% by 2036. Again, this is significantly higher than NSW, Regional NSW and Bathurst and Blue Mountains LGA's.

An increasing number of older people and a loss of children, youth and those in the working age groups will pose a major challenge to Council, other levels of government and to the local economy and service industry.

In its 2007 Strategic Plan¹, Council established a growth rate target of 1% to 2% for the LGA. A 1% annual growth rate would bring the population to 25,496 in the year 2025 and a 2% annual growth rate would bring the population to 31,053 in the year 2025. These growth targets are 5,196 and 10,753 respectively above current Department of Planning population projections for the year 2026.

Both the draft Lithgow Land Use Strategy² and the Lithgow Economic Development Strategy 2010-2030³ recommend a revision downwards to 0.5-1% pa.

The Lithgow Economic Development Strategy points out the relationship between population growth and economic development and the implications of low or negative population growth:



Growth in population is a critically important component in economic development. Such growth or decline in population figures has a direct impact on levels of total private and public expenditure in a community. Population growth in fact provides the underlying basis for growth in labour resources, improvements in skill levels, and development of investment and capital within an area.

Population growth generates opportunities for business development and public investment, brings into the community new knowledge and expertise, and creates opportunities for innovation and business development.

By contrast, if there is no significant increase in population numbers over time, then the population can become an 'ageing' one. The population will begin to stagnate and consequently varying economic demand levels eventually decline, new skills are slow to develop, innovation and enterprise have limited prospects, fewer people are attracted to in-

¹ Lithgow Strategic Plan
Lithgow City Council 2007

² Lithgow Land Use Strategy 2010-14
Lithgow City Council 2011

³ Lithgow Economic Development Strategy 2010-14
Lithgow City Council 2010

migrate, and the rate of household and community dependency increases as fewer workers have to support an increasing number of non-workers.

Population growth provides critical support for industry sectors that typically locate close to population centres. These industry sectors are particularly important in the local economy as they generate multiplier (or flow-on) investment and employment effects, a share of which can be retained in the region. For example, expansion in population leads to increased demand for retail services, thereby leading to demand for inputs such as property services, financial services and so on.⁴

The EDS recommends a number of actions to stabilise population levels and promote population growth.

These actions include:

- *gathering evidence as to why youth and families migrate out of Lithgow*
- *investigating the population capacity of Lithgow*
- *encouraging the establishment of tertiary education facilities*
- *supporting local business through identifying labour skill requirements*
- *promoting and marketing Lithgow to potential new business and residents*

Most significantly, the EDS recognises the importance of enhancing the liveability of Lithgow to attract new residents and visitors. Liveability incorporates features such as housing choice, access to a high level of facilities and amenities, open space and recreation, culture opportunities, education and a safe community.

Section 11.2 Financial Impacts on Council of an Ageing Population

11.2.1 Productivity Commission Report

There is no doubt that the ageing of the population will have a significant impact on Council finances and the local economy. A 2005 Productivity Commission report titled "Economic Implications of an Ageing Australia"⁵ points to a number of impacts:

- *although local government is not the main provider of health and aged care services, provision of human services comprises around half of local government expenditure*
- *Ageing of the population will place increasing pressures on local government expenditure.*
- *municipal revenue is unlikely to increase at a greater rate than the growth in GDP. Accordingly, in common with other levels of government, there is likely to be an emerging fiscal deficit at the local government level under current policy settings*
- *labour shortages in certain professions in rural and remote areas are likely to be exacerbated by ageing. This reflects entry barriers and insufficiently attractive wages and conditions*
- *local government, like other levels of government, will face an imbalance between expenditure and revenue growth. This will place significant pressure on infrastructure planning and provision*
- *the trend over recent decades has been for local governments in addition to their traditional responsibility for roads, utilities and property related functions, to become increasingly drawn into providing a range of human services including education, health, welfare, housing and community amenities, recreation and culture*
- *rating revenue is the single largest source of funds for Councils. Rate pegging and pensioner concessions are likely therefore to have an increasing impact on Council finances*

⁴ Lithgow Economic Development Strategy Ibid page 141

⁵ Economic Implications of an Ageing Australia
Productivity Commission Research Report
March 2005

There is wide diversity in the types of functions and services provided by different local governments however. Unlike many councils, Lithgow City Council is not a provider of human services such as childcare, health services, Home and Community Care services for the frail aged and disabled, aged housing or educational services other than libraries. Lithgow City Council does however provide many recreational facilities, albeit with a strong sporting emphasis, and a number of community facilities and cultural facilities including the Union Theatre, Civic Ballroom, Crystal Theatre Portland and Eskbank House Museum.

11.2.2 Local Government and Ageing Project

The Local Government and Ageing Project⁶, produced for the NSW Department of Ageing, Disability and Homecare and completed in early 2011, was undertaken to identify the cost impacts on local government of an ageing population.

The project report highlights the role of local government in meeting the needs of older people and in enabling them to be independent, participate in and contribute to community life. The project report finds that older people contribute their time and expertise in playing an active role in the community and make a valuable contribution to local economic development. Further, there will be significant challenges ahead for councils in sustaining the provision of services and facilities for an ageing population at the same time as revenues are falling.



The report highlights the need for a strategic approach to population ageing that will require strategies to:

- sponsor awareness of ageing issues across the operational areas of council and the community
- assist with financing the impacts of ageing
- facilitate an asset management approach
- accomplish a coordinated cross-sectional approach to service provision
- manage community expectations of council service provision
- foster the social participation of older people
- achieve an evidence-based approach to ageing

11.2.3 Lithgow City Council Pensioner Rate Concession

Lithgow City Council provides an annual pensioner rate concession of \$425 per property which is 55% (\$233.75) funded by the NSW Government. The cost to Council is therefore \$191.25 per property. There are currently 2,353 properties in Lithgow LGA that are eligible for the pensioner rebate which is 22% of the total 10,511 rateable residential properties. The pensioner rebate therefore costs Council approximately \$450,000 per year.

The majority of ratepayers receiving pensioner rate concessions are on an aged pension. Lithgow also has relatively high rates of home ownership with 69% of the population (all ages) either owning or purchasing a property at the 2006 Census compared to a NSW average of 63%. Further, 88% of respondents to the Ageing Strategy Survey either owned or were buying their property.

⁶ Local Government and Ageing Project
Produced for the NSW Department Ageing, Disability
and Homecare by the University of Western Sydney
Urban Research Centre

In 2009/10 for example, 49% of Lithgow City Council's income came from rates. The high rate of home ownership in Lithgow, in tandem with the ageing population, means that there is likely to be an increasing revenue loss to Council in coming years.

A further issue for councils is that Financial Assistance Grants (FAG) by the Commonwealth Government to local government are indexed according to population growth and inflation but not according to increases in Gross Domestic Product (GDP). FAG grants do not therefore provide a mechanism for growth funding to local government.⁷ This poses challenges for Councils like Lithgow where population growth is low, but there is an increase in the number of older people requiring new services and facilities from council.

Councils are likely to face pressures to upgrade or modify infrastructure to be more suitable to the needs of an ageing population. This could include meeting space for seniors, home library services, transport, street lighting, footpaths, public toilets etc. A further issue is the need to zone suitable land for aged housing.

The Productivity Commission report also highlights the potentially competing pressures on local government to provide suitable infrastructure and planning for an ageing community while needing to plan for the needs of younger population and trying to attract younger families to the area to boost economic growth.



Other issues highlighted by the Productivity Commission report include regional labour shortages, particularly in health care professions and in other professions eg infrastructure maintenance staff that local government and business rely upon.

11.3 Conclusions and Recommendations

If the Department of Planning population projections prove accurate (or even largely accurate), Lithgow will face a declining and ageing population and will be at a competitive disadvantage compared to surrounding local government areas in attracting business and promoting economic development. Council faces a number of challenges therefore in responding to this projected low or negative population growth and in managing the range of impacts that will flow.

This raises a number of future issues for Lithgow City Council and the community:

- declining economic activity and declining rate income will reduce Council's revenue base and increase Council's reliance on fees, grants and loan funds
- with deteriorating public infrastructure, there will be increased demand for recreation and other infrastructure suitable for the needs of both an ageing population and for families and younger people
- labour force shortages will impact across the local economy. There may be particular shortages in the health and community care sectors which may impose financial and other demands on Council, or at least increase community expectations on Council. Council may also face skills shortages in its own workforce
- there may be community demands for Council to provide or subsidise services to the older population that are currently provided by state and commonwealth governments and the community sector

⁷ Economic Implications of an Ageing Australia Op Cit

- In many areas, Councils assist or directly provide Home and Community Care (HACC) type services which help people to stay in their home and to avoid premature entry to a nursing home. These types of services can include meals on wheels, community transport, social support, home modification and carer respite services to name a few. While these HACC services are currently provided by a range of non-government services, this may not always be the case, particularly when these services face financial or governance pressures, leading to expectations that Council may step in and provide these services.
- A related issue is that with the trend towards funding for these types of services being provided through a tender process, organisations outside Lithgow may increasingly become the service provider leading to an expectation by the community that Lithgow Council should provide these services in preference to an outside organisation.
- ageing housing stock will have negative consequences for older people and will have wider impacts on the local housing market. The location and suitability of housing is a critical issue for older people and can be a critical determining factor in the timing of their entry to residential aged care. Council has a key role in planning and regulating the supply of housing and will need to ensure that there is an adequate supply of suitable housing for an ageing population. In common with many other Councils, Lithgow City Council may also face pressures to supply housing either on its own or through joint ventures with other levels of government or the private sector. See Chapter 9 Housing and Accommodation
- the Productivity Commission Report points out that in areas of social and economic disadvantage, Councils are faced with providing services to high need but asset poor clients. This is likely to be the situation in Lithgow due to its relatively low incomes and high economic disadvantage

Low population growth has been of concern to Council for some time and has been the catalyst for a number of initiatives by Council, aimed at supporting and growing the local economy and improving the liveability of the community.

These initiatives include:

- adoption of the Learning City program 2001
- Social Plan 2006-11
- Cultural Plan 2008
- Cultural Precinct Study 2009
- Economic Development Strategy 2010
- Land Use Study 2011
- Crime Prevention Plan 2011
- commencing Stage 1 of the Lithgow heated aquatic centre 2011
- Ageing Strategy 2011

The challenges that Lithgow faces are not unique and are shared with many other rural councils across NSW. On the other hand, Lithgow has advantages that include proximity to the Sydney economy (and Sydney export markets), relatively good transport links to Sydney and the central west, affordable housing, good educational facilities and high class environmental assets. Lithgow has a proud industrial heritage and strong community assets of resilience and spirit. Lithgow also has a vibrant cultural life and is home to considerable numbers of people who work in the cultural industries. These features should underpin efforts by Council and others to respond to the challenges of an ageing, and falling population in creative ways.

Issues for Council Action Plan			
Objective	Action	Key Partnerships	Priority*
Promote Population Growth	See Economic Development Strategy and Land Use Study		
Promote Economic Development	See Economic Development Strategy		
Encourage lifelong learning opportunities	Encourage the establishment of tertiary and community education facilities in Lithgow. See Chapter 6 Social Engagement		
	Improve the literacy levels of all age groups (including workplace literacy) and encourage further education	Council, TAFE and business	High
Improve the Liveability of the community	Develop a liveability index and plan and prioritise community infrastructure provision and maintenance according to their contributions to this index	Council, Sydney West Area Health Service	High
	Proceed with future stages of the indoor heated aquatic centre and develop masterplan for showground/skatepark/aquatic centre precinct. See Chapter 8 Healthy Lifestyles and Recreation		
	Accelerate planning for walking, cycling and passive recreation See Chapter 8 Healthy Lifestyles and Recreation		
	Implement the Cultural Precinct concept and support the development of cultural industries	Council, business, funding bodies, cultural industries	High
Promote Housing choice	Encourage housing choice for all family types and ages. See Chapter 9 Housing and Accommodation		
Model the financial	Model the financial impact over the next 10-15 years	Council	High

Issues for Council Action Plan			
Objective	Action	Key Partnerships	Priority*
impacts of the ageing population	of reduced rate income and project changing infrastructure requirements		
Raise Awareness of the Impacts of an Ageing Population	Incorporate ageing issues in Council's Community Strategic Plan and annual Management Plans	Council	High
Provide Appropriate Customer Service	Train customer service and other council staff in providing service to older people with dementia and other medical conditions	Council	Medium

**High = within 12 months Medium = 1-3 years Low = 3-5 years*

Ageing Strategy Appendices



Appendix 1 References

<p>Age-friendly Built Environments - Opportunities for Local Government Australian Local Government Association 2006</p>
<p>Ageing 2030: Creating the future Office for Ageing NSW Department of Ageing, Disability and Home Care</p>
<p>Ageing and Social Engagement in NSW NSW Department of Ageing, Disability and Home Care Office For Ageing Fact Sheet October 2007</p>
<p>Ageing-in-place - Implications For Local Government Australian Local Government Association 2006</p>
<p>Australia to 2050: Future Challenges The 2010 Intergenerational Report Department of Treasury 2010</p>
<p>Awareness To Action - Local Government's Response to Population Ageing Australian Local Government Association 2005</p>
<p>Economic Implications of an Ageing Australia Productivity Commission Research Report March 2005</p>
<p>Health Impact Assessment of the Lithgow Strategic Plan 2007 Sydney West Area Health Service 2008</p>
<p>Life Expectancy Trends – Australia Australian Bureau Of Statistics Canberra</p>
<p>Lithgow Crime Prevention Plan Lithgow City Council 2010</p>
<p>Lithgow Economic Development Strategy 2010-14 Lithgow City Council 2010</p>
<p>Lithgow Housing Market Housing NSW 2010</p>
<p>Lithgow Land Use Strategy 2010-2030 Lithgow City Council 2011</p>
<p>Lithgow Open Space And Recreation Needs Study ROSS Planning February 2011</p>
<p>Lithgow Social Plan 2006-11 Lithgow City Council 2008</p>
<p>Lithgow Strategic Plan 2007 Lithgow City Council</p>
<p>Local Government and Ageing Project Produced for the NSW Department Ageing, Disability and Homecare by the University of Western Sydney Urban Research Centre 2011</p>
<p>NSW Chief Health Officer's Report 2010</p>

<p>Report on People with a Disability and their Carers in NSW: Based on the 2006 Census of Population and Housing”, by the NSW Department of Ageing, Disability and Home Care (ADHC) October 2009</p>
<p>Residential Aged Care in Australia 2008–09: A statistical overview Australian Institute of Health and Welfare, Canberra</p>
<p>Social and Health Profile of Lithgow LGA (Version 3 SWAHS 2010) Sydney West Area Health Services’ Centre for Epidemiology, Indicators, Research and Evaluation</p>
<p>World Health Organisation Checklist of Essential Features of Age-Friendly Cities 2007</p>

LITHGOW CITY COUNCIL AGEING STRATEGY COMMUNITY SURVEY



Living in Lithgow

1. How long have you lived in Lithgow LGA?

- 1-5 years
 6-10 years
 10-20 years
 Over 20 years
 Born in Lithgow

2. Where in Lithgow do you live?

- Lithgow Glen Davis
 Wallerawang Capertee
 Portland Cullen Bullen
 Hartley Rydal
 Tarana/Sodwalls Hampton
 Clarence/Dargan Other

Specify

3. What do you like best about living in the Lithgow LGA now?

3b. What did you like best about living in Lithgow LGA 5 years ago? (if applicable)

4. What don't you like about living in Lithgow LGA now?

4b. What didn't you like about living in the Lithgow LGA 5 years ago? (if applicable)

5. For the 5 statements below, please score each one out of 10 (1 = you strongly disagree and 10 = you strongly agree)

Strongly Disagree

Strongly Agree

- | | | | | | | | | | | |
|--|-------------------------|-------------------------|------------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|--------------------------|
| a. My community feels like home | <input type="radio"/> 1 | <input type="radio"/> 2 | <input checked="" type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| b. People care about each other in Lithgow | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| c. Lithgow is a friendly community | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| d. I would like to contribute to the community | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |
| e. People I don't know would help me if I had an emergency | <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 | <input type="radio"/> 5 | <input type="radio"/> 6 | <input type="radio"/> 7 | <input type="radio"/> 8 | <input type="radio"/> 9 | <input type="radio"/> 10 |

Safety

6 How safe do you feel in your home and community?

- Very safe
- Quite safe
- A little unsafe
- Somewhat unsafe
- Very unsafe

If you have answered very safe or quite safe, please skip to question 10.

7. Does Lithgow feel less safe to you than 5 years ago? (if applicable)

- Yes
- No

8. What are your major safety concerns?

9. What sort of things do you think would help make the community safer?

Housing and Preparation for Ageing

10. Regarding your current home, are you ?

- Buying
- Renting
- Already own

11. Do you think your home is suitable for your needs as you age? Eg access, location, heating, general condition?

- Yes
- No

12. What changes do you think are needed to make your home safe, comfortable and suitable for you as you age?

13. What type of housing would best meet your needs as you grow older?

- My current house
- A smaller house
- A unit
- A nursing home
- A hostel
- Other

Specify

14. Do you feel that you are well prepared for getting older?

- Yes
- No

15. Have you been given adequate information and assistance to help you plan for getting older?

- Yes
- No

16. What types of things would help, or would have helped you to better prepare for getting older? Please explain.

Family, Friends and Community

17. Do you have family living in Lithgow LGA?

- Yes No

18. How often do you have contact with family?

- Daily Weekly Monthly 3 Monthly Less often

19. How often do you have contact with friends?

- Daily Weekly Monthly 3 Monthly Less often

20. Are you a carer for your spouse or offspring?

- Yes No

21a. Are you involved in any social clubs or social activities? (If Yes What type of organisation?)

- Yes No

21b. If yes, how often do you attend?

- | | | | | |
|------------------------|------------------------------|-------------------------------|---------------------------------|----------------------------------|
| Sporting activities | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| Card Playing | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| Musical/Arts & Crafts | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| RSL, Workmens Club etc | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| Gardening | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| Seniors Group | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |
| Other | <input type="radio"/> Weekly | <input type="radio"/> Monthly | <input type="radio"/> 3 Monthly | <input type="radio"/> Less Often |

Please Specify Other

22. Do you do any unpaid voluntary work?

- Yes No If no, please skip to question 23.

22b. How often?

- Weekly Monthly Less frequently

22c. What type of organisations?

- Meals On Wheels
- Social Group
- Community Transport
- Landcare/Environment
- Sporting
- Other (Specify)

Specify

23. What sort of things have prevented you from volunteering or having social contact?

24. Do you do any paid work?

- Yes No

If no, please skip to question 25.

22b. How often?

- Weekly Monthly Less frequently

Health

25. How would you rate your health compared to a year ago?

- Better Same A little worse A lot worse

Why did you say this?

26. Do you regularly visit your GP?

- Yes No

27. How easy/difficult is it to get an appointment with your GP when you need one?

- Easy Can be difficult Often difficult Always difficult

28. Do you have to leave Lithgow LGA for specialist services?

- Yes No

29. If so how often?

- Weekly Monthly Every 2-3 months Less Often

Where do you travel to?

30. How do you get to these out of area services?

- I drive myself Family drive me Community transport Public transport

31. Do you ever use other health services such as podiatry, physiotherapy, etc?

- Yes No

In Home Support Services

32. Are you aware that there are services such as meals on wheels, respite care, social support, community transport etc in Lithgow? Yes No

33. Are you aware of how to contact these services? Yes No

34. Do you ever use these services? Yes No

35. List those you use

36. What types of services do you think you will need as you get older?

37. If you or your partner can no longer manage at home due to ill health or frailty, where would you go for help?

Your doctor

Family

Friends

Hospital

Other

Please Specify

38. Do you ever discuss your need for these services with your GP? Yes No
(If no, please skip to question 40.)

39. Was your GP able to put you in touch with these services? Yes No

Discharge from Hospital (If you have not been in hospital in previous 12 months, skip to question 42)

40. How well do you think you were supported in returning home after spending time in hospital?

Well

OK

Could have been better

Could have been much better

41. What types of services do you think would have helped you to return home?

Exercise

42. How often do you walk or participate in moderate physical activity of at least 30 minutes?

- Daily Several times a week Weekly Monthly Never

Transport and Access

43. Approximately how far do you live from the centre of town/shopping centre?

- 0-400 meters 401-1,000 meters 1-2 kilometers 2-5 kilometers More than 5 kilometers

44. How do you get to town or shopping?

- Walk
 Drive
 Taxi
 Public Bus
 Community Bus
 Friends/Family take me
 Community Service take me

45. How easy or difficult do you find it to move around Lithgow, ie footpaths, into buildings, across roads etc?

- Easy Can be difficult Often difficult Always difficult

46. Please explain

Information

47. How do you get information about what is going on in your community?

- Television Radio Newspaper Internet Other

48. How could Council help you to get information about what is going on in the community?

- Local Newspaper
 Council Newsletter
 Email
 Mail Outs
 Radio
 Website
 Television
 Notice Boards Location
 Other Please Specify

49. Do you use the internet?

- Yes No

49b. How often?

- Daily Several times a week Weekly Monthly

49c. What do you use the internet for?

- Email News Entertainment Study Other Specify

Your Profile

50. Are you? Male Female

51. Are you aged? 50-54 yrs 55-59 yrs 60-64 yrs 65-69 yrs
 70-74 yrs 75-79 yrs 80+ yrs

52. Would you describe your household as?

- Family with majority of children under 12
 Family with majority of children over 12/adult children
 Mature couple - no children/children left home
 Single - no children/children left home

53. In which country were you born?

- Australia Phillipines
 New Zealand Italy
 UK Mainland China
 Germany Other Please specify

54. Are you an Aboriginal or Torres Strait Islander person? Yes No

55. Which language do you speak at home?

- English Tagalog Please specify
 German Cantonese/Mandarin
 Italian Other

If you are interested in us contacting you at later date to invite you to a meeting to consider the overall survey results, please give us your contact details. Your contact details will be confidential and will not be provided to any other organisation or used for any other purpose than the Ageing Strategy.

First Name Last Name Phone Number

Address/Email address

Please return completed surveys by Friday 30 July 2010 to:

Lithgow City Council
PO Box 19
Lithgow NSW 2790

or fax 6351 4259

Appendix 3 Inventory of Services for Older People in Lithgow

Service Category	Service Description	Capacity
Residential Care		
Cooinda Aged Peoples Home Maple Crescent Lithgow 2790 Ph 6351 4071	aged care facility	Care for 47 people with a specific 12 bed dementia unit
Portland Tabulam Health Centre 20 Green Street Portland 2847 Ph 6359 2666	aged care hostel	22
Tanderra Nursing Home Short Street Lithgow 2790 Ph 6352 2788	aged care facility	47 bed facility
Three Tree Lodge 2 Col Drewe Drive Lithgow PO Box 3015 Bowenfels 2790 Ph 6354 2666	aged care facility	54 bed facility for low care residents with 24hr registered nurse on duty
Wallerawang Residential Care Facilities ‘Melrose’ Commens Street Wallerawang 2845	licensed residential centre	Licensed to accommodate up to 37
Social and Recreational Groups		
Gorrie Ban Fatima Hall, Great Western Highway postal address 5 Rifle Parade Lithgow 2790 Ph 6352 1466	meets every Monday and provides entertainment, social interaction, and monthly outings	
Senior Citizens Club 152 Mort Street Lithgow 2790. Ph 6351 4687	social activities for people 50 years and over	
Combined Pensioners and Superannuants Association of NSW 36 Hayley Street Lithgow Ph 6352 2045	pensioners support and social group	Open Group
Community Day Centre South Bowenfels Presbyterian Church Mudgee Street Lithgow 19 Young Street Lithgow 2790 Ph 6351 2318	day care for frail and disabled	
Beehive Re- Creative Centre Lithgow 43 Bridge Street Lithgow Ph 6351 3134	education, social, art and craft activities	
Beehive, Portland Uniting Church Uniting Church Hall Portland 2847 Ph 6355 5384	social and learning centre	

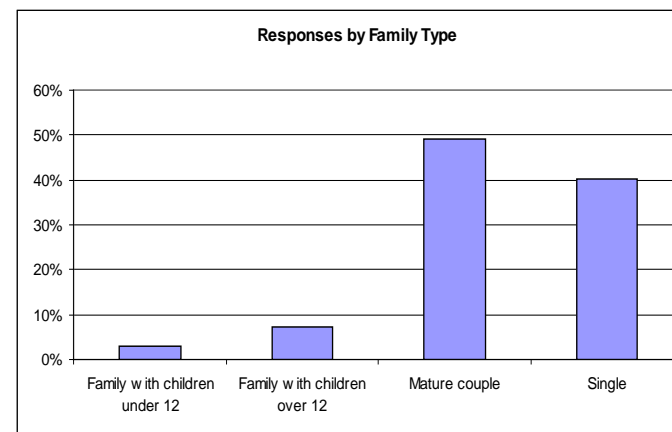
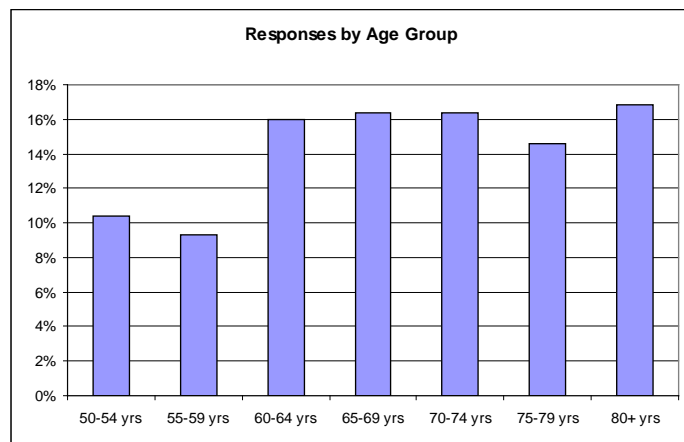
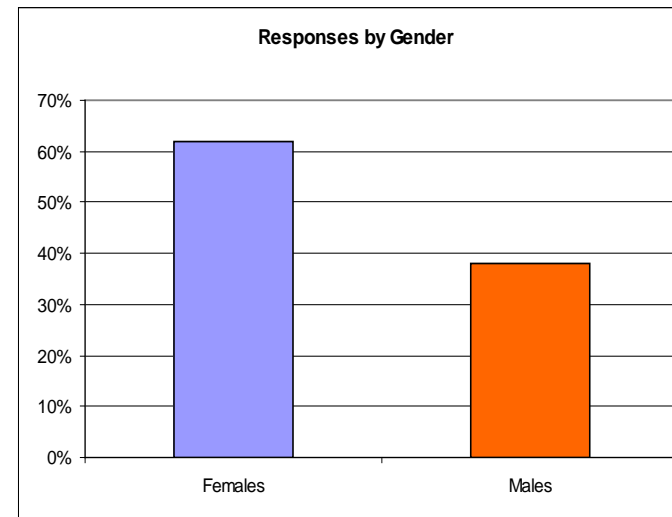
Service Category	Service Description	Capacity
Support Services		
LINC HACC Services 1 Padley Street Lithgow PO Box 289 Lithgow 2790 Ph 6352 2077 linc@linc.org.au	<ul style="list-style-type: none"> • food services • community lunches • home modification and maintenance • social support • aged day centre • telephone companion service • overnight respite care 	
Evans Community Options 95 Keppel Street Bathurst PO Box 1982 Bathurst 2795 Ph 6332 5755	case management, respite, neighbour aid, social support and ComPack other services include: <ul style="list-style-type: none"> • personal care • domestic assistance • respite • social support • shopping assistance • referrals 	
Community Aged Care Packages	(CACP) Commonwealth funded for people assessed as eligible for at least low level residential aged care, to help them stay in their own homes There are a number of package providers including Catholic Care Bathurst, Hammond Care Bathurst and Southern Cross	
Home Care Service of NSW 1 Padley Street PO Box 226 Lithgow 2790 6352 1844	general home care for frail and disabled, shopping services also available	
Uniting Care 2 Silcock Street Lithgow Ph 6351 4687	<ul style="list-style-type: none"> • in home and community based respite care • community access and day program • community participation program • frail aged afternoon program • transition to work • lifestyle choices • active ageing • leisure link • vacation care program • Saturday programs • social support • overnight respite house 	

Service Category	Service Description	Capacity
Community Transport Mort Street Lithgow PO Box 231 Lithgow 2790 Ph 6352 2146	transport for the frail, aged and disadvantaged	
Uniting Church Community Visitors Scheme. 43 Bridge Street Lithgow 2790 Ph 6351 3134	volunteer visiting to residents of aged care homes who are socially isolated	
Legacy 90 Main Street Lithgow. PO Box 127 Lithgow 2790 Ph 6352 3999	support for veteran widows. Advice and assistance with medical, social support, pension claims, dependant children's education and all welfare services	
Vision Australia PO Box 1391 Orange 2800. Ph 6363 6900	Key agency providing services to people with vision loss. Services is provided free of charge	
Department of Ageing Disability and Home Care 1 Padley Street Lithgow 2790 Ph 6351 4688	services for people with a disability including: <ul style="list-style-type: none"> • case management, • respite services • occupational therapy • physiotherapy speech pathology, • behaviour intervention • early intervention. 	
Assessment and Referral		
Homecare	boarding house referrals	
Commonwealth Respite & Carelink Centre, Central West Suite 4, 235 Lords Place PO Box 2500 Orange 2800 Ph 1800 052 222	telephone information and referral service to assist carers of people who have a chronic illness or are frail aged to access respite options including emergency respite and a residential booking service.	Covers Central West HACC region
Advocacy		
The Aged Care Rights Service 418A Elizabeth Street Sydney Ph 1800 424 065	information given on entering nursing homes, hostels, self care units and serviced apartments	
Disability Information and Advocacy Service Bathurst		

Service Category	Service Description	Capacity
Disability Advocacy 1300 365 085		
Ombudsman Community Visitor	regulatory visitation of boarding houses	
Health		
Aged Care Assessment Team PO Box 10 Lithgow 2790 Ph 6350 2506	assessment for residential care and aged care packages, education and liaison for older people and their carers	
Community Health Centre Col Drewe Drive Lithgow PO Box 10 Lithgow 2790 Ph 6350 2750 Centralised Referral Service: 1800 013 101	chronic and complex care: <ul style="list-style-type: none"> • community nursing <ul style="list-style-type: none"> ○ wound care ○ palliative care ○ continence ○ chronic care management • allied health 	
Compack Packages	a coordinated package of community care for people being discharged from a participating new public hospital to enable them to safely return home. Services include help with showering, meal preparation and transport etc. Available for up to a maximum of 6 weeks following hospital discharge	
Transitional Care Program	short term assistance to people aged over 70 years (or indigenous people over 50 years) in their own home after hospital discharge. includes physiotherapy, occupation therapy, social work, community care, geriatric and nursing assistance	
Diabetic Support Group Lithgow Hospital Education Centre Ph 6351 4214	support and information group for people with diabetes	
Cancer Council of NSW, Western Office 75 Kite Street Orange PO Box 1977 Orange 2800 Ph 6392 0800		

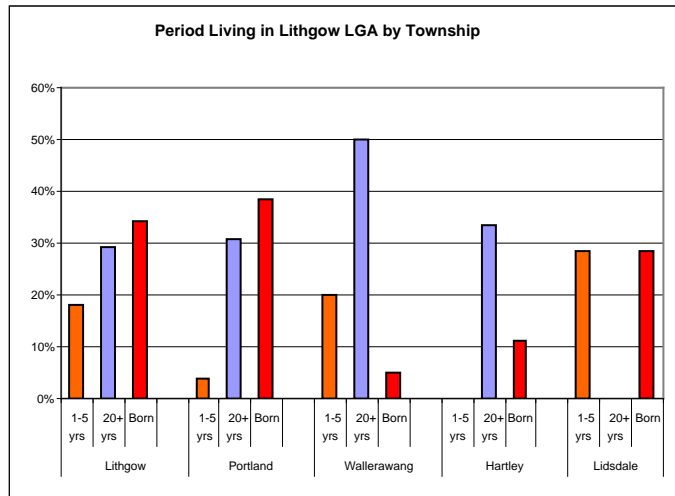
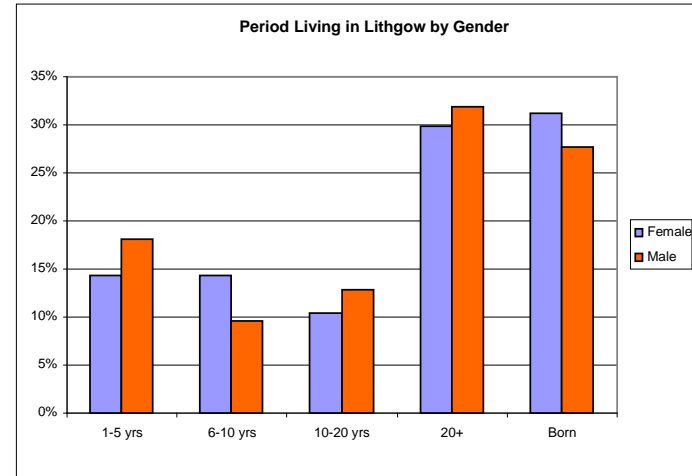
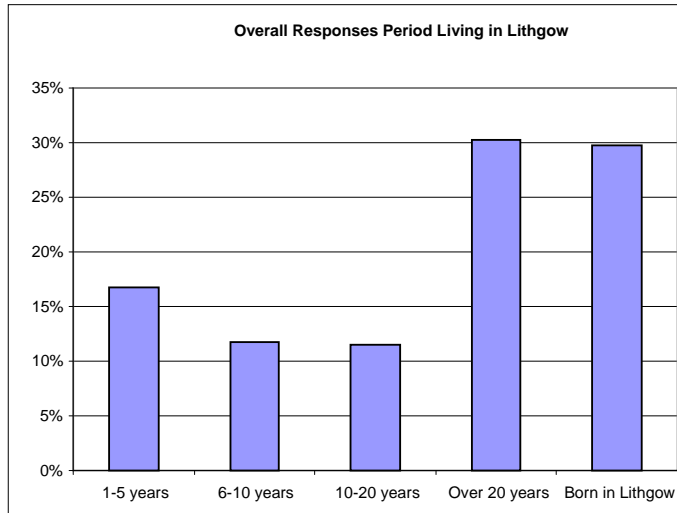
Appendix 4 Lithgow Ageing Survey Full Results

Overall Survey Responses



Of the people who completed the survey, 70% live in Lithgow town although there are significant numbers of people living in the other townships within the Lithgow LGA. More than 60% of survey respondents are women although there are also almost 100 male respondents. Survey respondents represent all age groups with fairly equal numbers of people from the 60-64, 65-69, 70-74, 75-79 and 80+ age groups.

Questions 1 and 2. How Long Have You Lived in Lithgow and where do you live now?



The survey asked people how long they have lived in Lithgow with 60% of respondents saying they were either born or have lived here for more than 20 years. Nearly 30% however have lived in Lithgow for 10 or less years which suggests a significant number of relative newcomers who may not have as strong family and other supports as those who have lived here longer. There are some gender differences with men less likely to be born in Lithgow than women but more likely to have lived here for 10+ or 20+ years. Men are also more likely than women to be newcomers to Lithgow.

As might be expected, older people living in Portland and Lithgow town are more likely to have been born here although there are significant numbers of people living in Wallerawang and Hartley who although not born there, have lived in Lithgow LGA for more than 20 years.

Question 3 What Do You Like Best About Living In Lithgow LGA Now?

The survey asked people to say what they like best about living in Lithgow LGA now. The most common responses to this question were:

- Friendly people and community spirit
- Proximity to Sydney, the mountains and the country
- Access to facilities, hospital and medical services
- Country atmosphere, climate and lifestyle

Question 3b What Did You Like Best About Living In Lithgow LGA 5 Years Ago?

The survey then asked people to say what they like best about living in Lithgow LGA 5 years ago. The most common responses to this question were:

- Lifestyle
- Access to family, facilities and services
- Less crime

Question 4 What Don't You Like About Living In Lithgow LGA Now?

The survey asked people to say what they don't like about living in Lithgow LGA now. The most common responses to this question were:

- The lack of recreational facilities and entertainment
- Increased crime, anti-social behaviour and vandalism
- Lack of Council direction and maintenance of facilities, roads and footpaths

Question 4b What Didn't You Like About Living In Lithgow LGA 5 years Ago?

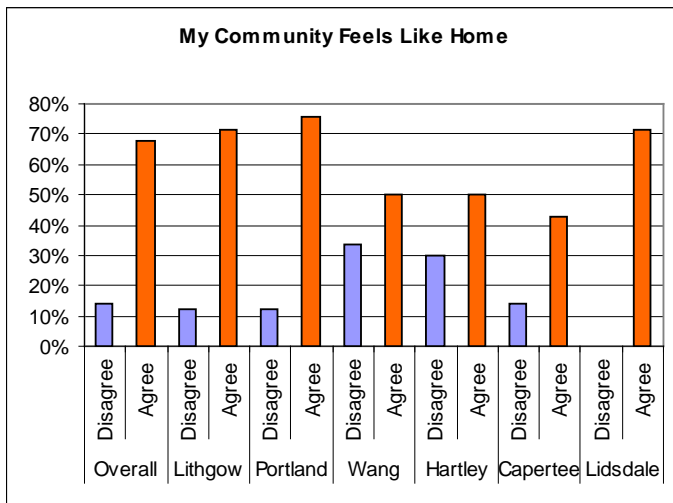
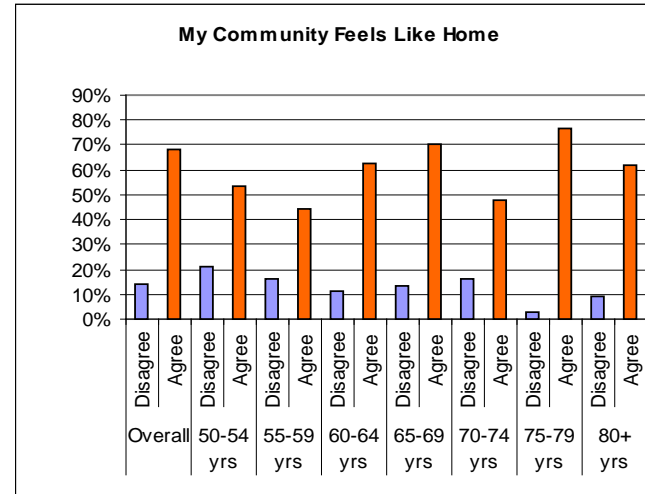
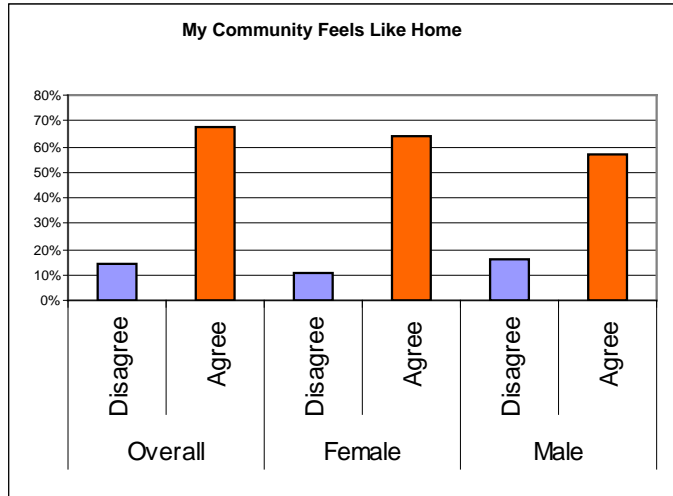
The survey asked people to say what they didn't like about living in Lithgow LGA 5 years ago. The most common responses to this question were:

- Anti-social behaviour
- Lack of facilities

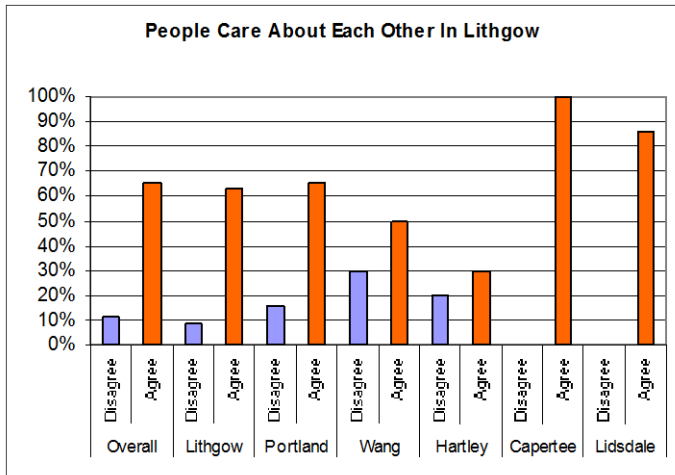
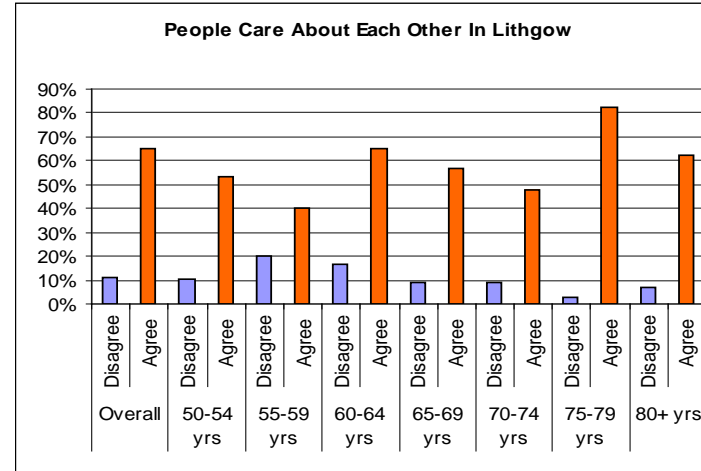
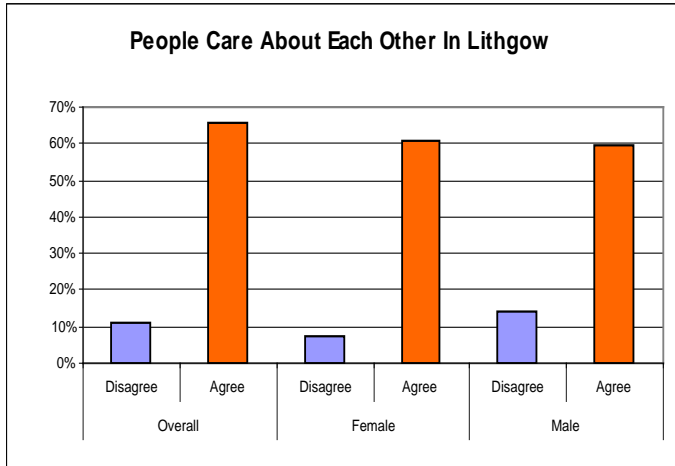
Question 5

Survey respondents were asked a series of questions about their involvement in the community and the level of support they feel the community provides them. They were asked to score the following 5 statements from 1 (strongly agree) to 10 (strongly disagree). These are grouped below as Agree (1-4) or Disagree (7-10).

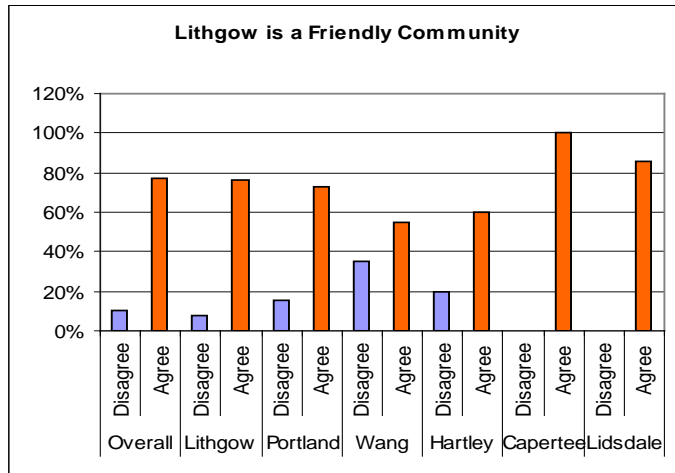
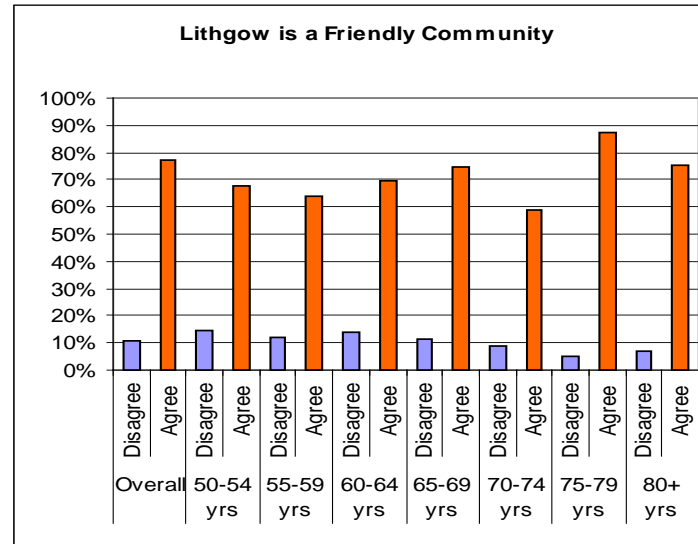
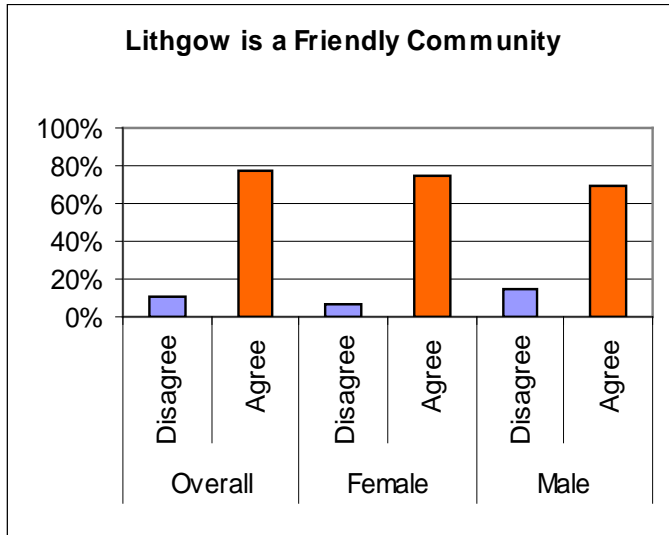
Question 5a My Community Feels Like Home



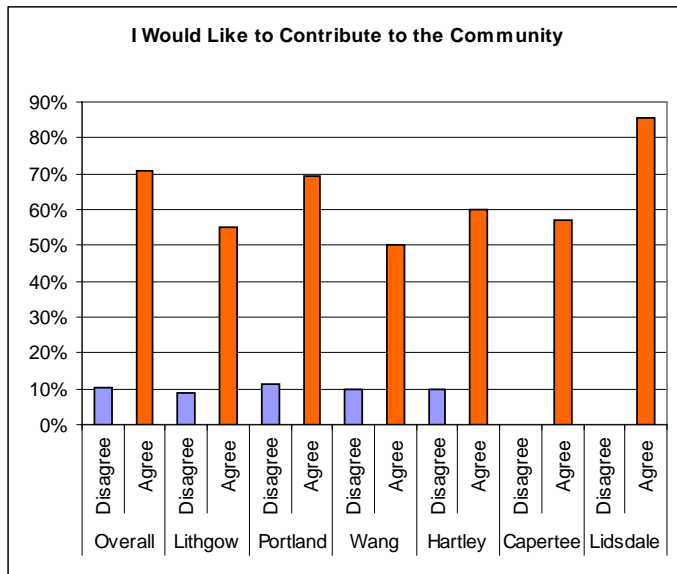
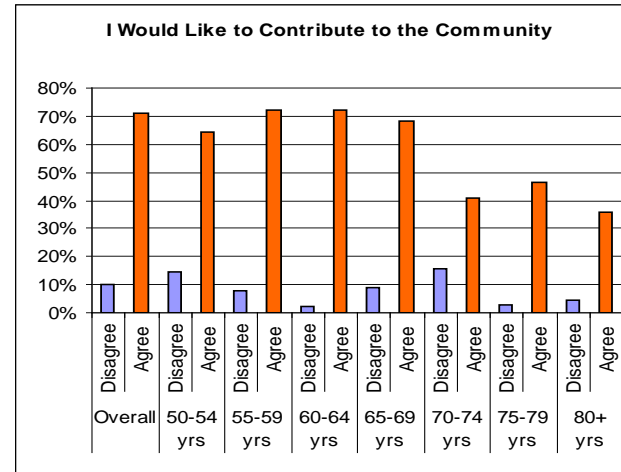
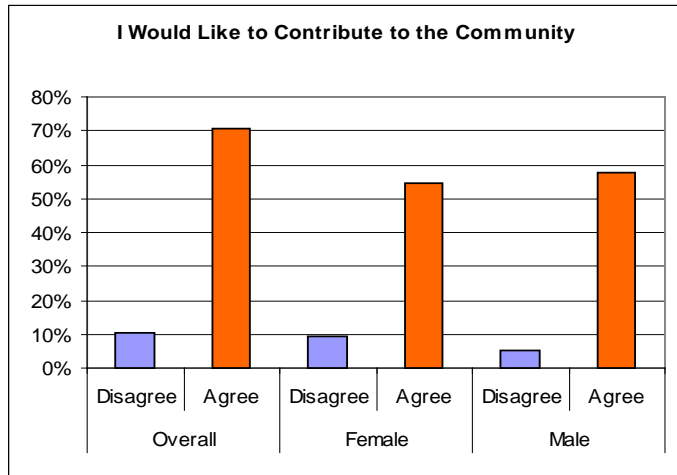
Question 5b People Care About Each Other In Lithgow



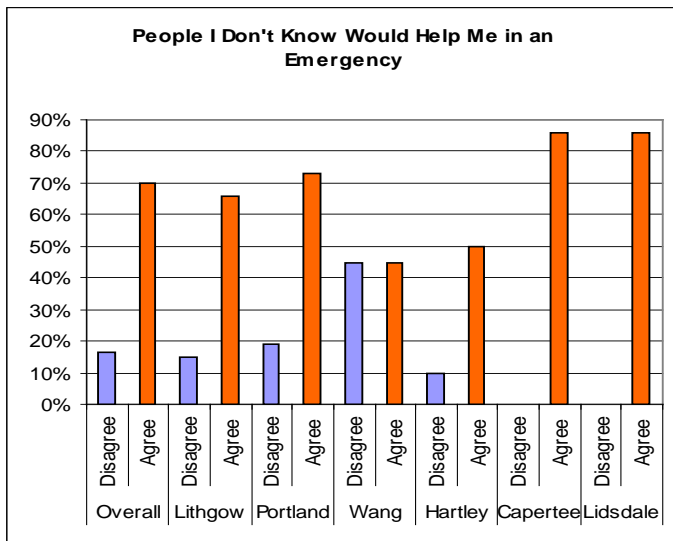
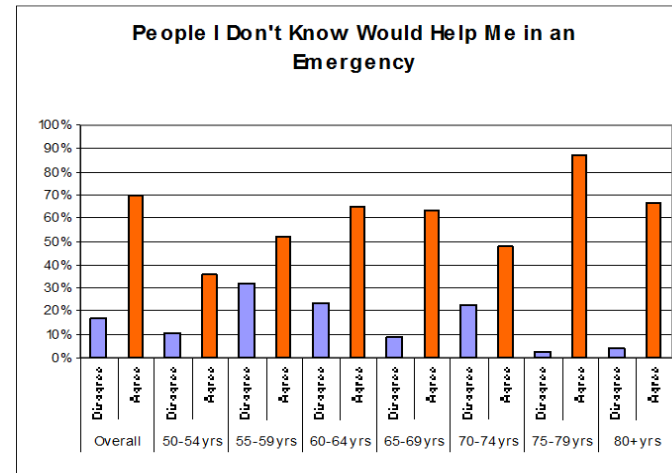
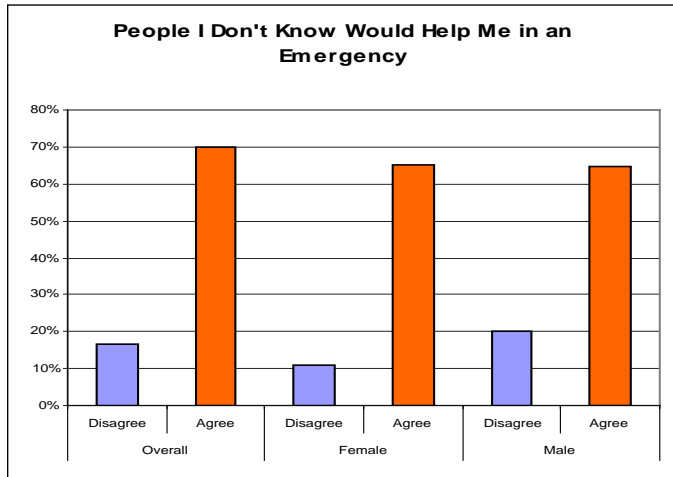
Question 5c Lithgow is a Friendly Community



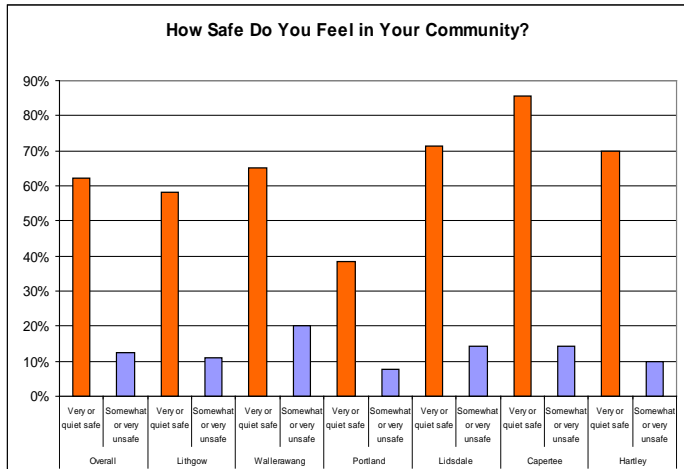
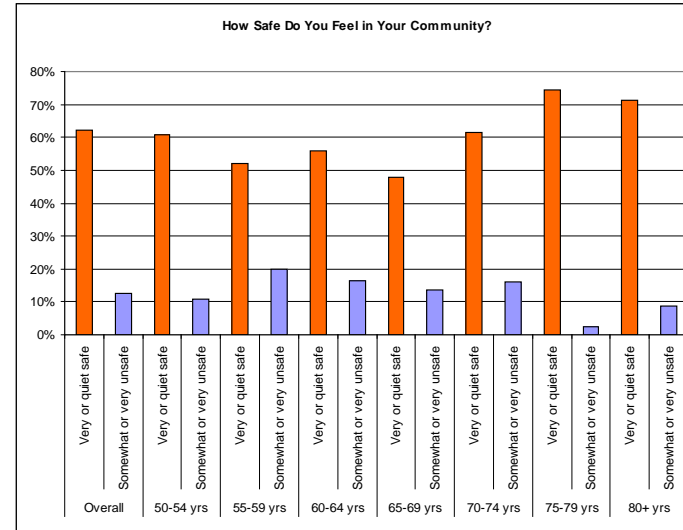
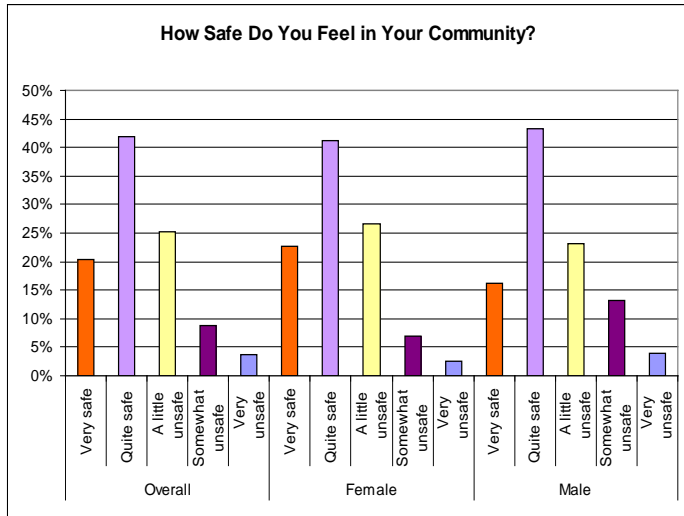
Question 5d I Would Like To Contribute To The Community



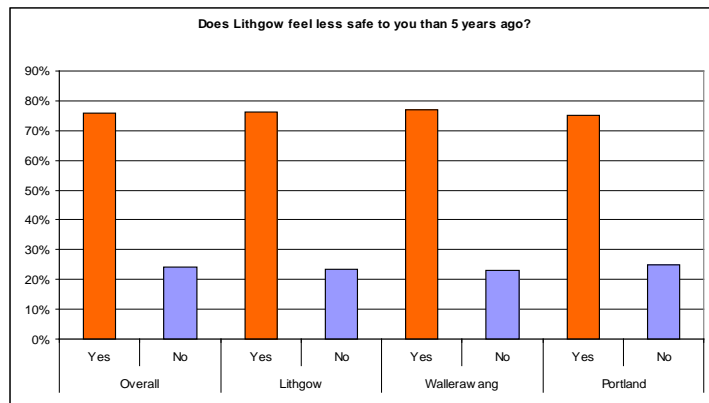
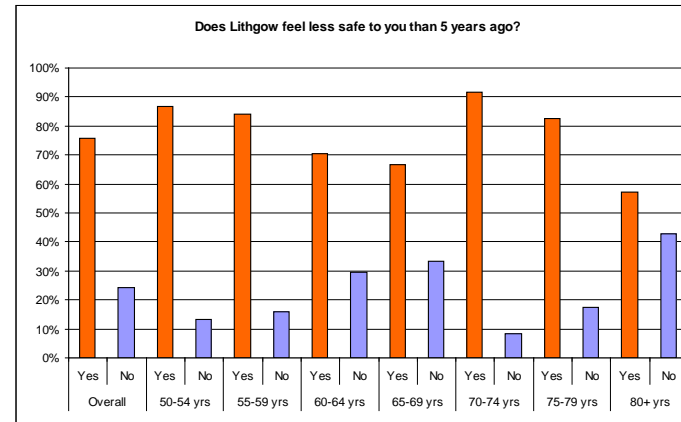
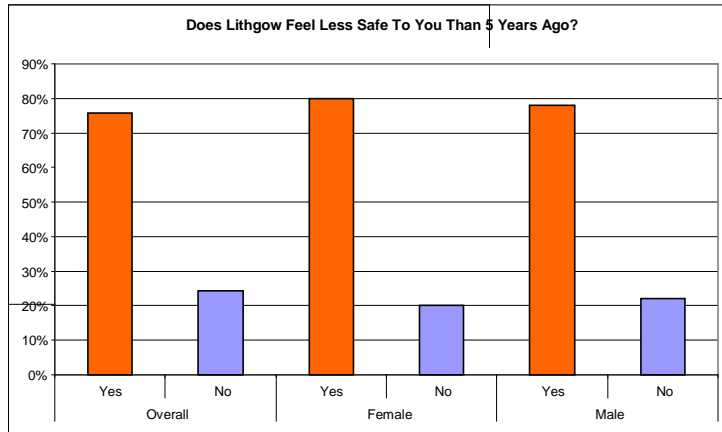
Question 5e People I Don't Know Would Help Me In An Emergency



Question 6. How Safe Do You Feel in Your Community?



Question 7. Does Lithgow Feel Less Safe Than 5 Years Ago?



Question 8 What Are Your Major Safety Concerns?

The survey asked people to say what their major safety concerns are. The most common responses to this question were:

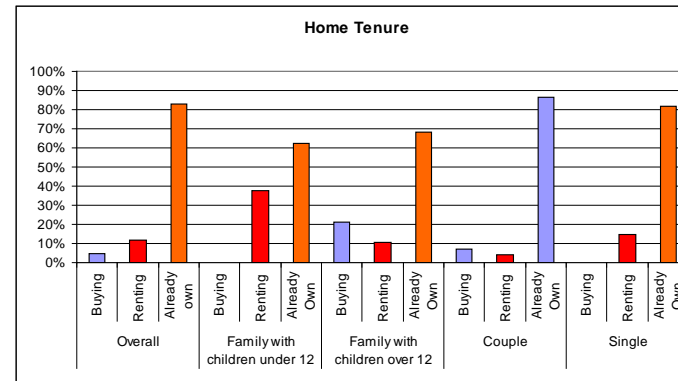
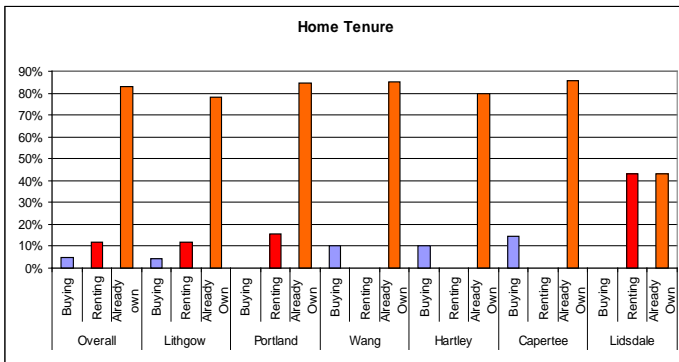
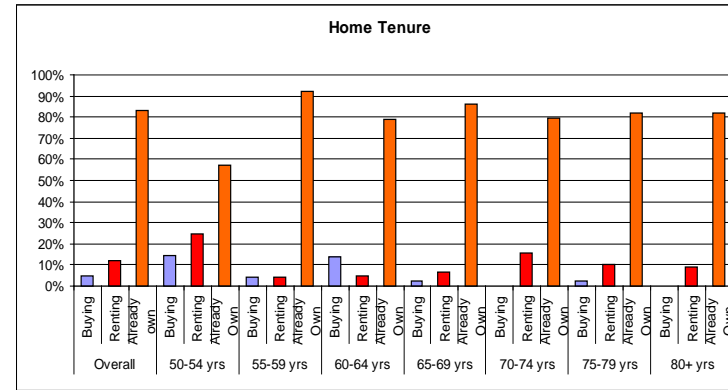
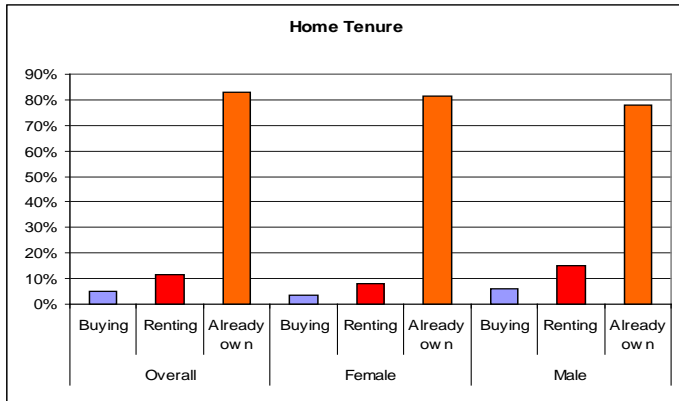
- Increased anti-social behaviour and violence on the streets
- Fear of break-ins and home invasions
- Intoxicated people
- Fear about going out
- Lack of Police patrols and Police presence generally
- Vandalism against private and public property
- Road and footpath hazards
- Bike and skateboard hazards

Question 9 What Sort Of Things Would Help Make The Community Safer?

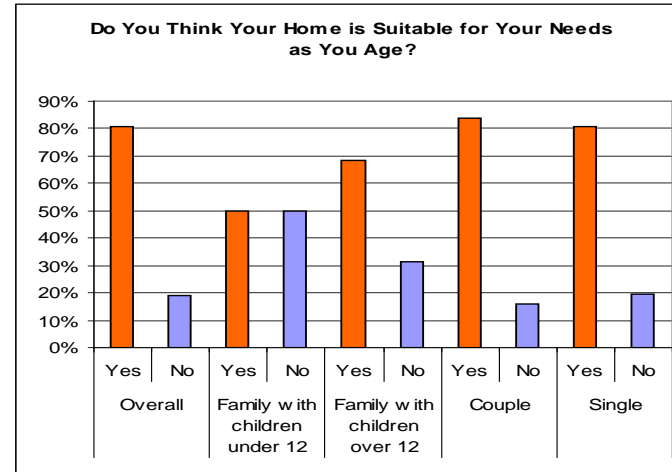
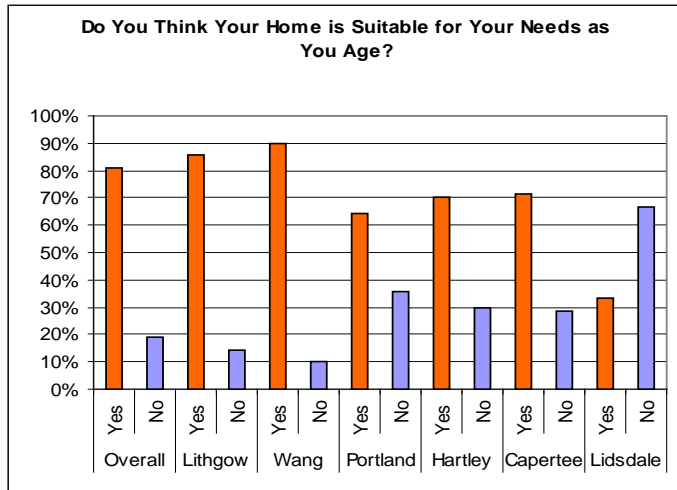
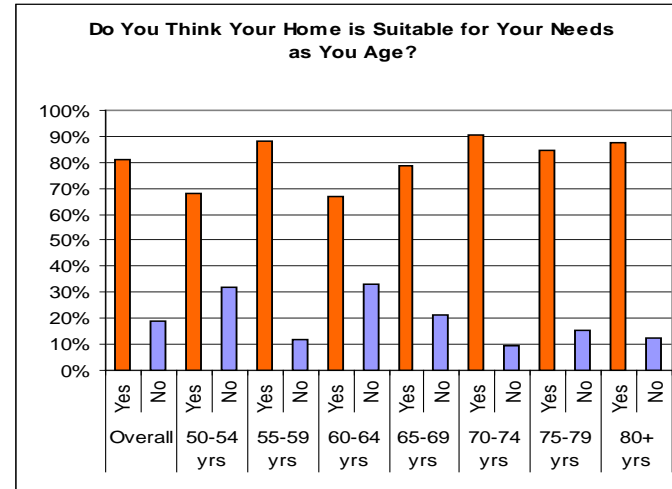
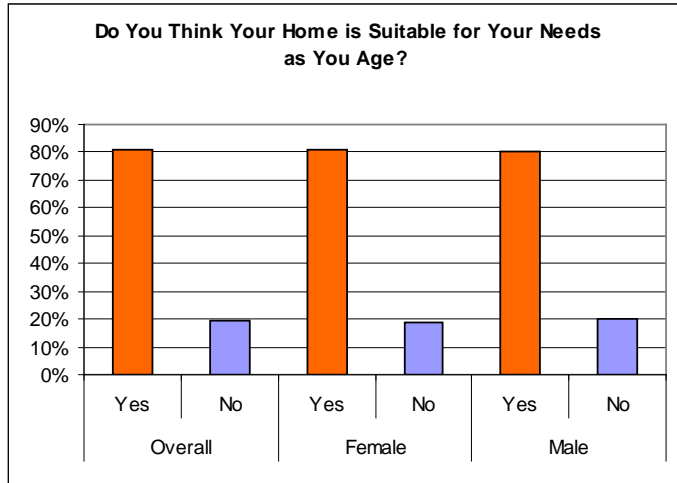
The survey asked people to say what sort of things would help make the community safer. The most common responses to this question were:

- More active Police patrols and Police presence, especially at night
- improved street lighting
- CCTV cameras
- More recreational activities and employment for young people
- Earlier closing times for licensed premises

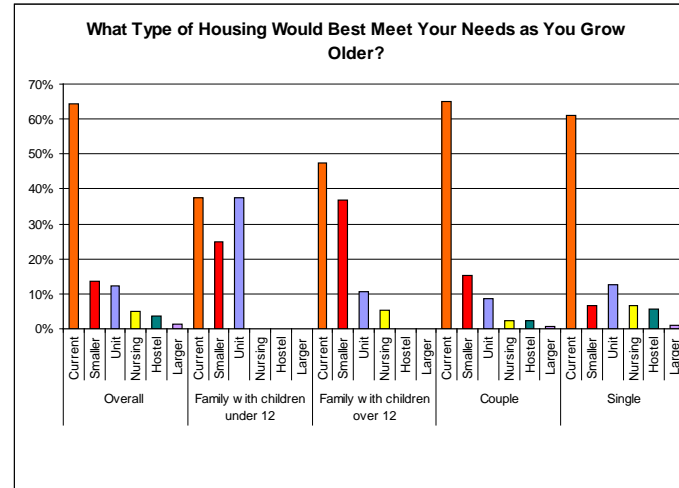
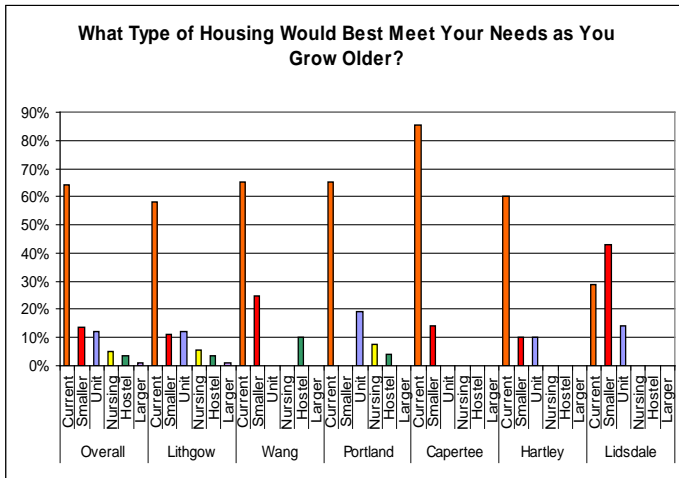
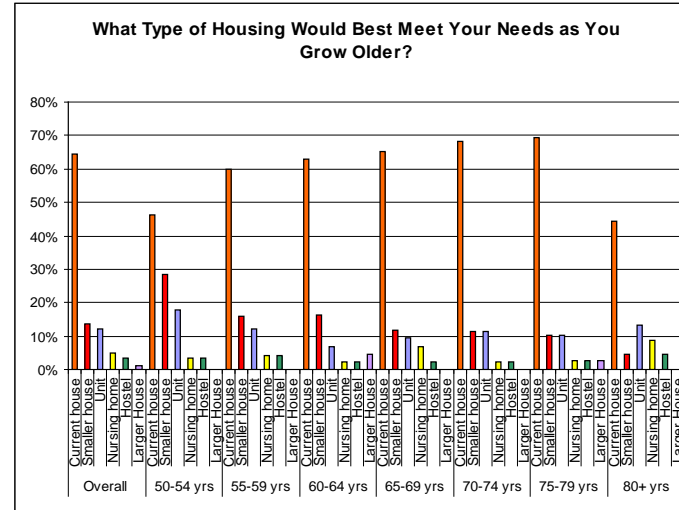
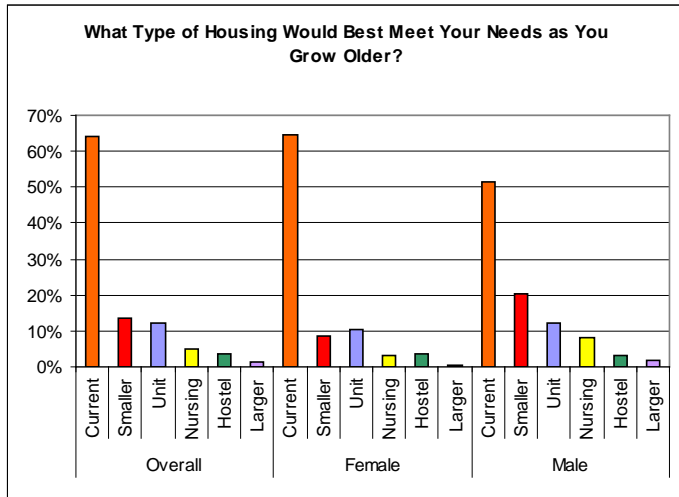
Question 10 Housing Tenure



Question 11. Do You Think Your Home Is Suitable For Your Needs As You Age? Eg Access, Location, Heating, General Condition.



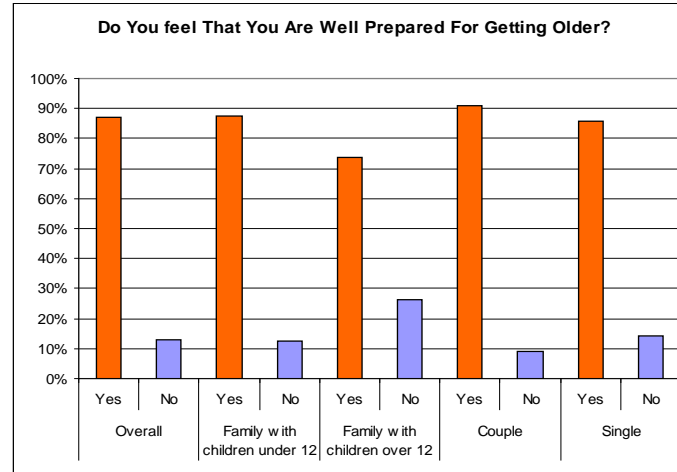
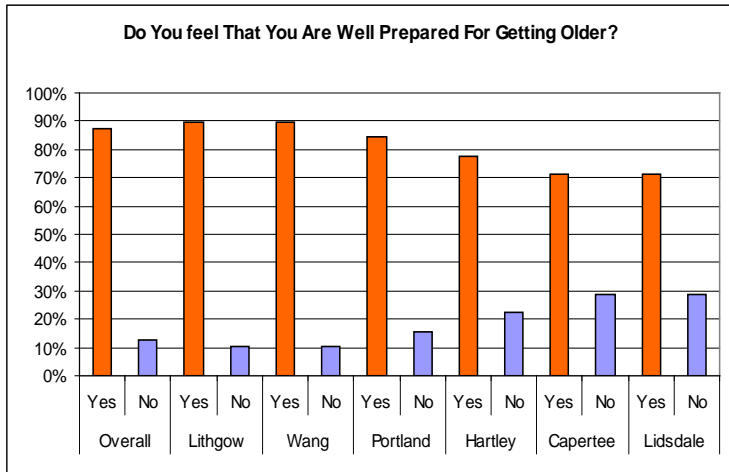
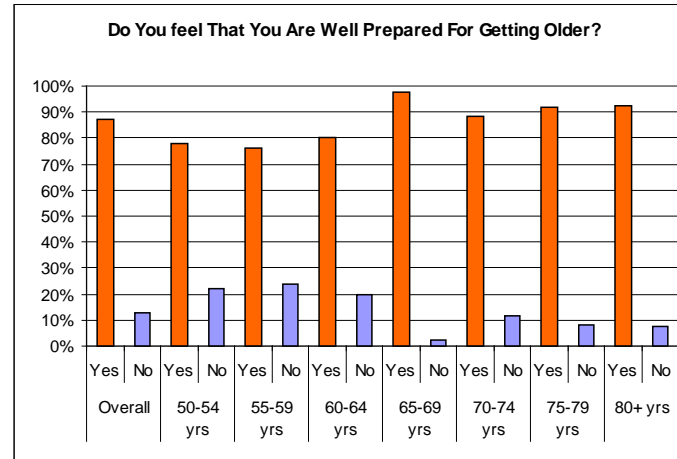
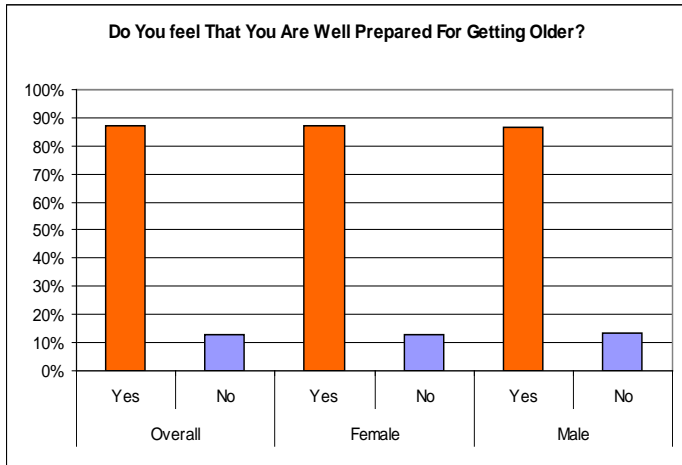
Question 13. What Type Of Housing Would Best Meet Your Needs As You Grow Older?



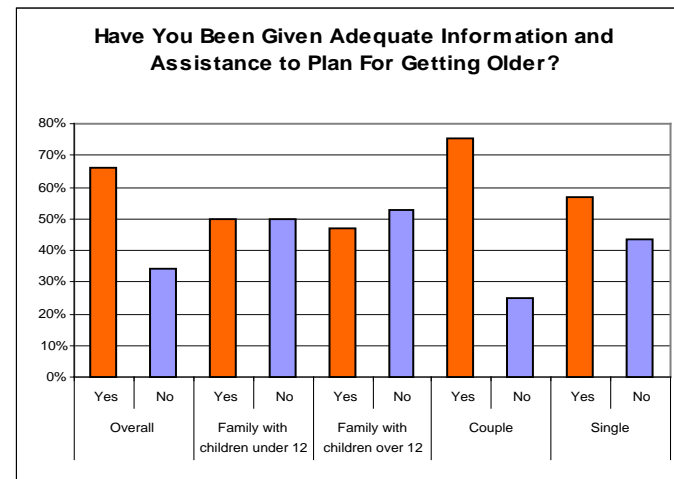
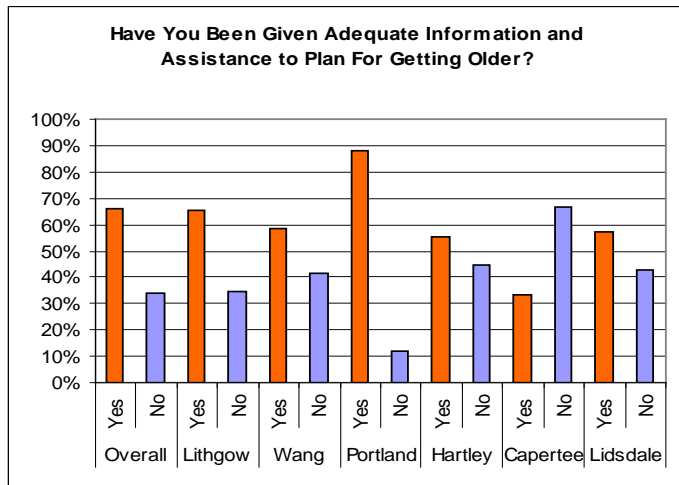
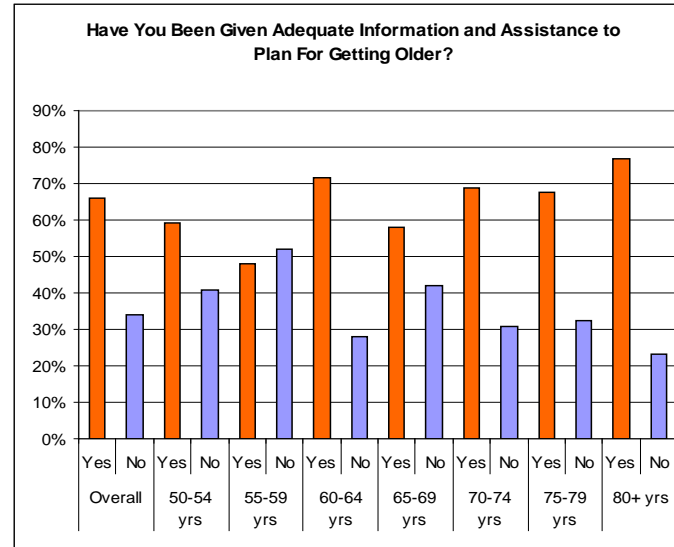
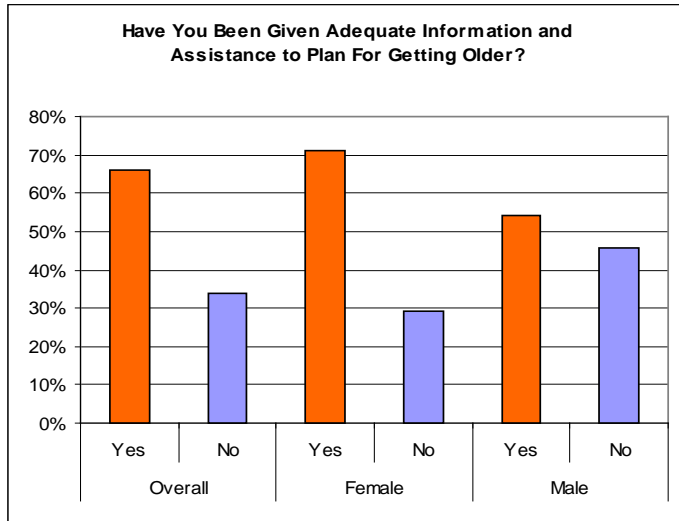
Question 12. What Changes Do You Think Are Needed to Make Your Home Safe, Comfortable And Suitable For You As You Age?

The survey asked people to list what changes they think are needed to make their home safe, comfortable and suitable as they age. The most common responses to this question were: Assistance with gardening; Assistance with cleaning and home maintenance; Improved heating; Relocating to a smaller house

Question 14. Do You Feel You Are Well Prepared For Getting Older?



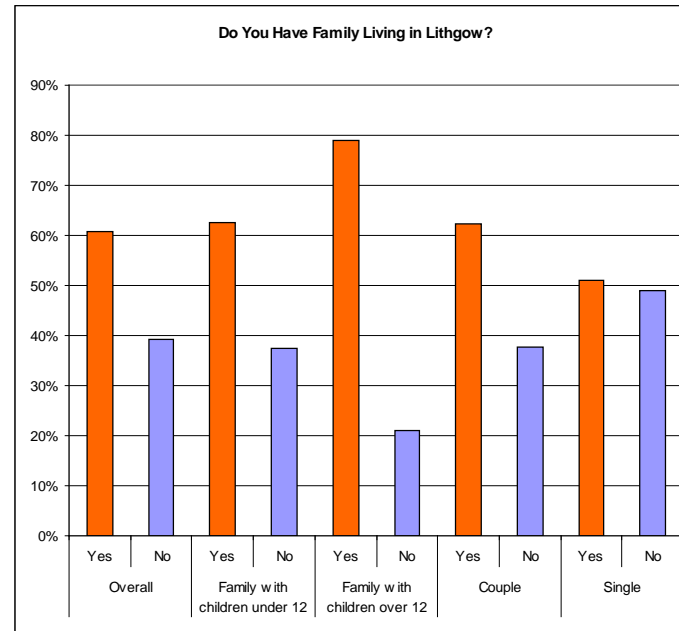
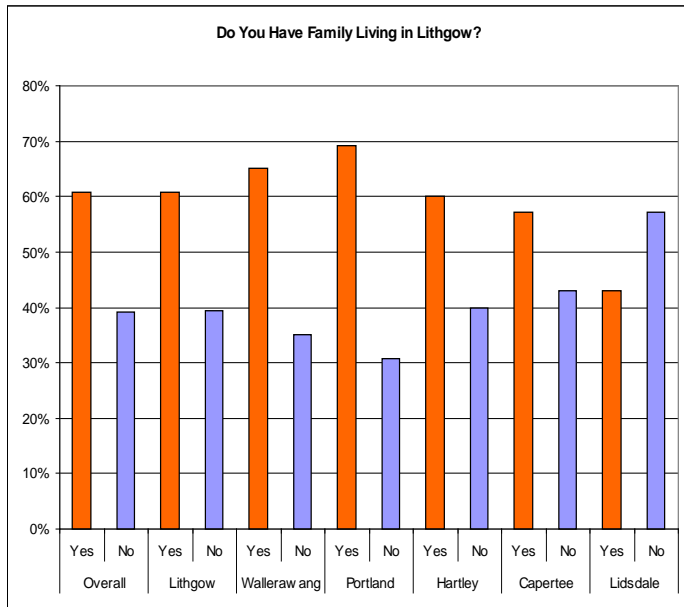
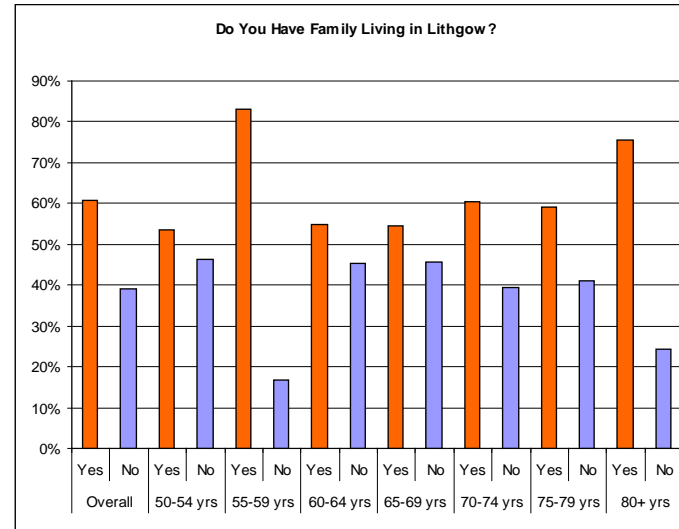
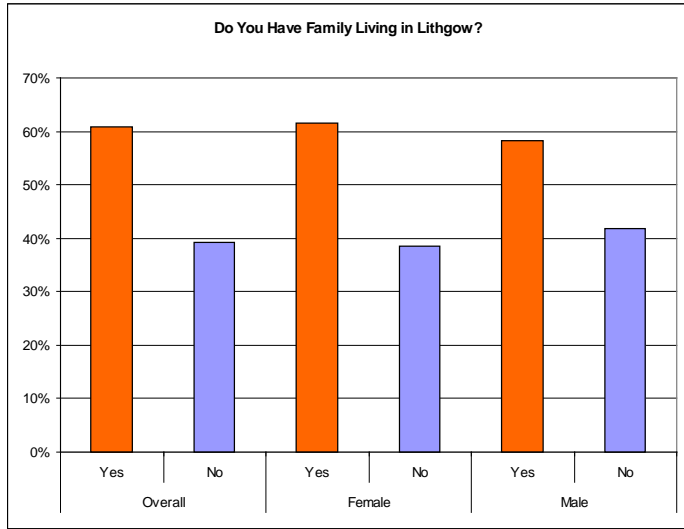
Question 15. Have You Been Given Adequate Information And Assistance To Help You Plan For Getting Older?



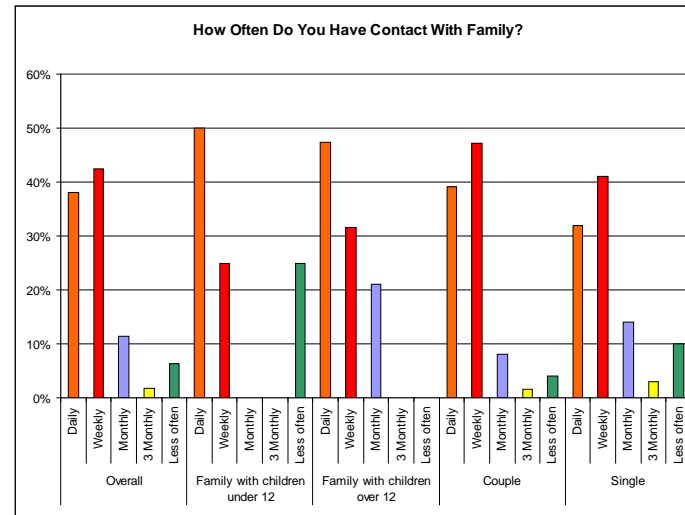
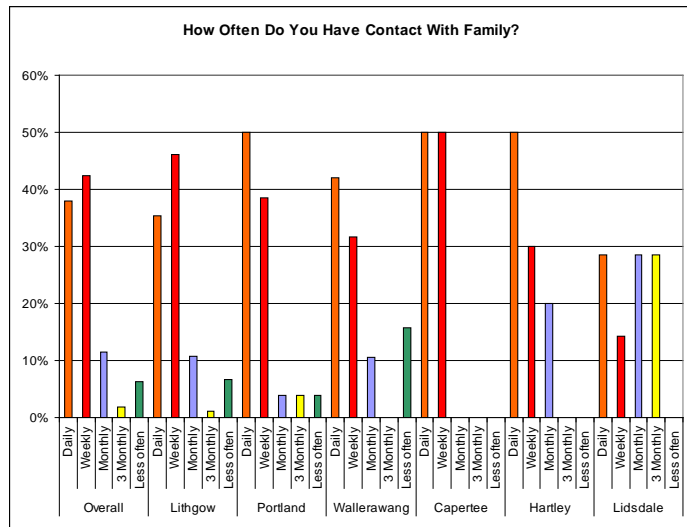
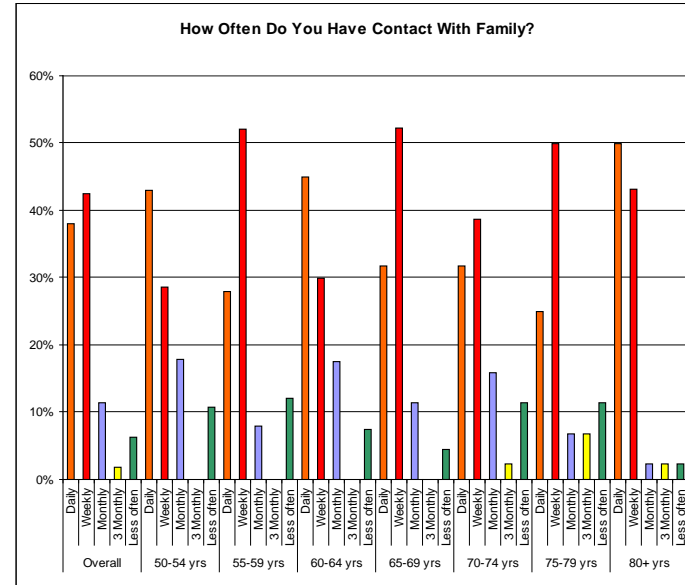
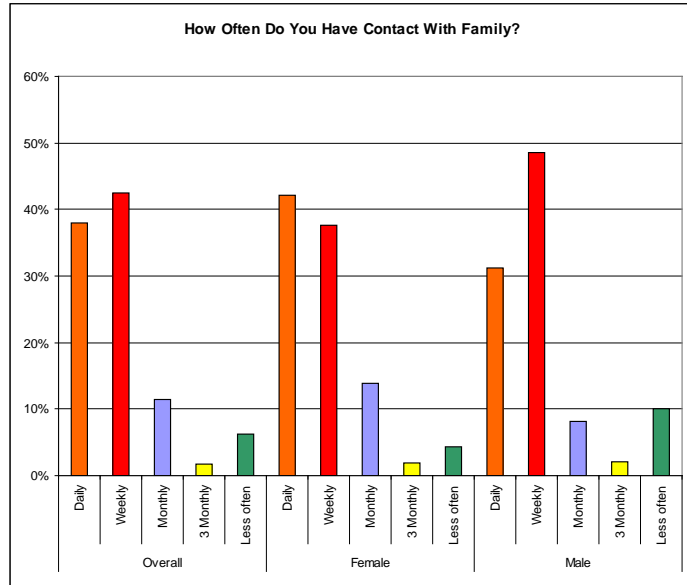
Question 16. What Types Of Things Would Help Or Would Have Helped You To Better Prepare For Getting Older?

The survey asked people to list the types of things that would help or would have helped them to better prepared for getting older. The most common responses to this question were: Better access to and availability of information; Community education and workshops; Recreational and exercise programs; Financial planning

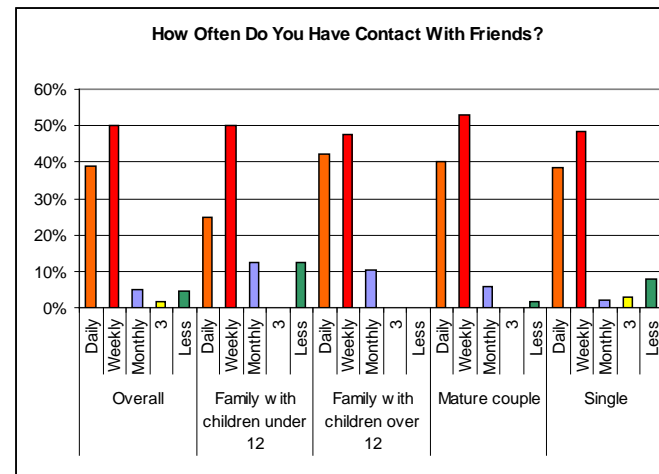
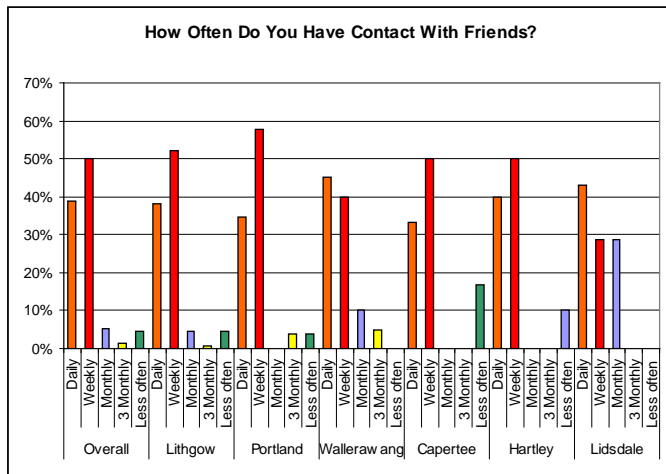
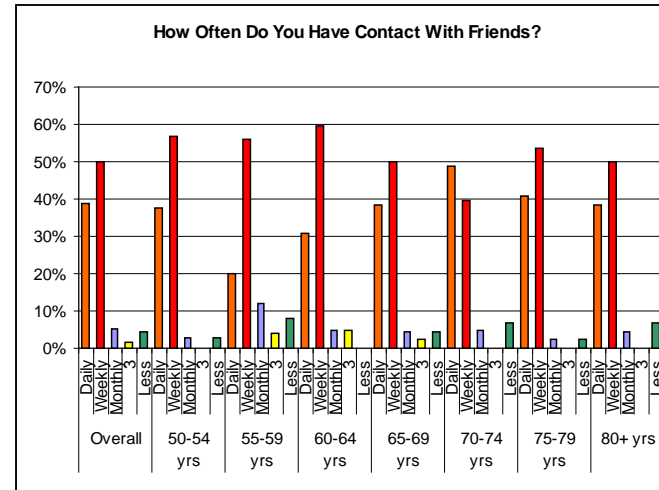
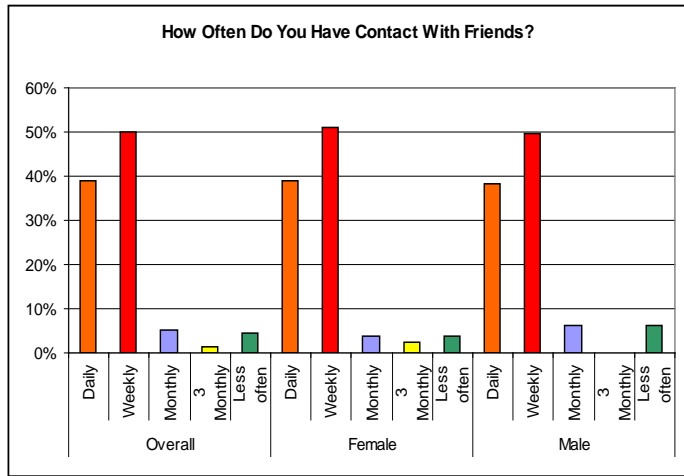
Question 17. Do You Have Family Living In Lithgow LGA?



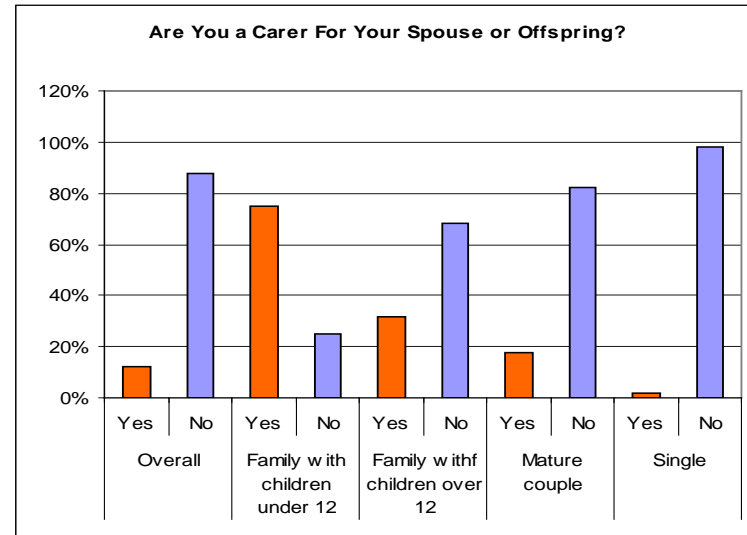
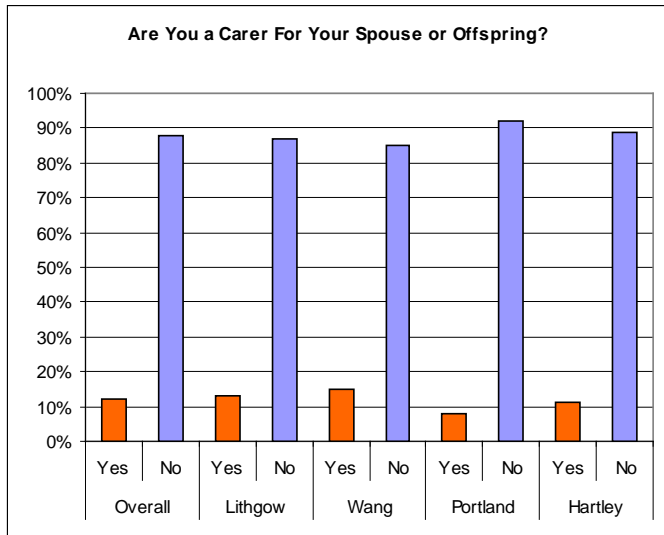
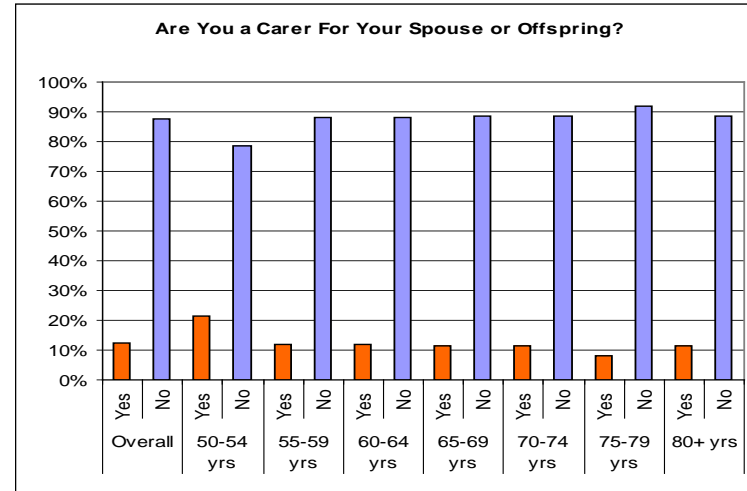
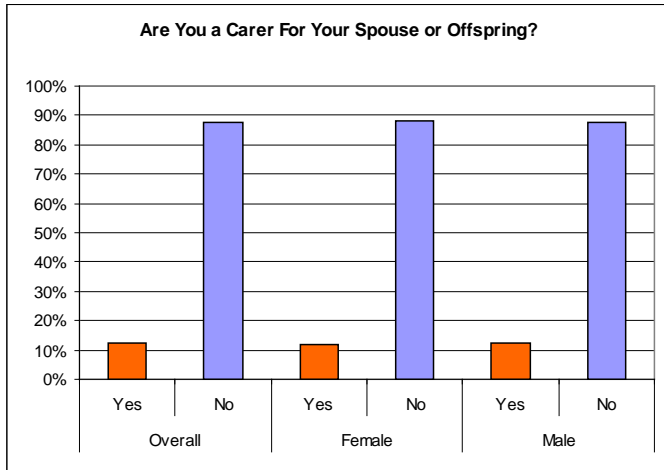
Question 18. How Often Do You Have Contact With Family?



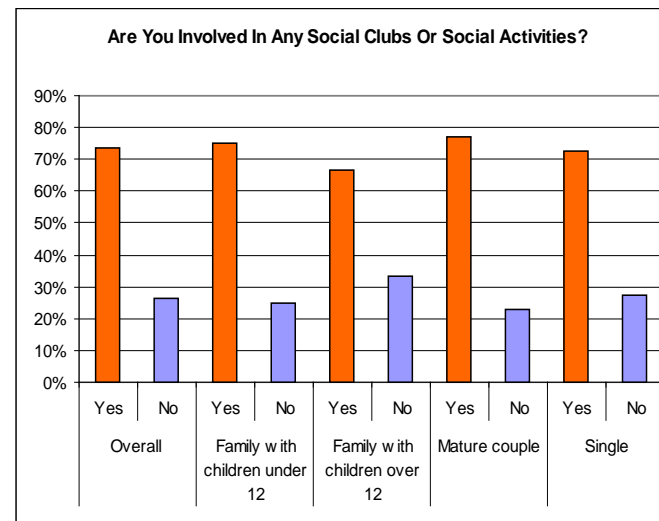
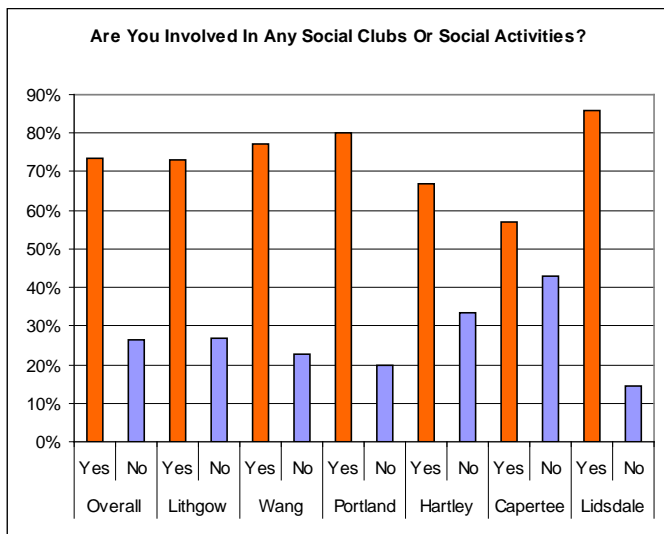
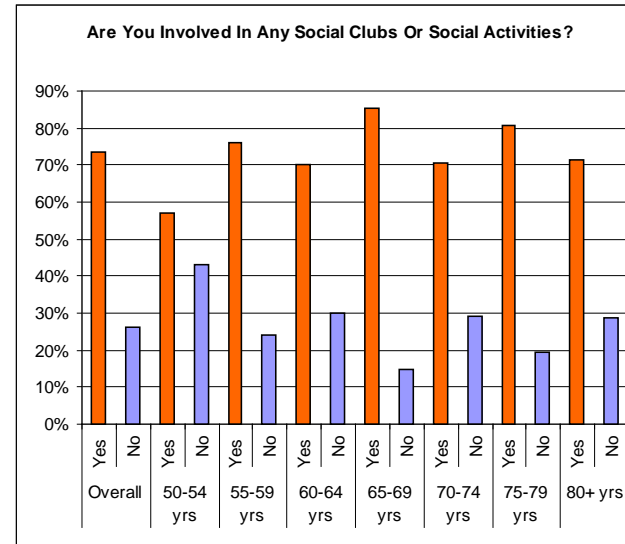
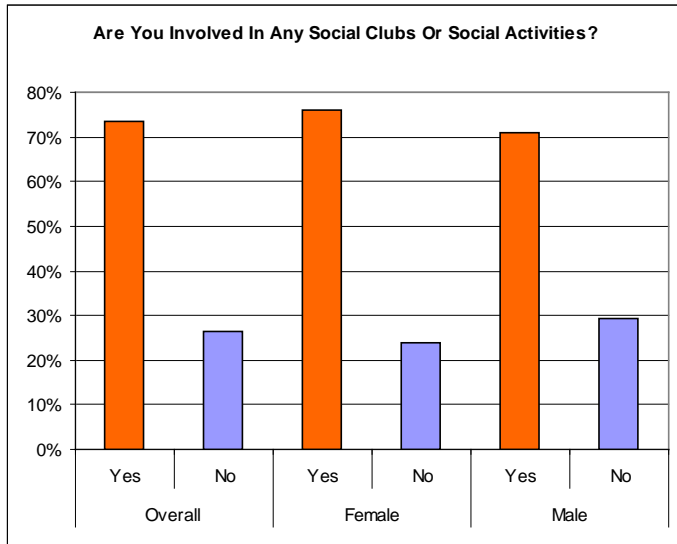
Question 19. How Often Do You Have Contact With Friends?



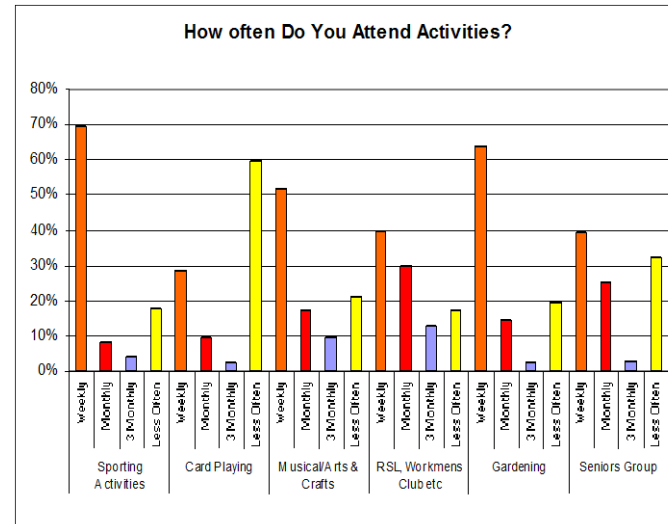
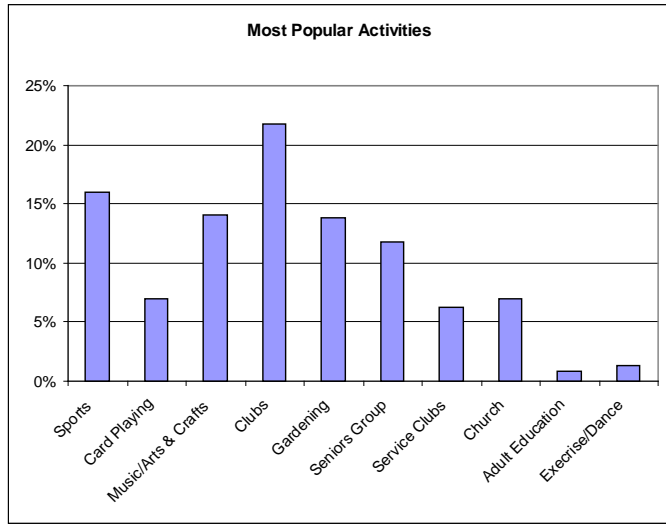
Question 20. Are You A Carer For Your Spouse Or Offspring?



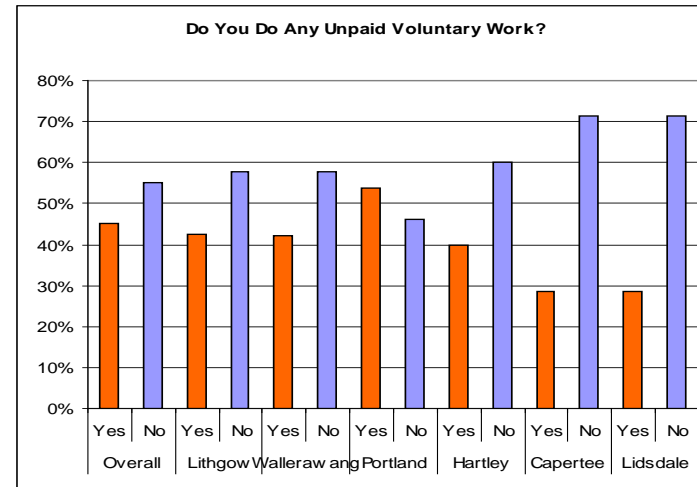
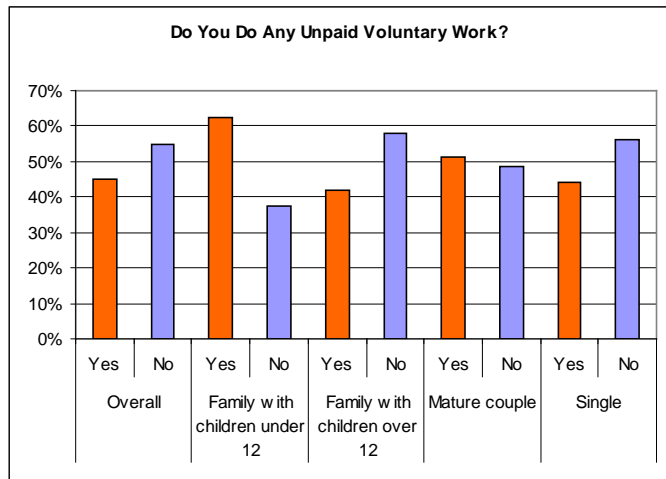
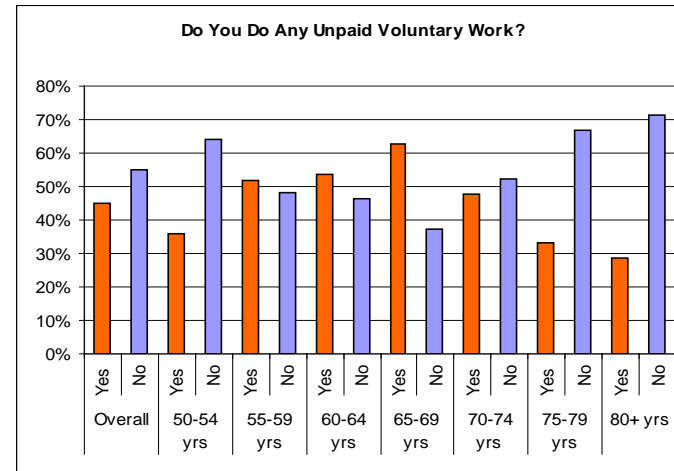
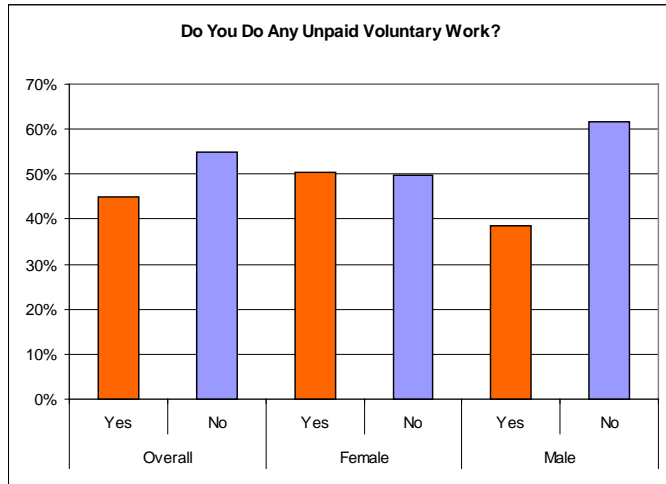
Question 21. Are You Involved In Any Social Clubs Or Social Activities? (If Yes What Type Of Organisation?)

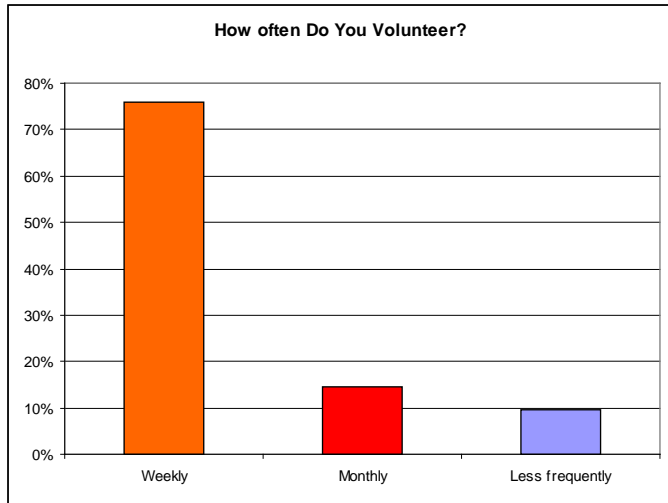


Question 21b. What Activities do you Attend and How often?



Question 22. Do You Do Any Unpaid Voluntary Work and How often?

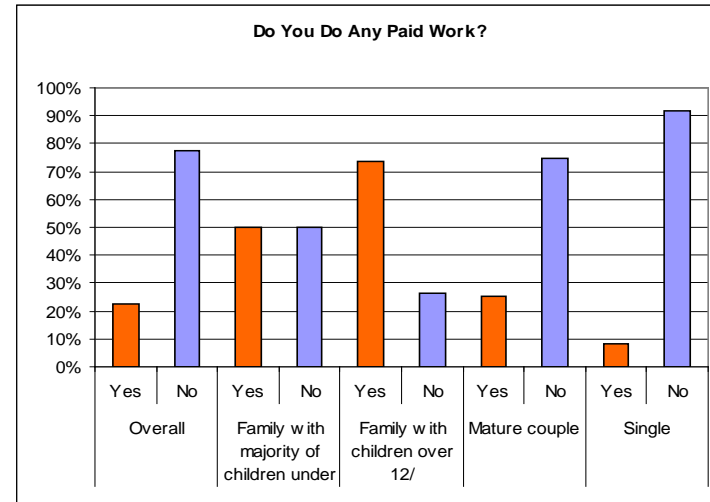
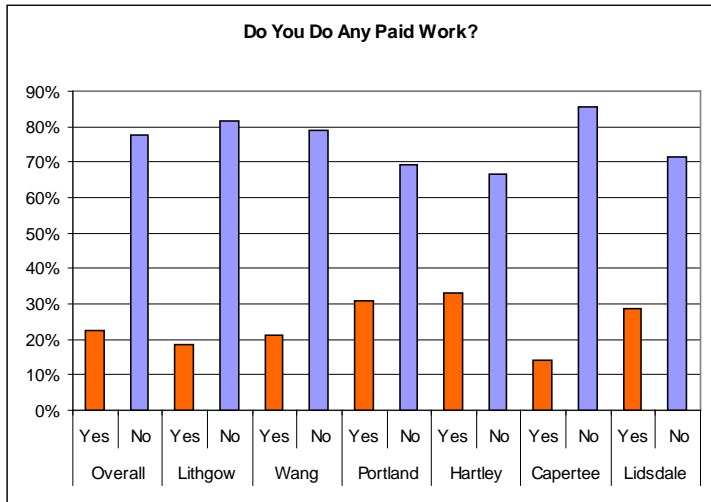
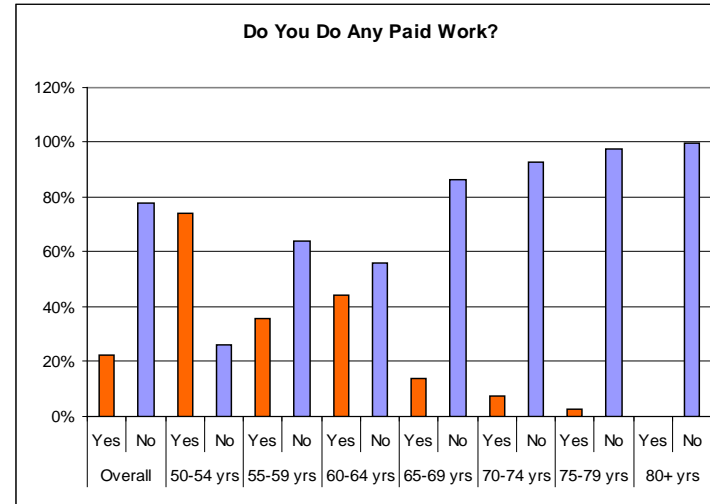
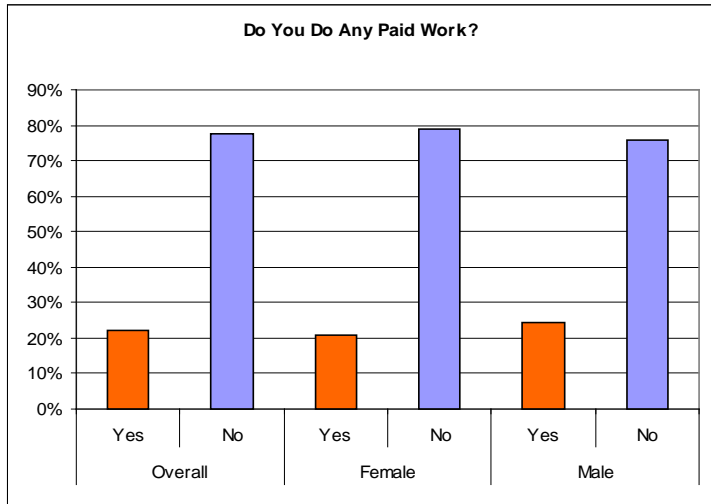


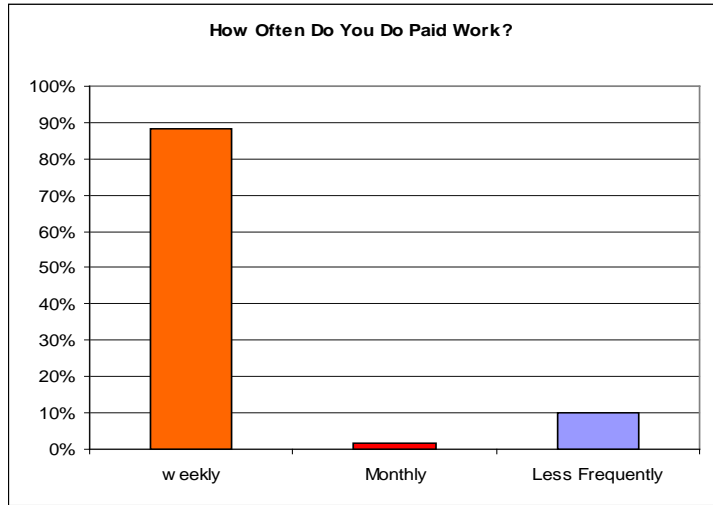


Question 23. What Sort Of Things Have Prevented You From Volunteering Or Having Social Contact?

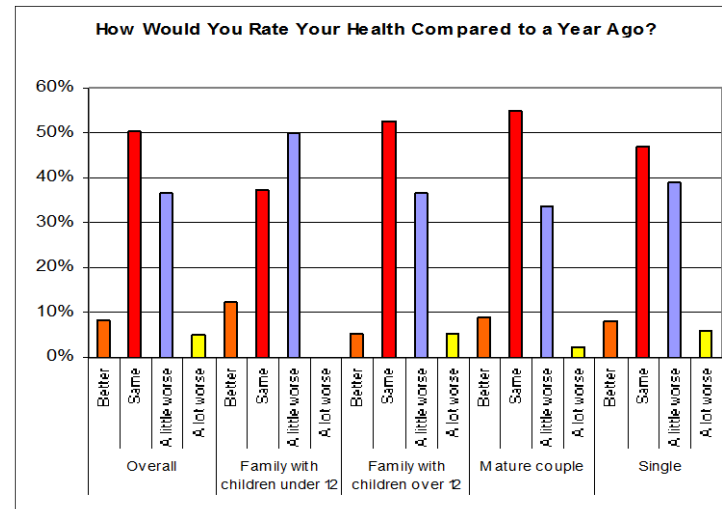
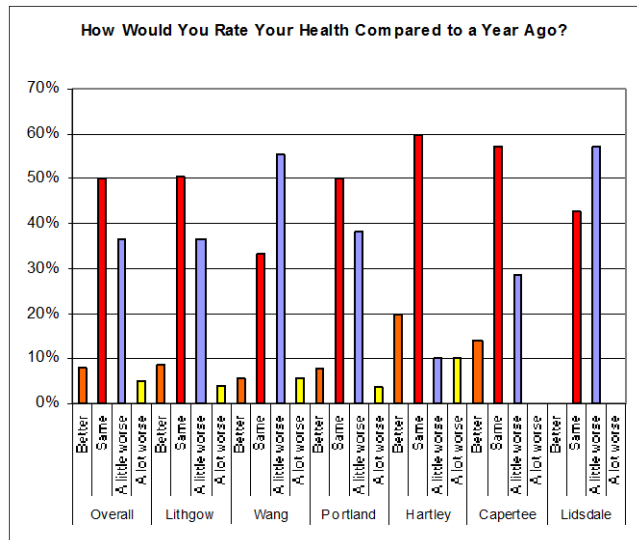
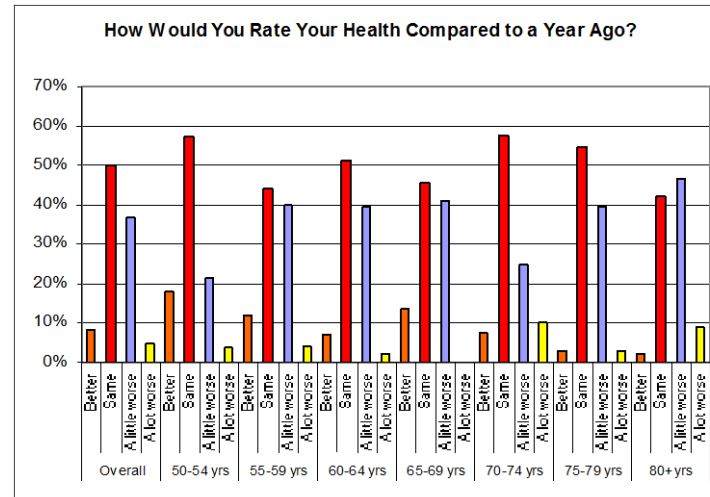
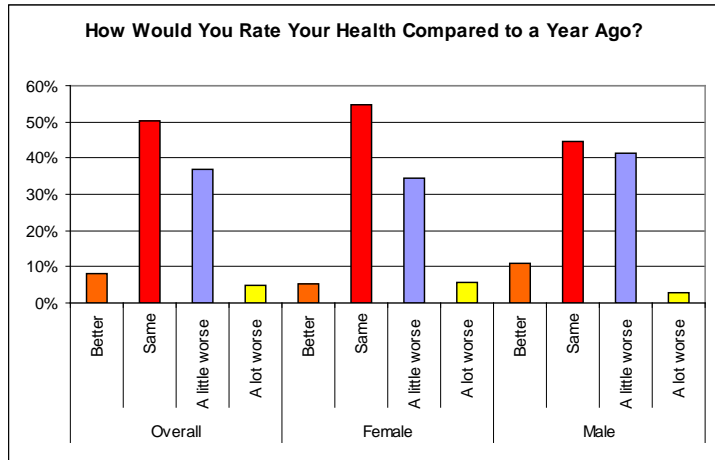
The survey asked people to list the sort of things that prevented them from volunteering or having social contact. The most common responses to this question were: Declining health and ageing general; Still in employment; Other commitments

Question 24. Do You Do Any Paid Work and How Often?

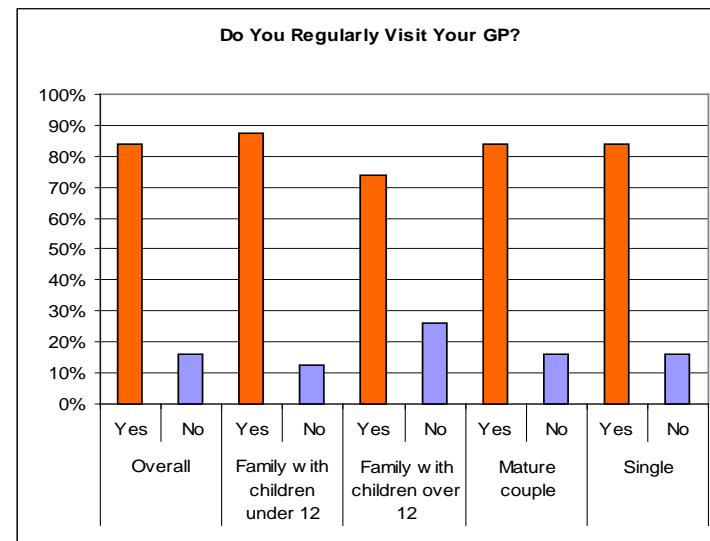
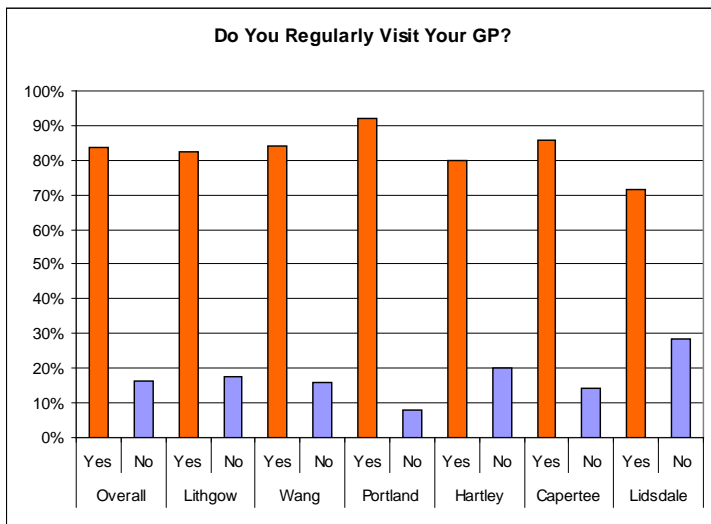
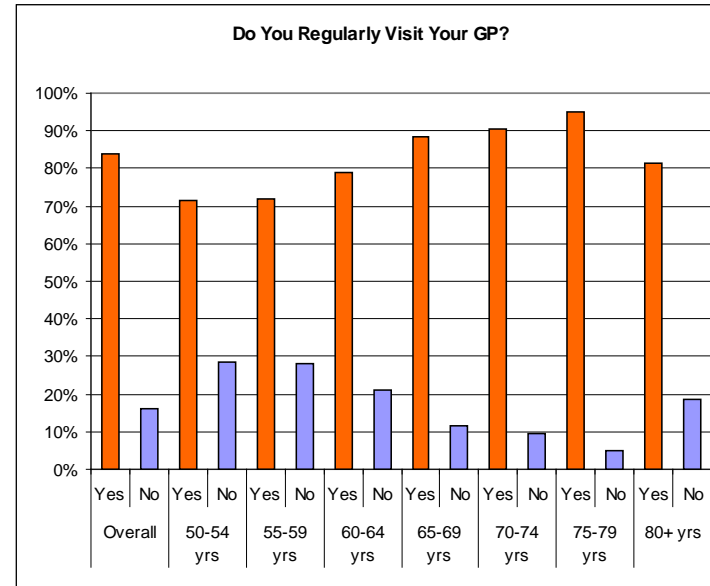
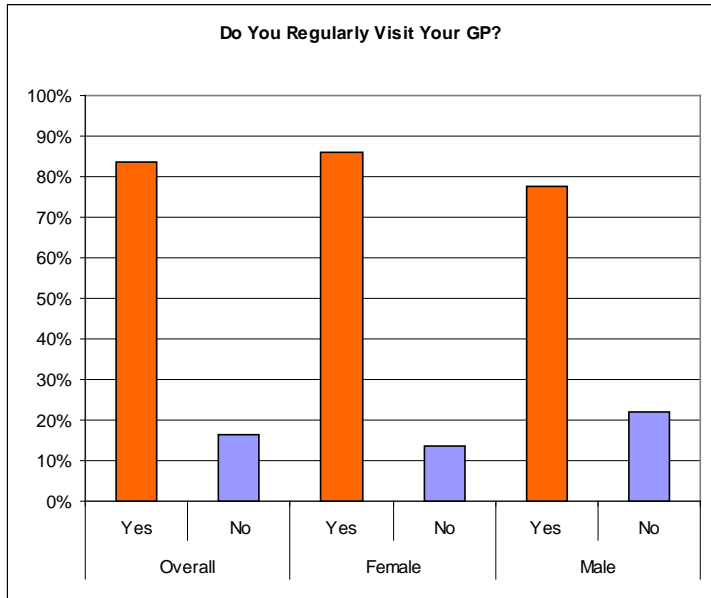




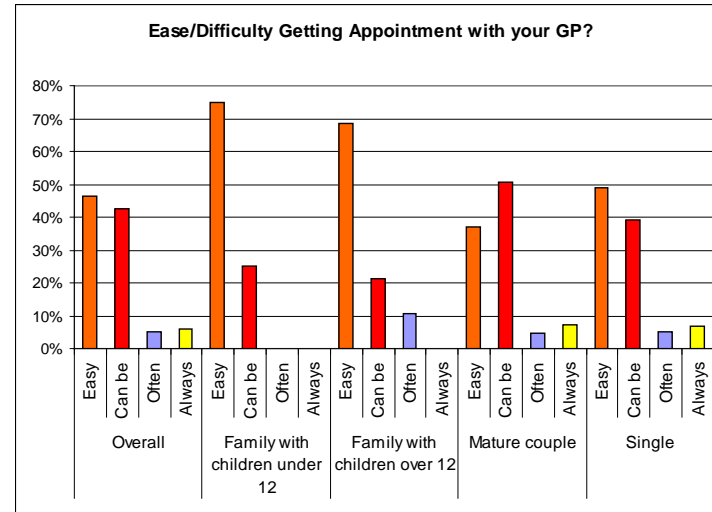
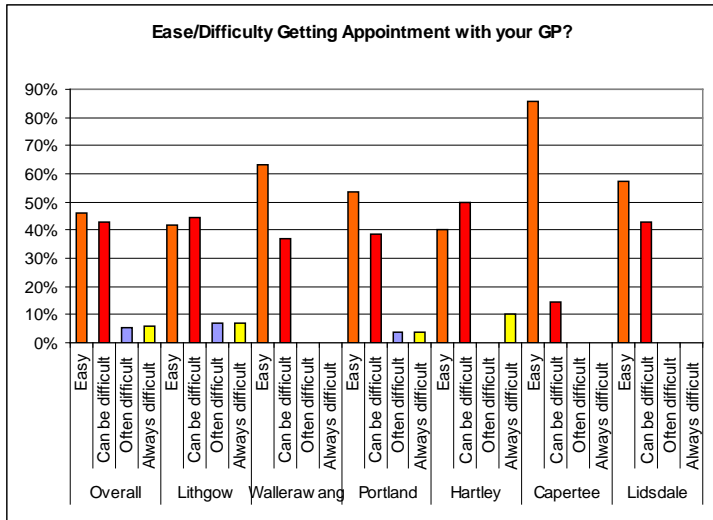
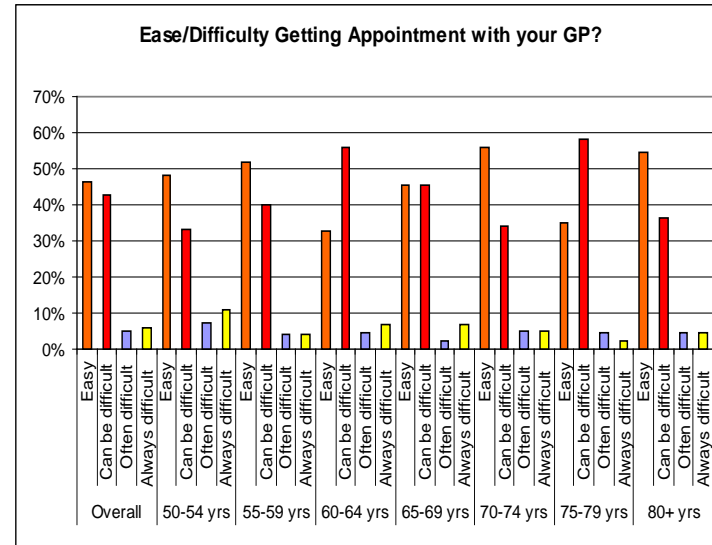
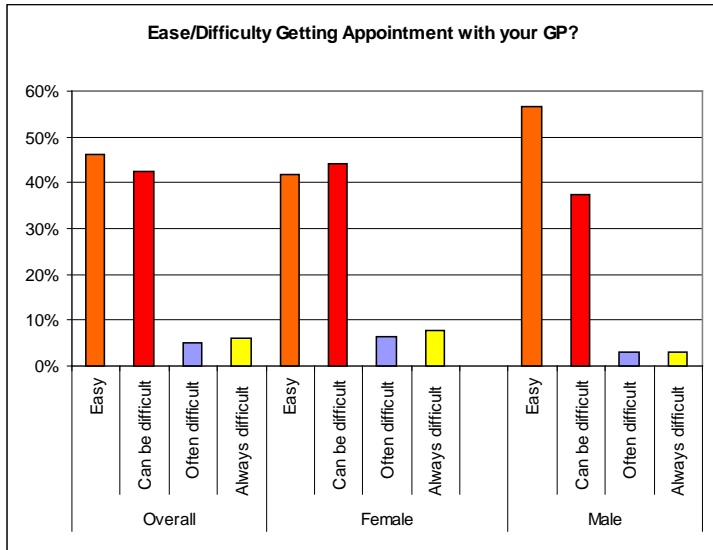
Question 25. How Would You Rate Your Health Compared To A Year Ago?



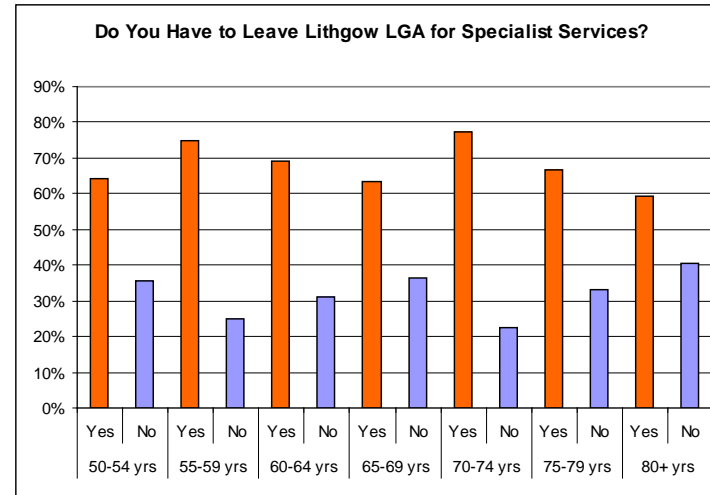
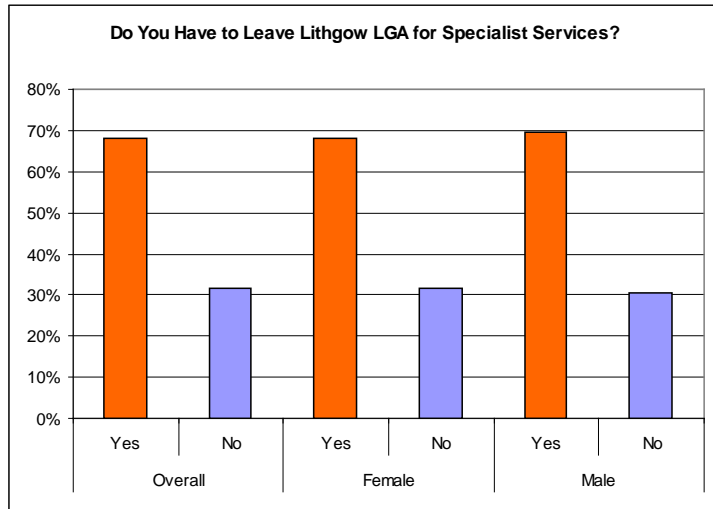
Question 26. Do You Regularly Visit Your GP?



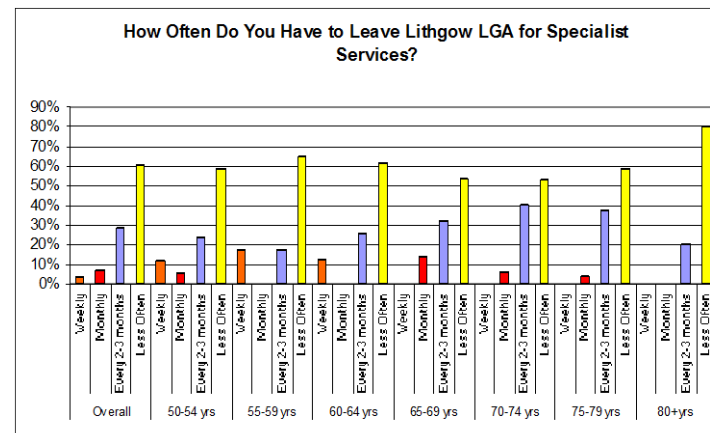
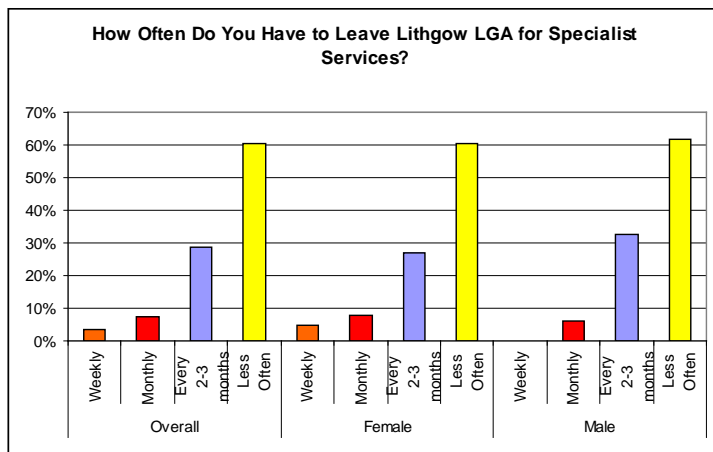
Question 27. How Easy/Difficult Is It To Get An Appointment With Your GP When You Need One?



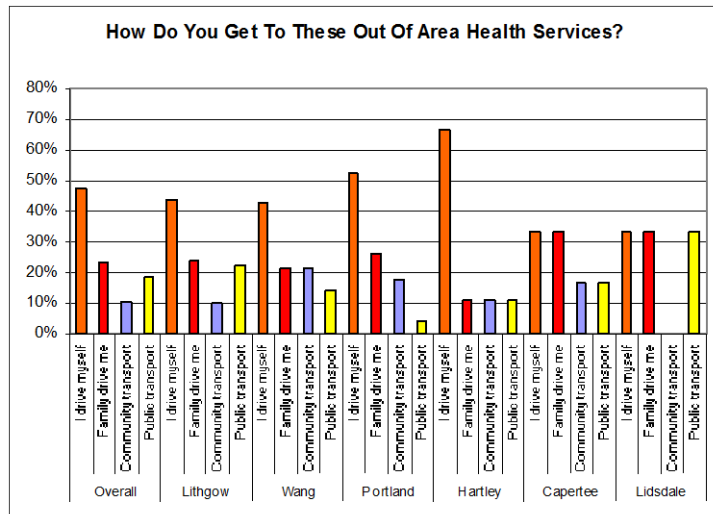
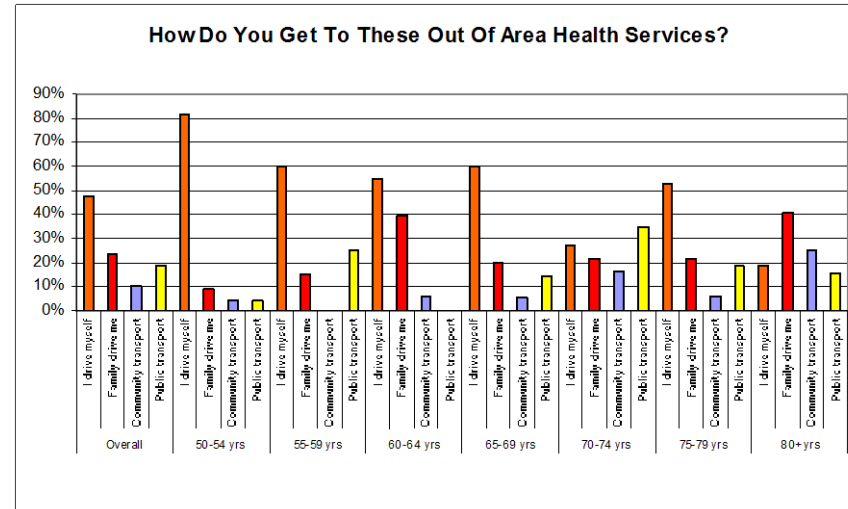
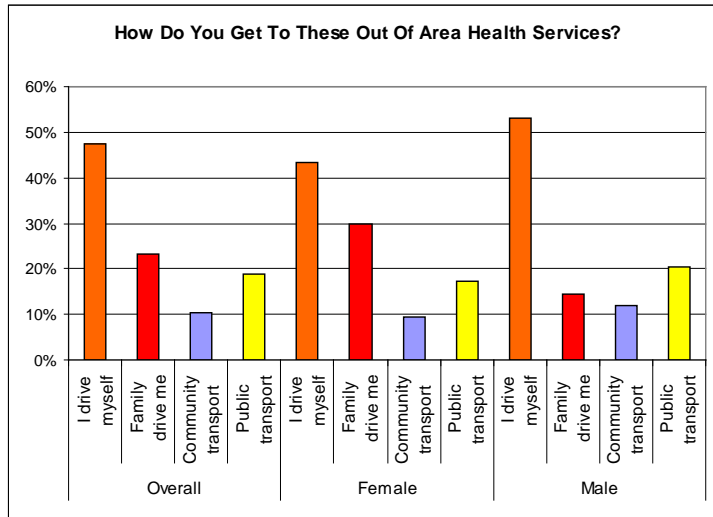
Question 28. Do You Have To Leave Lithgow LGA For Specialist Services?



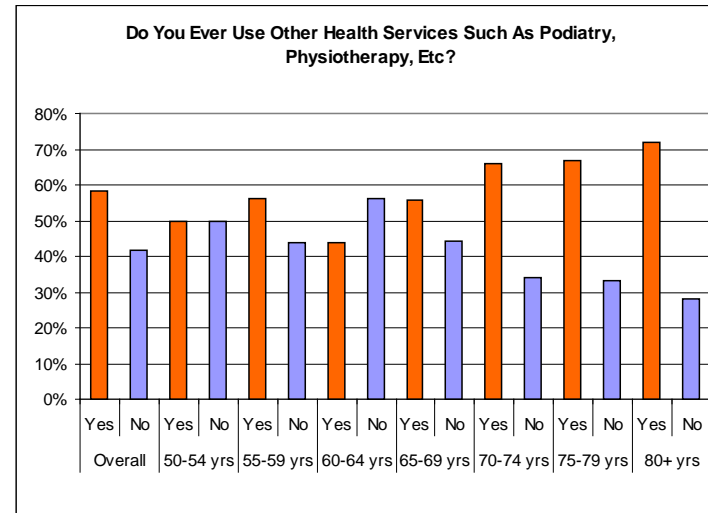
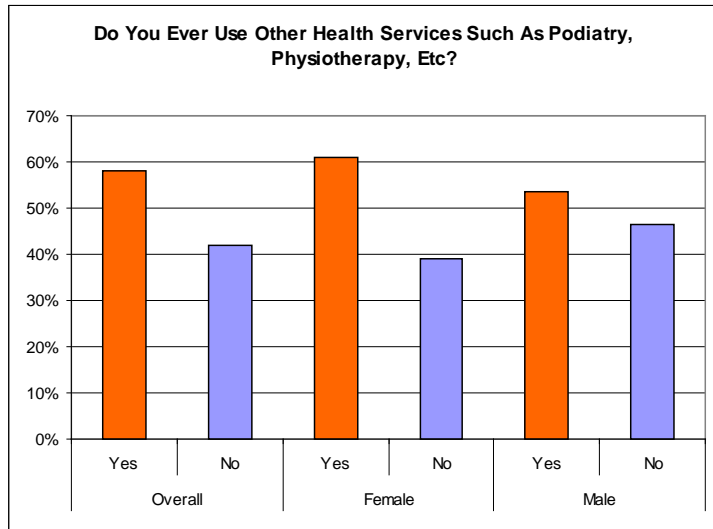
Question 29. How Often Do You Have To Leave Lithgow LGA For Specialist Services?



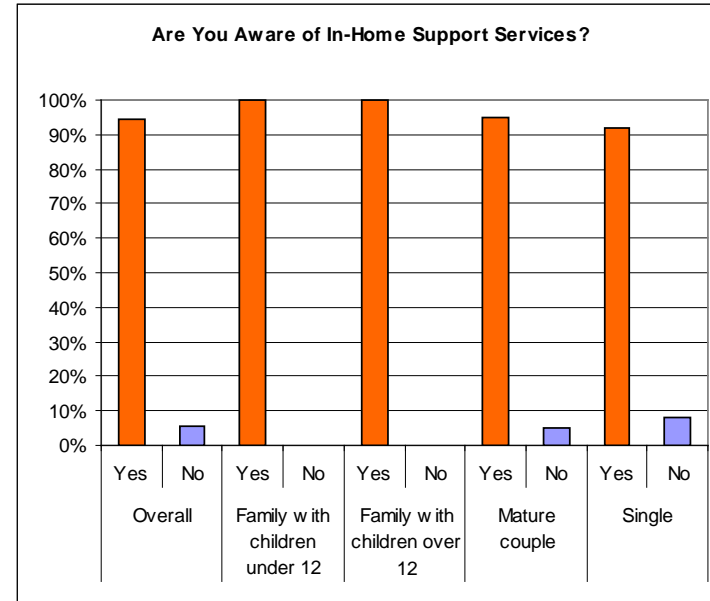
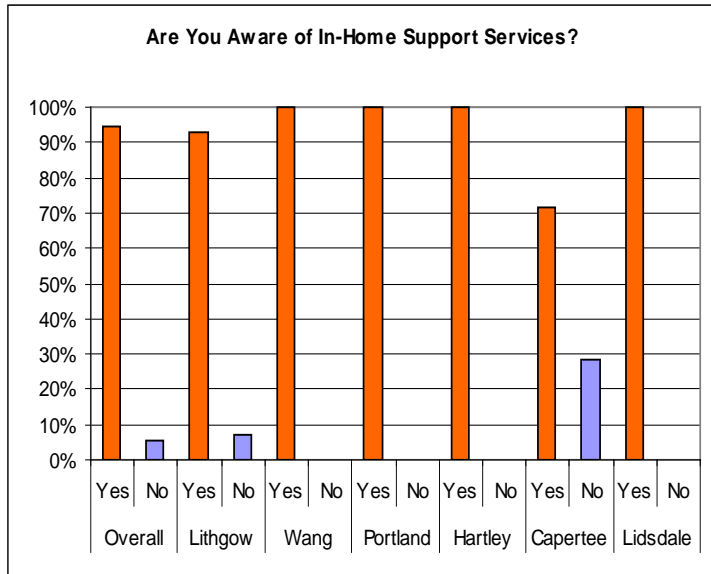
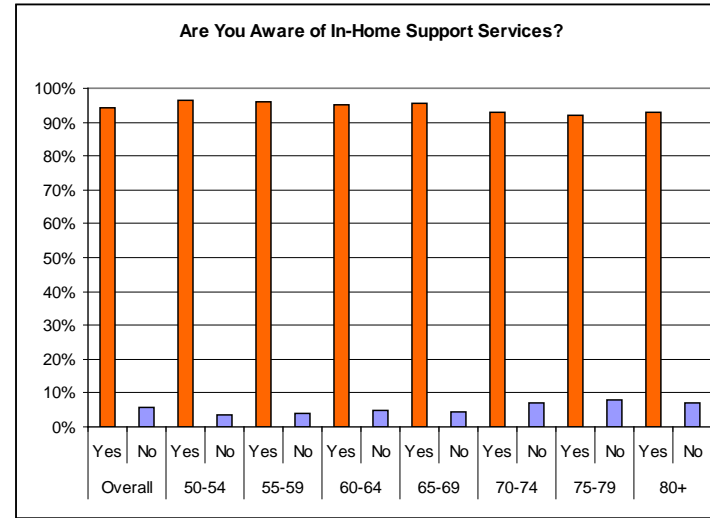
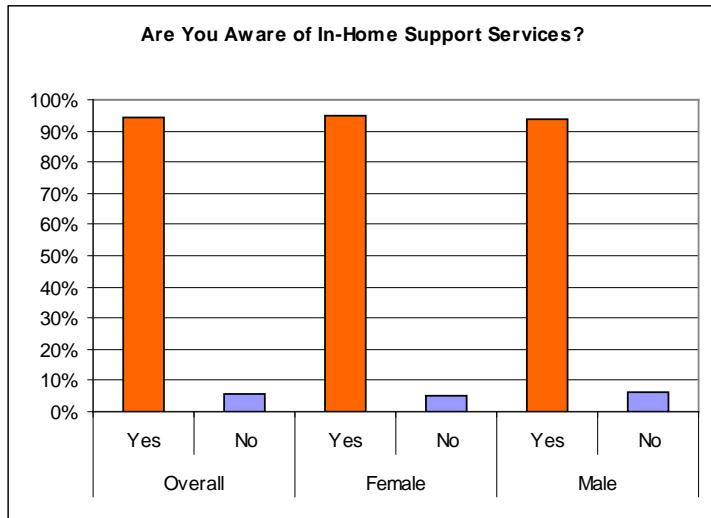
Question 30. How Do You Get To These Out Of Area Services?



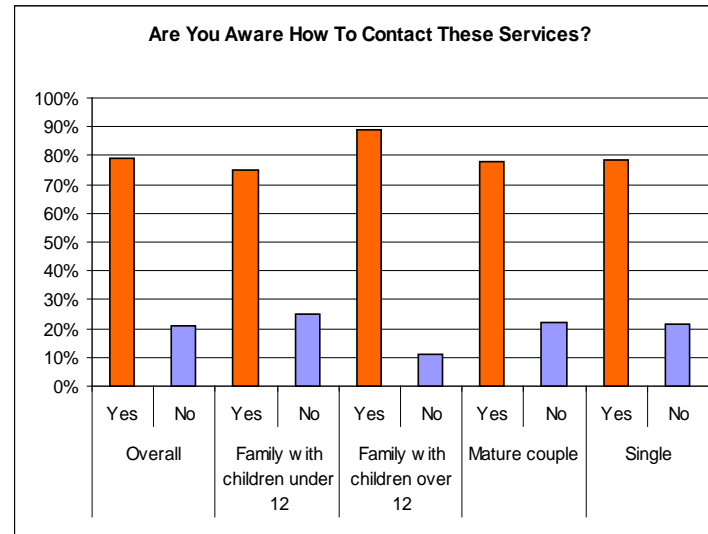
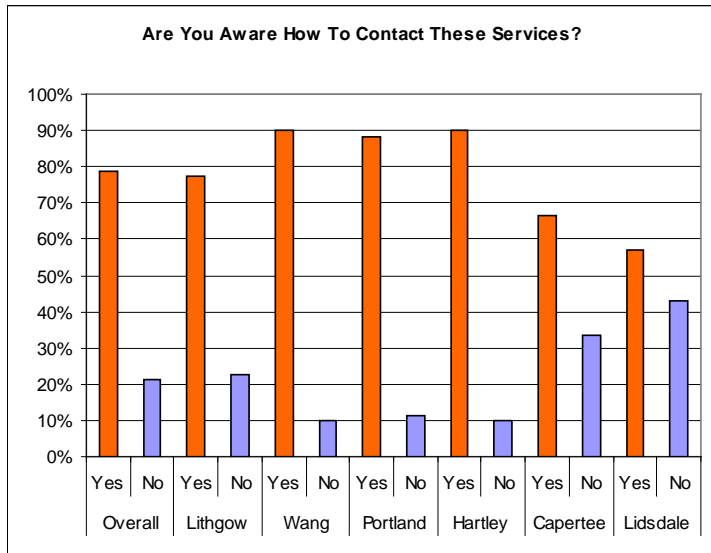
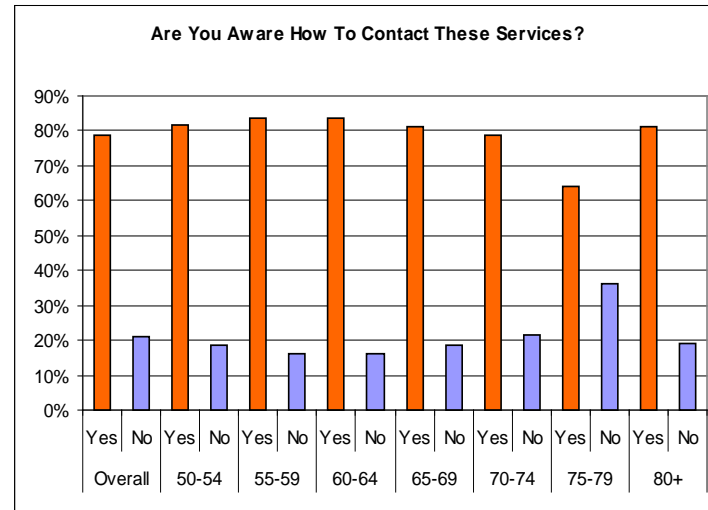
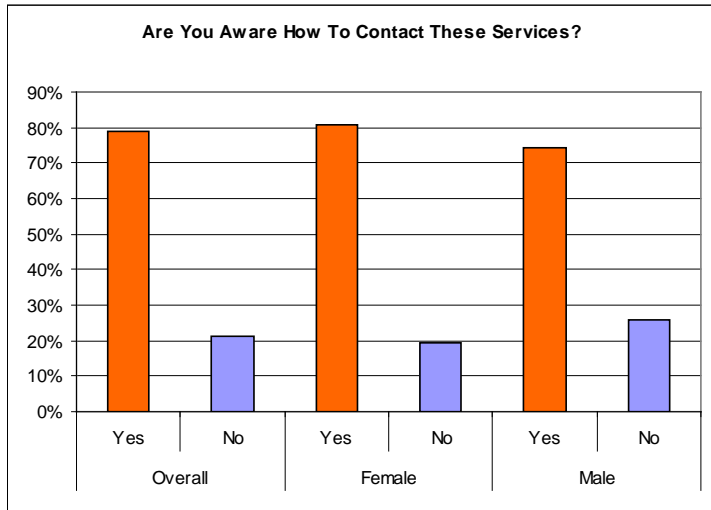
Question 31. Do You Ever Use Other Health Services Such As Podiatry, Physiotherapy, Etc?



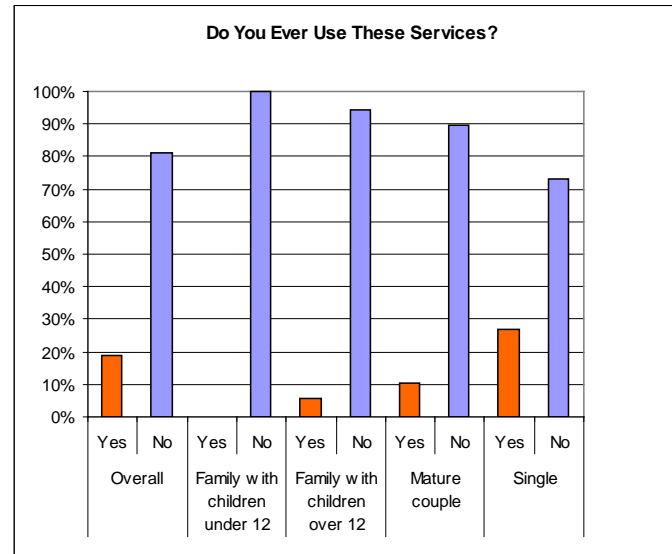
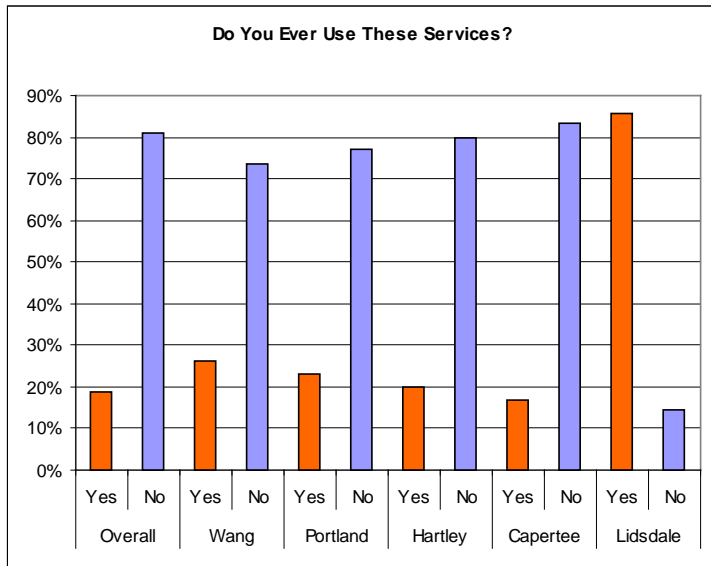
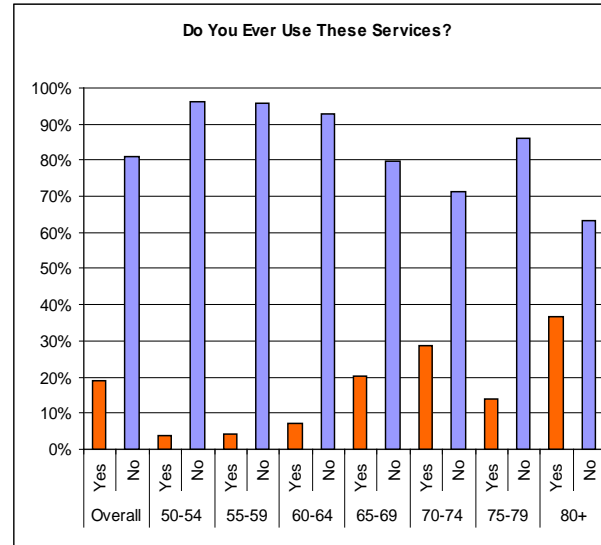
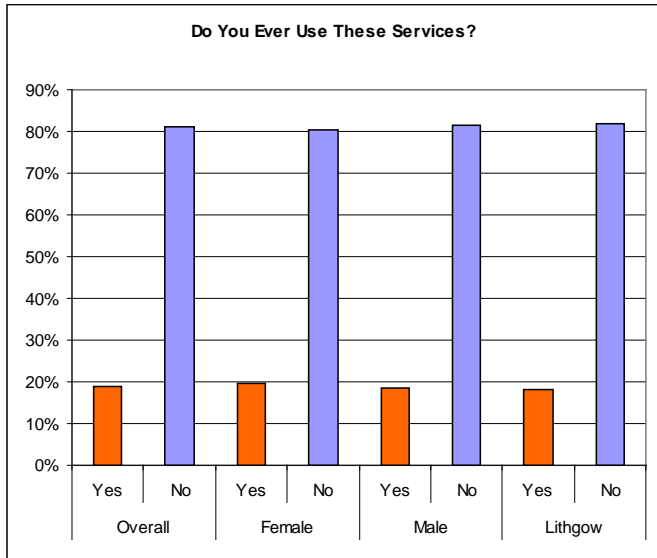
Question 32. Are You Aware of In-Home Support Services?



Question 33. Are You Aware Of How To Contact These Services?



Question 34. Do You Ever Use These Services?



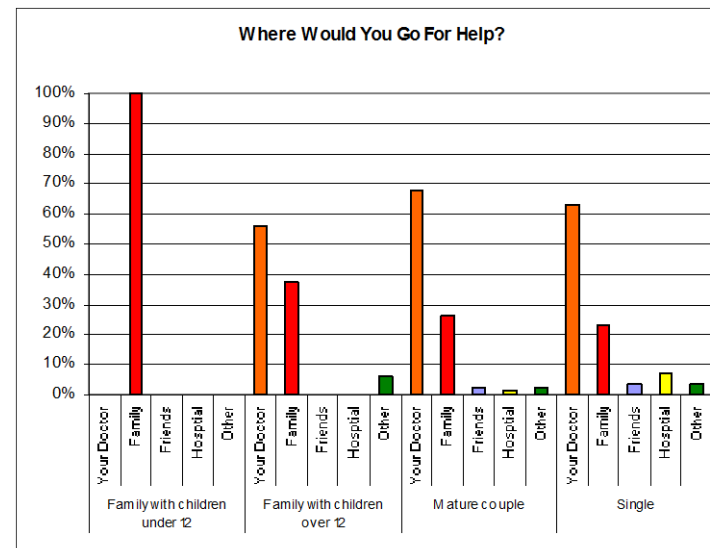
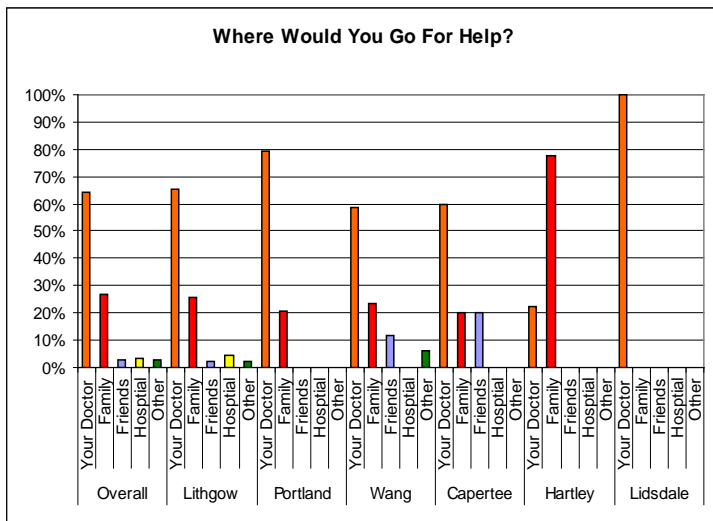
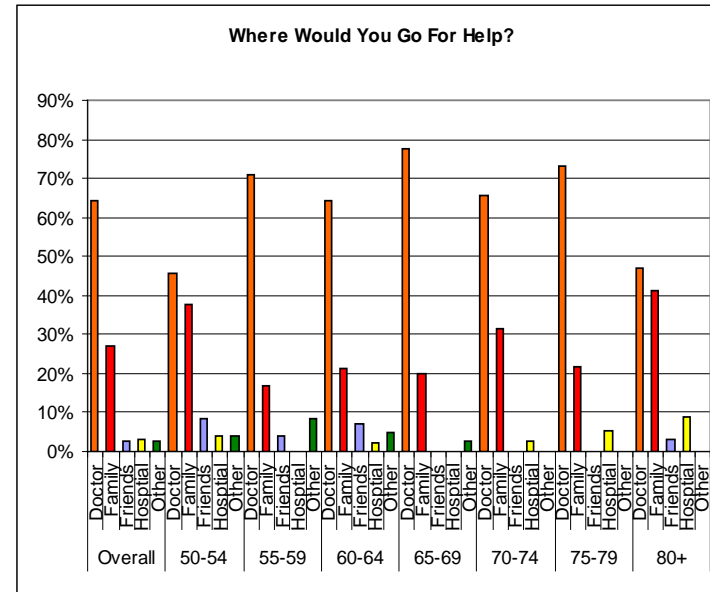
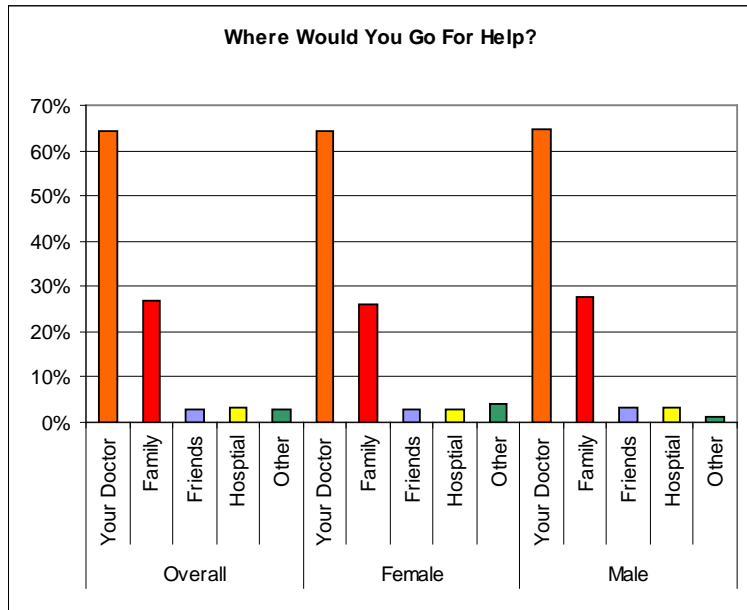
Question 35. List The In Home Support Services You Use

The survey asked people to list the in home support services they currently use. The most common responses to this question were: Community transport; Meals on wheels; Homecare

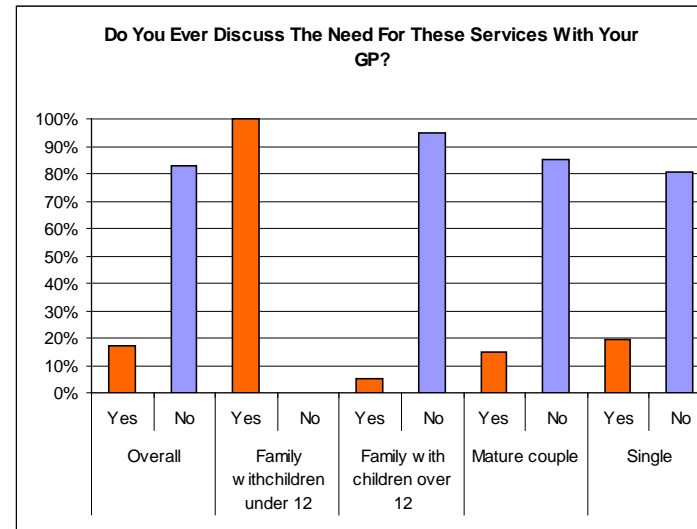
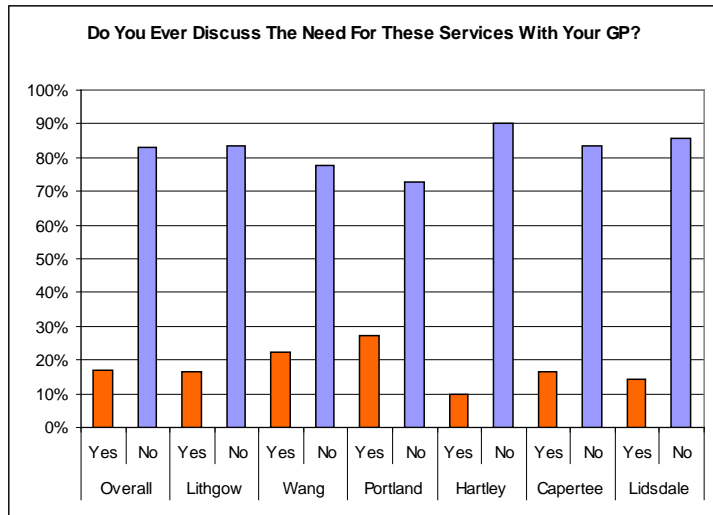
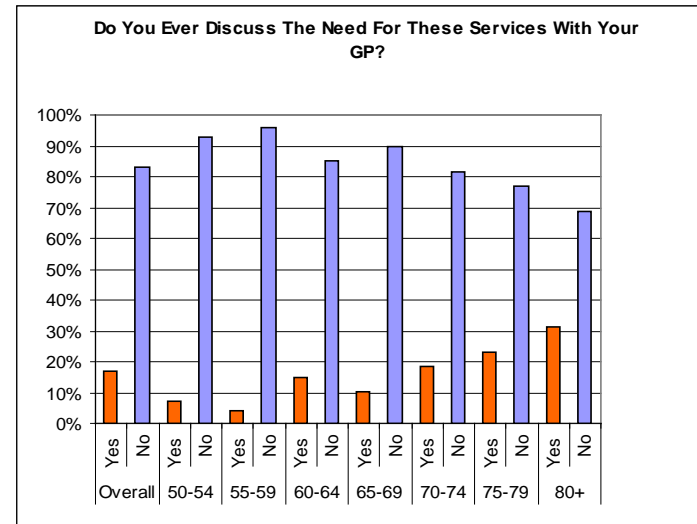
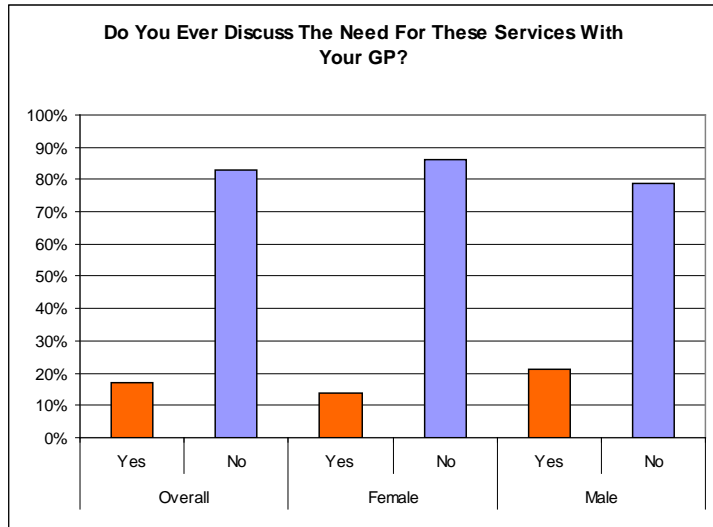
Question 36. List The Services You Think You Will Need As You Get Older

The survey asked people to list the services they think they will need as they get older. The most common responses to this question were: Community transport; Meals on wheels; Assistance with home maintenance; Medical assistance

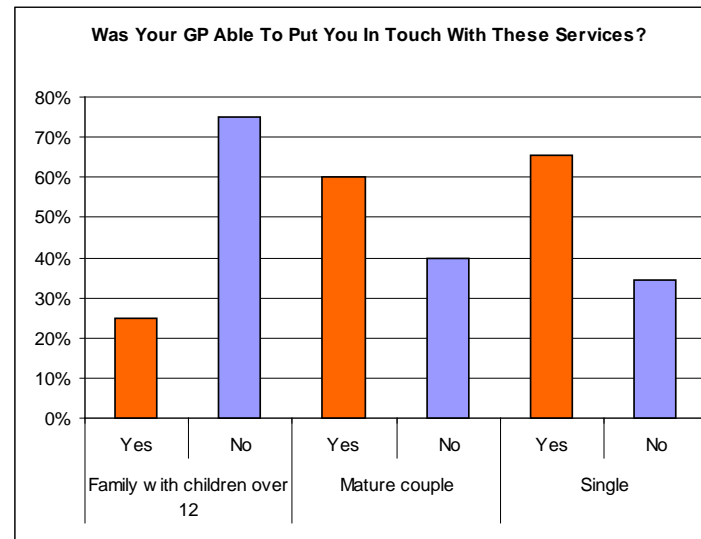
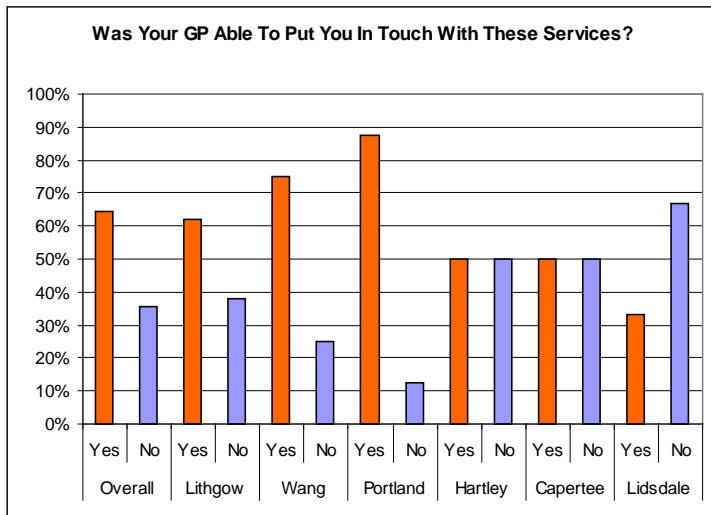
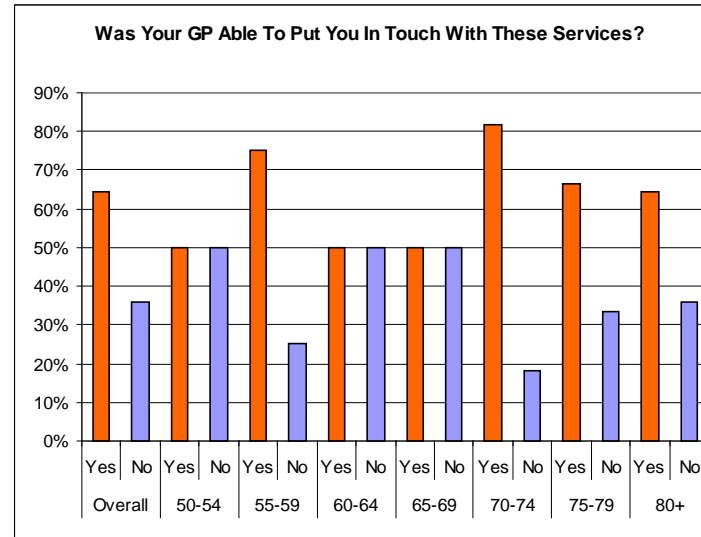
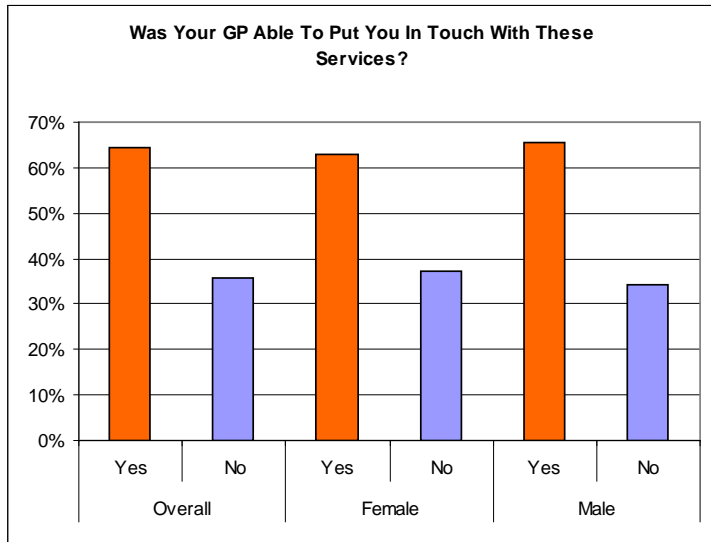
Question 37. If You Or Your Partner Can No Longer Manage At Home Due To Ill Health Or Frailty, Where Would You Go For Help?



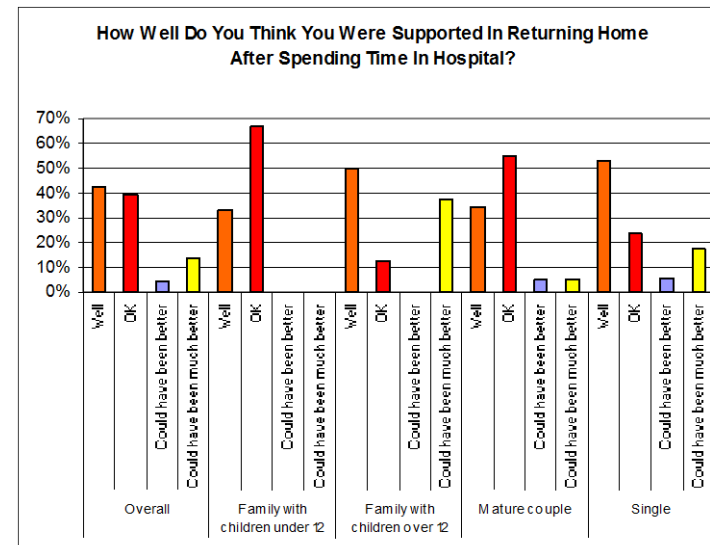
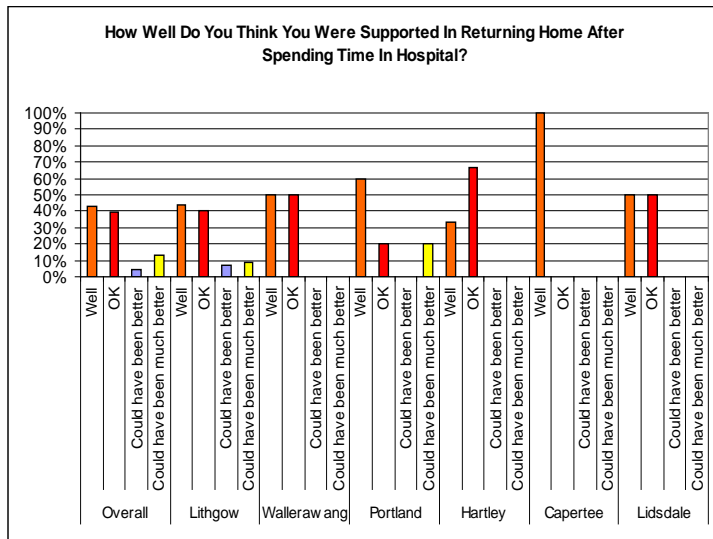
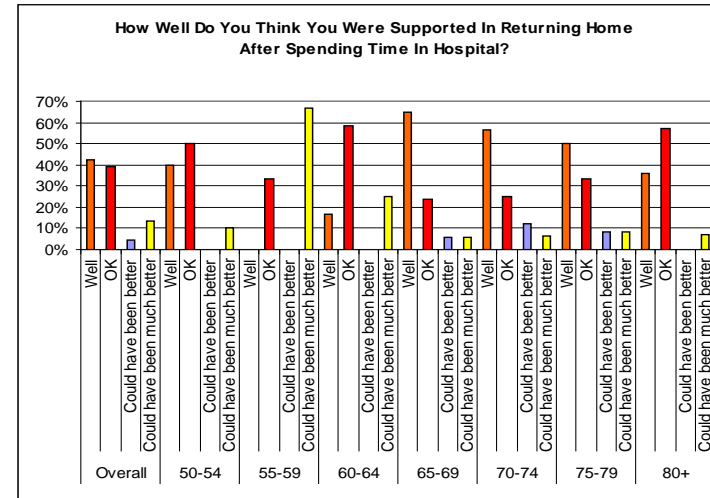
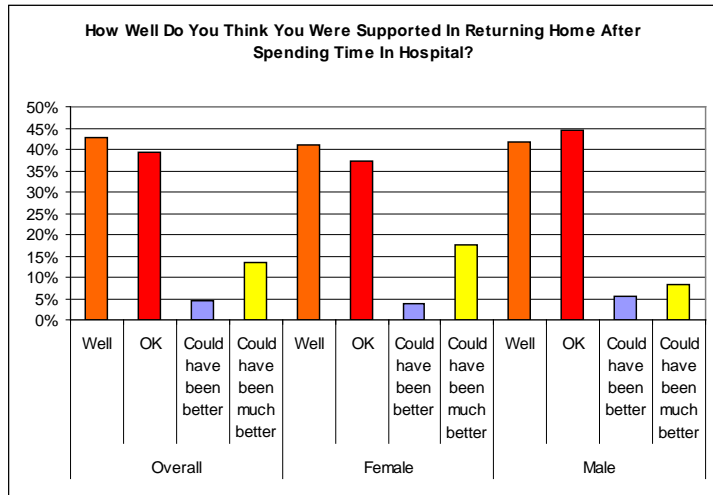
Question 38. Do You Ever Discuss Your Need For These Services With Your GP?



Question 39. Was Your GP Able To Put You In Touch With These Services?



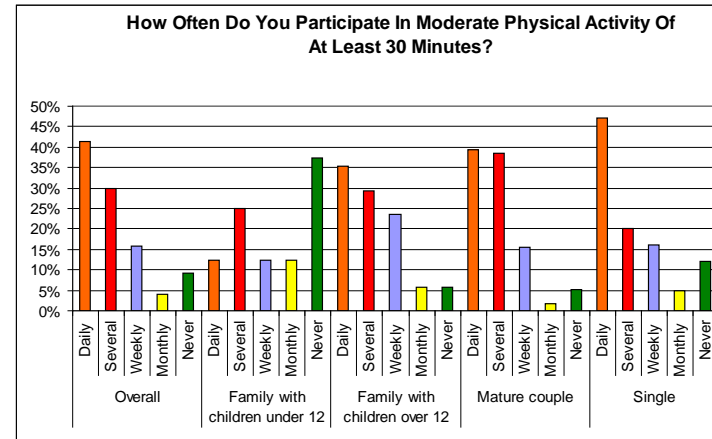
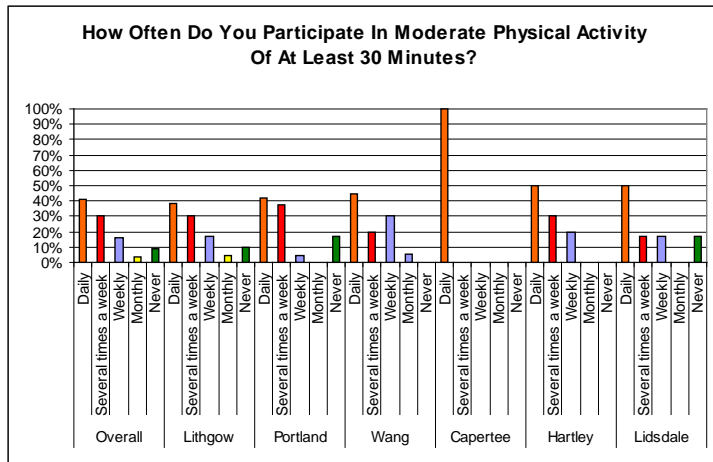
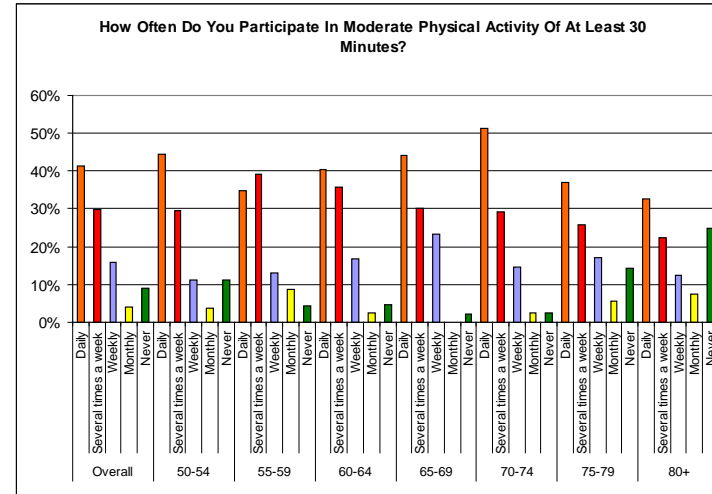
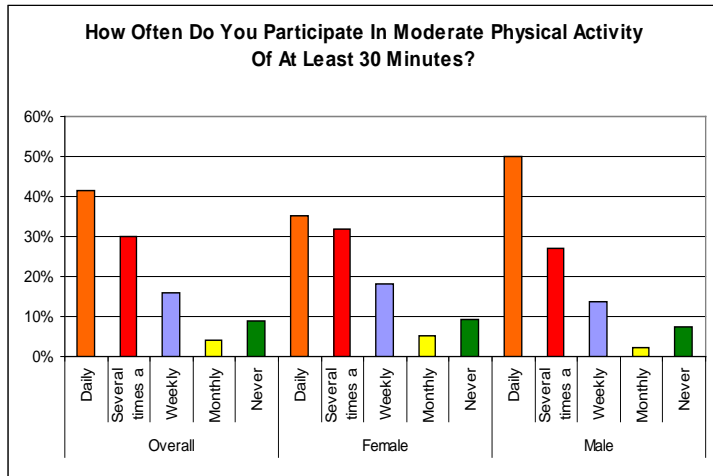
Question 40. How Well Do You Think You Were Supported In Returning Home After Spending Time In Hospital?



Question 41. What Type Of Services Would Have Helped You To Return Home?

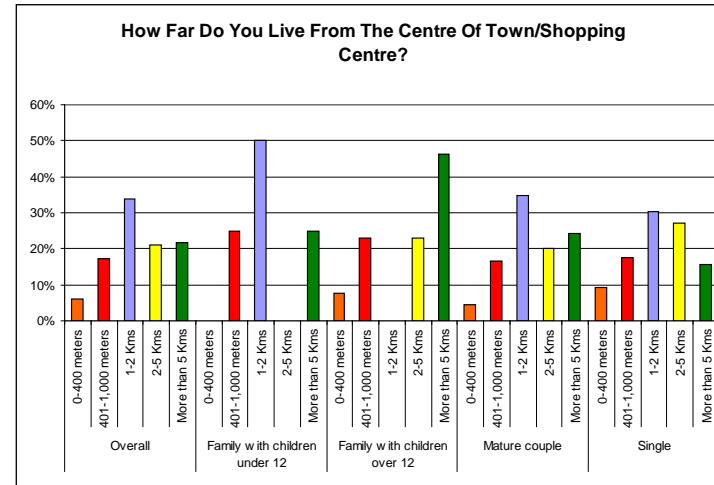
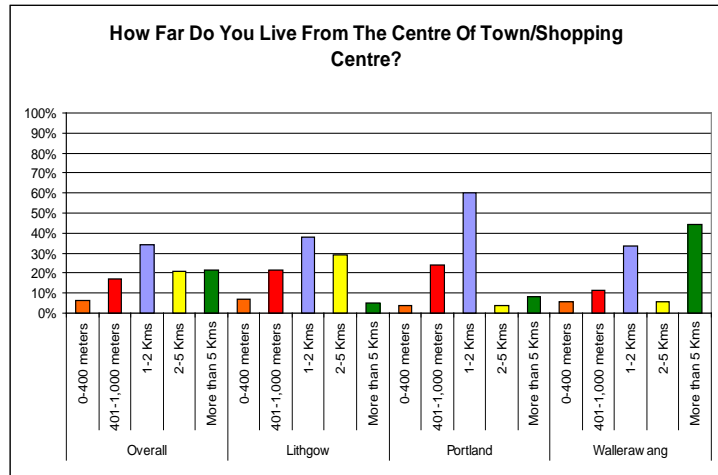
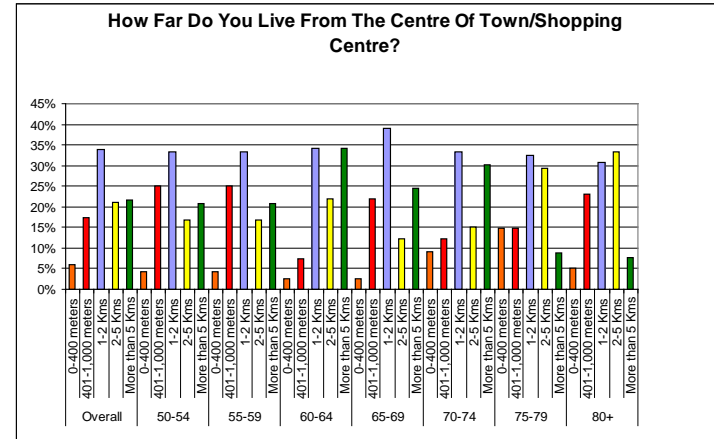
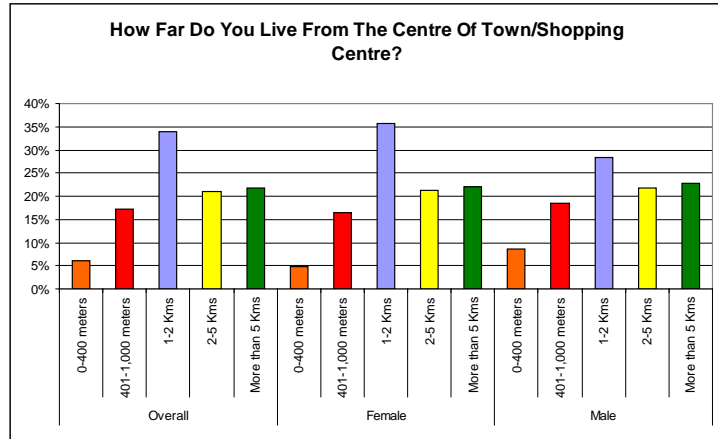
The survey asked people to list the type of services that would have assisted them to return home after a hospital stay. The most common responses were: Home help; Follow up care and assistance

Question 42. How Often Do You Walk Or Participate In Moderate Physical Activity Of At Least 30 Minutes?

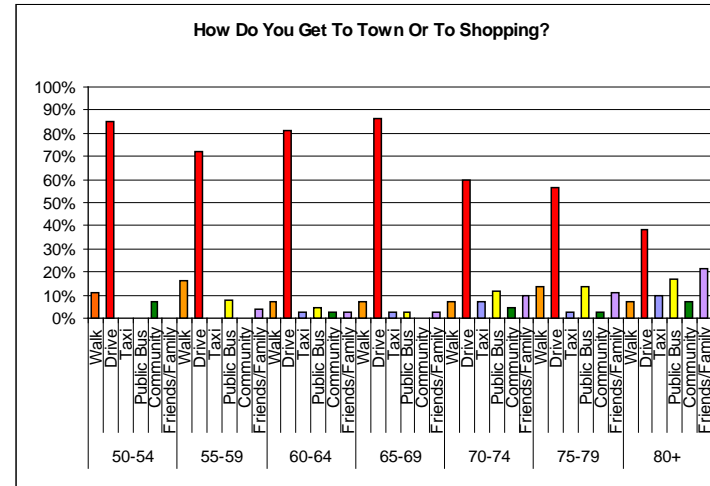
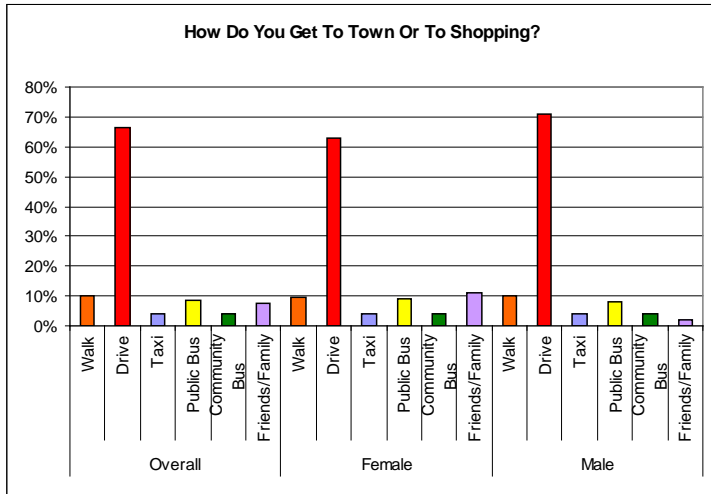


Transport and Access

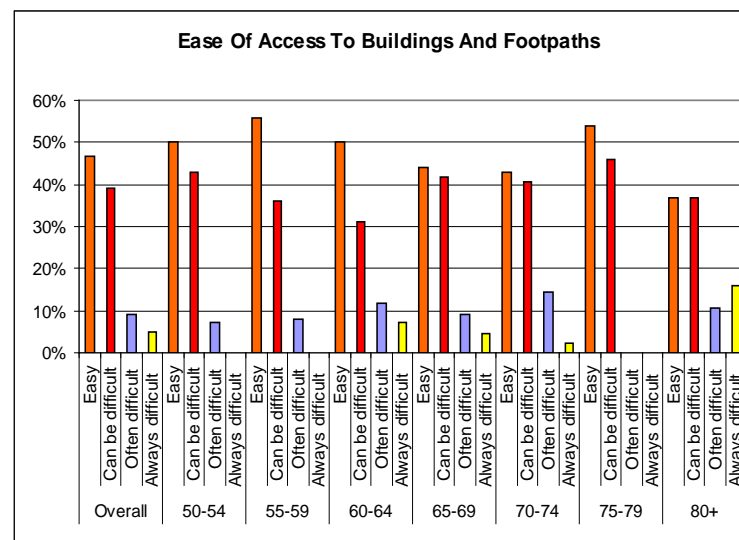
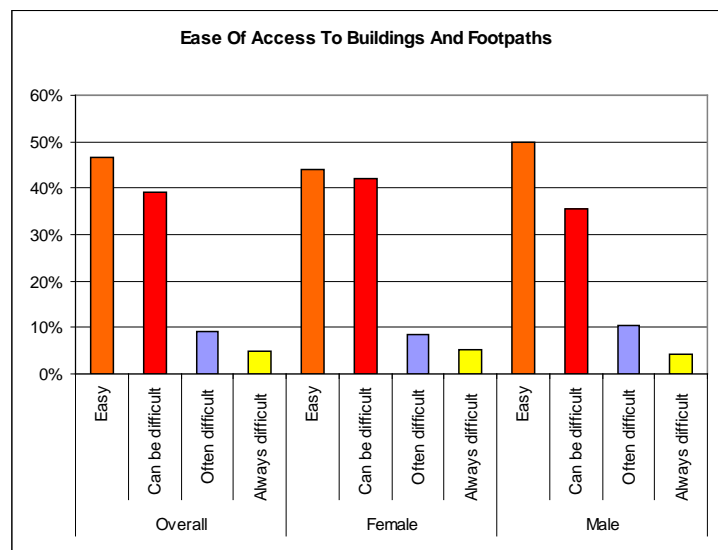
Question 43. Approximately how far do you live from the centre of town/shopping centre?



Question 44 How Do You Get To Town Or Shopping?



Question 45. How Easy Or Difficult Do You Find It To Move Around Lithgow, Ie Footpaths, Into Buildings, Across Roads Etc?

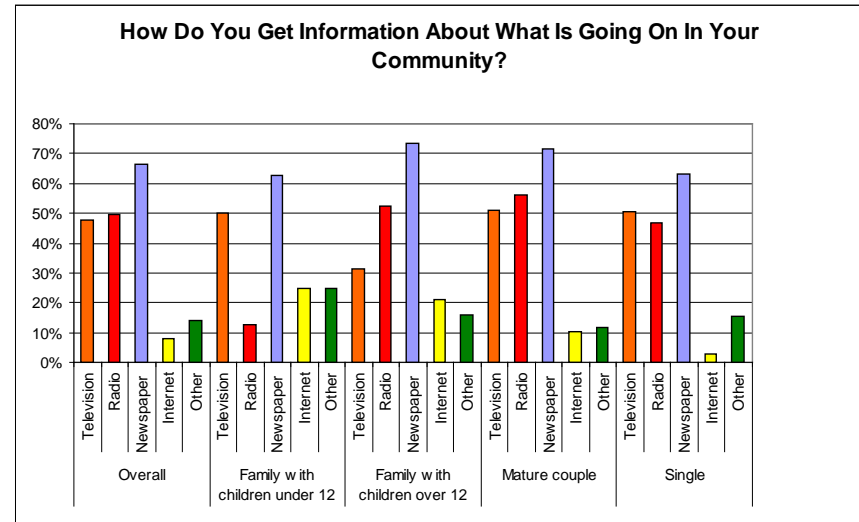
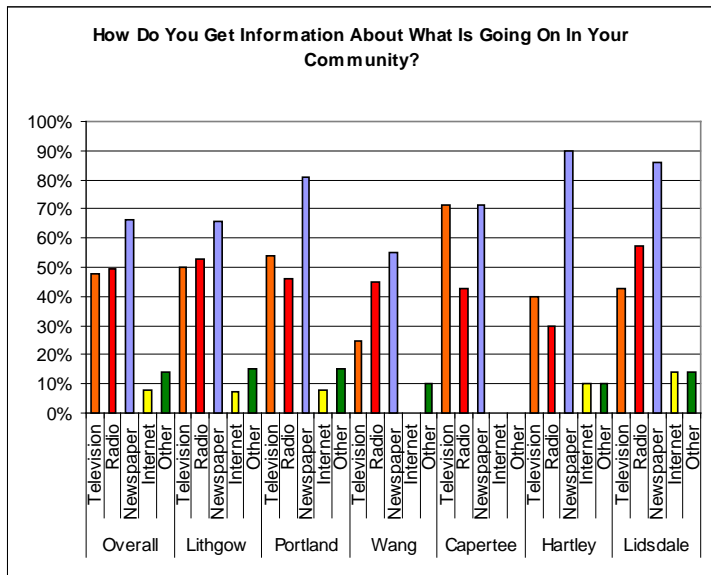
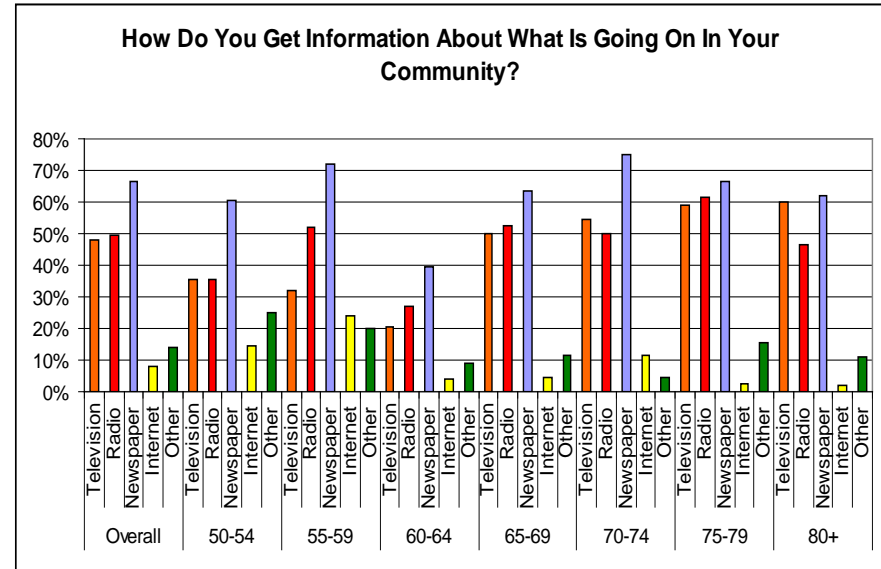
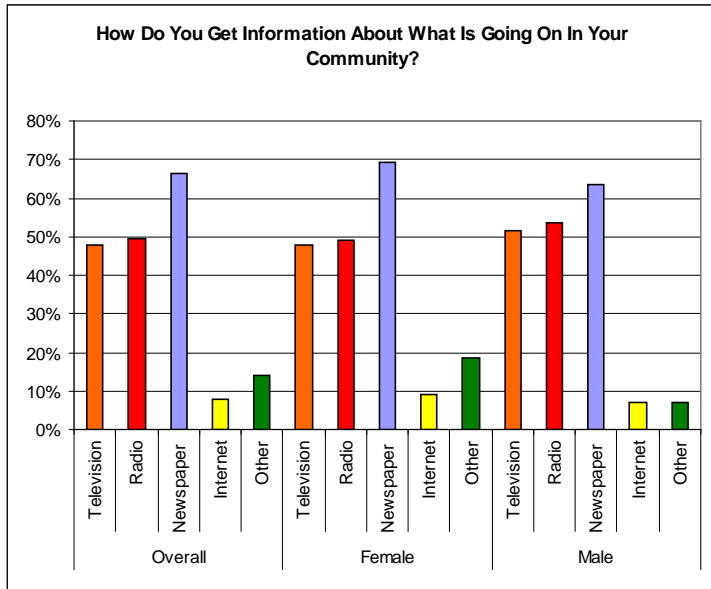


Question 46. Survey Respondents Were Asked To Provide Detail On The Access Difficulties They Face.

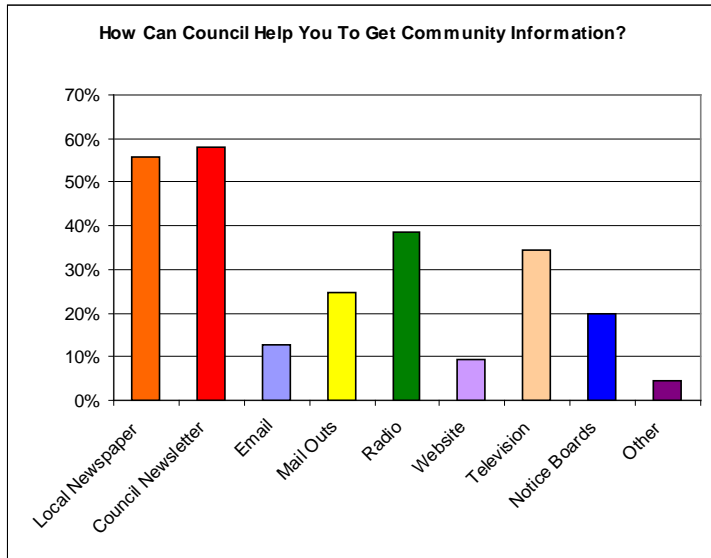
The most common responses were:

- The pavers along Main Street footpath are slippery when wet and uneven in places.
- The need for more paved footpaths around Lithgow.
- Trip hazards, bikes and skateboards and overhanging branches.
- Steps and stairs make access to buildings and shops difficult and more ramps are needed.
- Pedestrian risks from speeding cars and short timings at traffic lights.

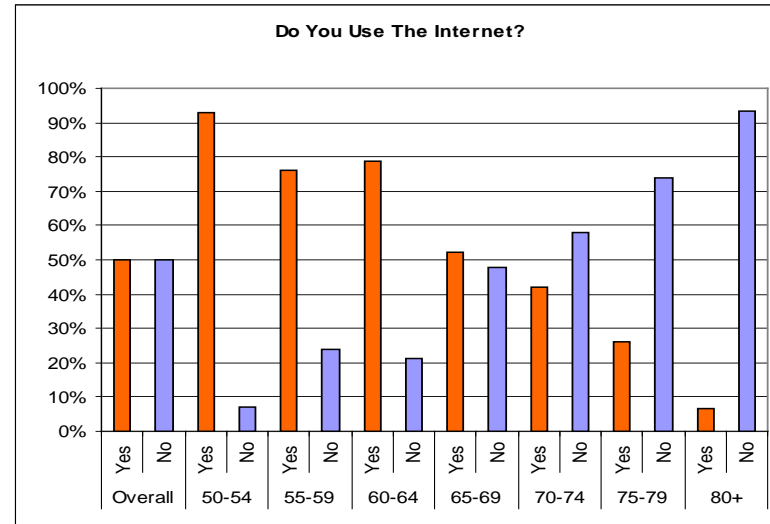
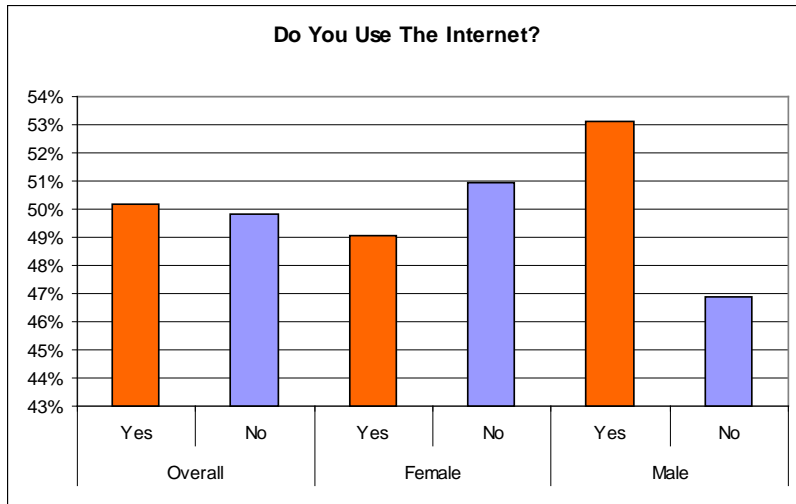
Question 47. How Do You Get Information About What Is Going On In Your Community?



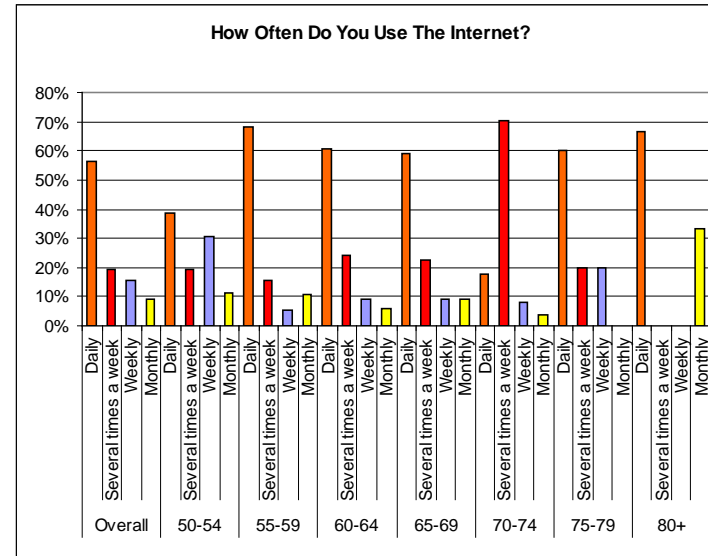
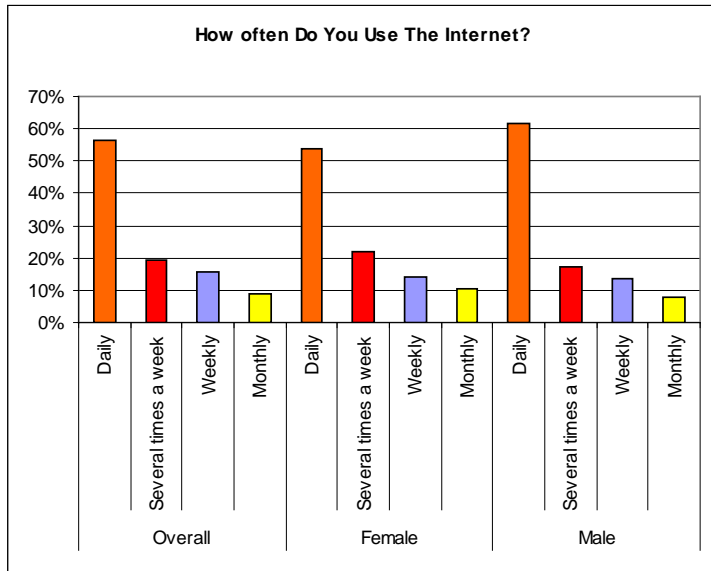
Question 48. How Could Council Help You To Get Information About What Is Going On In Your Community?



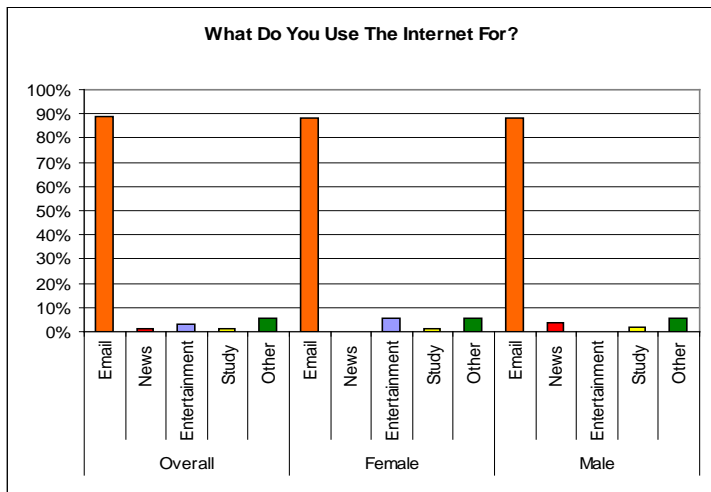
Question 49. Do You Use the internet?



Question 49b. How often Do You Use The Internet?



Question 49c. What Do You Use the Internet For?



Ageing Survey - Profile of 70-74 Year Old Respondents Compared to the Rest

A number of survey responses by people aged 70-74 years were significantly different to the rest as follows:

Community

Question 5a - 48% of 70-74 year olds say that their community feels like home compared to 68% of all survey respondents.

Question 5b - 48% of 70-74 year olds say that people care about each other in Lithgow compared to 65% of all survey respondents.

Question 5c - 59% of 70-74 year olds say that Lithgow is a friendly community compared to 77% of all survey respondents.

Question 5d - 41% of 70-74 year olds say that they would like to contribute to the community compared to 71% of all survey respondents.

Question 5e - 48% of 70-74 year olds say that people they don't know would help them in an emergency compared to 70% of all survey respondents.

Safety

Question 7 - 92% of 70-74 year olds say that Lithgow feels less safe than 5 years ago compared to 76% of all survey respondents.

Preparation for Ageing

Question 11 - 91% of 70-74 year olds say that they think their current home is suitable as their needs change compared to 81% of all survey respondents.

Social Contact

Question 18 - 70% of 70-74 year olds say that they have daily or weekly contact with their family compared to 80% of all survey respondents.

Question 21 - 71% of 70-74 year olds say that they are involved in a social club or social activity which is less than most other age groups.

Health

Question 25 - 75% of 70-74 year olds say that their health is the same or better than 12 months ago compared to 58% of all survey respondents.

Question 26 - 70-74 year olds are more likely (91%) than other age groups(84%) to visit their GP regularly.

Question 42 - 80% of 70-74 year olds participate in moderate exercise of 30 minutes or more either daily or several times a week compared to 71% of all survey respondents.

Transport

Question 44 - 70-74 year olds are less likely to drive and more likely to use other forms of transport than the average.

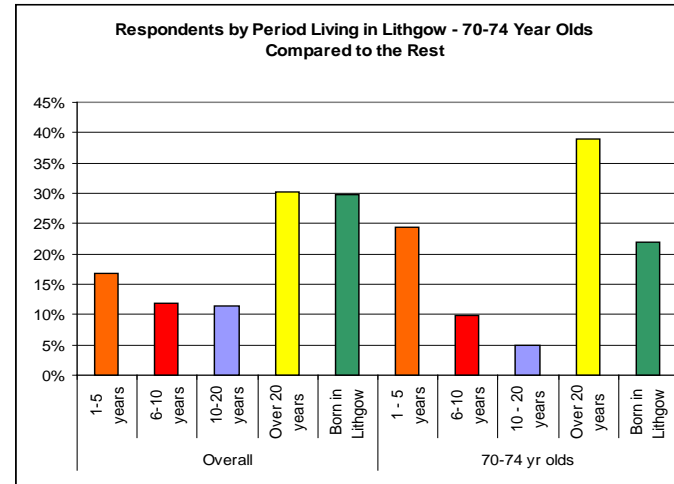
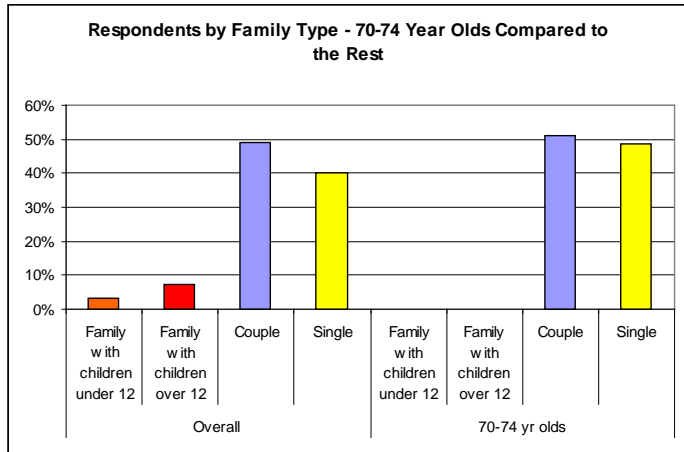
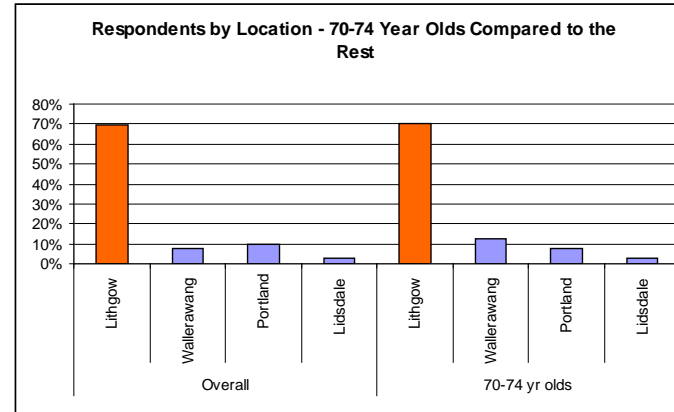
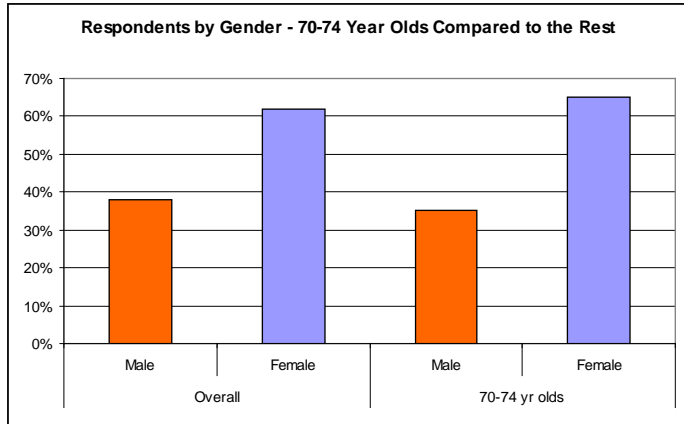
Internet

Question 49 - 70-74 year olds are less likely than almost all other age groups to use the internet but of those that do, they are more likely than the average to do so either daily or several times a week.

Conclusion

The above survey results suggest that 70-74 year olds are less involved in the community than other age groups and have greater concerns about safety. 70-74 year olds however are more likely than other age groups to think that their current home is suitable for their needs as they age, to report better health, to visit their GP more often and to exercise more. They are less likely to drive and to use the internet.

The following charts compare the profile of 70-74 years olds with other survey respondents to try to find out why their survey responses might be different. 70-74 year old survey respondents are slightly more likely to be female than other survey respondents, but not significantly so. 70-74 year olds also live in similar locations to other survey respondents. 70-74 year olds however are more likely to be single and more likely to be either new arrivals to Lithgow LGA or to have lived here for more than 20 years, but not to have been born here.



Appendix 5 Lithgow City Council Strategic Plan

In 2007, Council adopted its Strategic Plan¹, the first long term plan developed by Council. The Strategic Plan provides a framework for Council, in partnership with other levels of government and the community, to implement the visions developed by Council and the community. This chapter also includes a summary of a Health Impact Assessment of the Strategic Plan undertaken by Sydney West Area Health Service (SWAHS) in 2008.

Following is a summary of the Strategic Plan and recommendations with most relevance to older people.

Overarching Vision

The overarching vision for Lithgow of the Strategic Plan is:

"A centre of Regional excellence that:

- *encourages community growth and development*
- *contributes to the efficient and effective management of the environment, community and economy for present and future generations"*

The following vision statements are incorporated in the Strategic Plan:

Community

We retain, respect and strengthen both our overall sense of community, and the unique linked communities of groups, rural areas, villages and towns that make up the Lithgow LGA.

Transport

Providing a choice of effective public and private transport options for those who live, work and visit our community.

Employment

Developing and embracing diverse job opportunities for all ages and abilities.

Education

Progressing to a "learning city of excellence" with a broad range of formal and non-formal education services.

Heritage

Celebrating, protecting and sustaining our unique industrial and natural heritage, its cultural landscapes and its built heritage.

Health

Creating a healthy community providing opportunities and facilities for a healthy lifestyle.

Environment

Balancing, protecting and enhancing our diverse environmental elements, both natural and built, for the enjoyment and support of both current and future generations.

Arts and Culture

Supporting, celebrating and expanding a diversity of cultural and creative adventures that explore and discover the richness in our society.

Youth

Providing suitable entertainment and recreational facilities; education and employment opportunities and lifestyle choices for our valuable community of young people.

¹ Lithgow Strategic Plan 2007

Growth

Providing for sustainable and planned growth, while enhancing the existing rural and village identity.

Strategies and Actions

The Strategic Plan includes detailed strategies and actions that follow from the vision statements. Those with most relevance to older people follow and are considered in the relevant chapters throughout the Ageing Strategy report.

Community

Community		
Strategies	Actions	Outcomes to Date
<i>C1 - Modelling the population and assessing its needs</i>	<ul style="list-style-type: none"> prepare population models identify and monitor population trends 	<ul style="list-style-type: none"> Social Plan updated in 2008 with 2006 Census data Land Use Study undertaken 2010/11
	<ul style="list-style-type: none"> assess the basic needs of the population 	<ul style="list-style-type: none"> under consideration in Council's Integrated Strategic Plan
	<ul style="list-style-type: none"> prepare an Ageing Strategy 	<ul style="list-style-type: none"> Ageing Strategy completed
<i>C3 - Encouraging equitable access to services and facilities which meet the needs of the community</i>	<ul style="list-style-type: none"> evaluate the needs identified in the Social Plan and consider in the operational and management plan process 	<ul style="list-style-type: none"> priority recommendations of Social Plan incorporated in Management plans
	<ul style="list-style-type: none"> provide support to community organisations through Council's donations in accordance with the procedure to improve their ability to plan and deliver community services 	<ul style="list-style-type: none"> Council provides Financial Assistance each year to community organisations
	<ul style="list-style-type: none"> lobby government and utility providers for improved access 	<ul style="list-style-type: none">
	<ul style="list-style-type: none"> develop partnerships with community service providers 	<ul style="list-style-type: none"> Council works with community organisations through Lithgow Interagency and other forums
	<ul style="list-style-type: none"> celebrate and grow volunteering 	<ul style="list-style-type: none">
<i>C4 - Determining and prioritising the recreational needs of the</i>	<ul style="list-style-type: none"> survey the community 	<ul style="list-style-type: none"> Recreational Needs Study undertaken in

Community		
Strategies	Actions	Outcomes to Date
<i>community and explore funding options</i>	<ul style="list-style-type: none"> consider outcomes of the survey in operational and management plans 	2010/11 <ul style="list-style-type: none"> Recommendations to be considered in future Management Plans
	<ul style="list-style-type: none"> seek funding from government through grants and developers through developer contributions 	<ul style="list-style-type: none">
<i>C8 - Improving the quality of open space and recreational facilities</i>	<ul style="list-style-type: none"> determine the future of the indoor pool proposal 	<ul style="list-style-type: none"> stage 1 of the heated pool project to commence in 2011/12
	<ul style="list-style-type: none"> review Council land holdings including the classification of lands 	<ul style="list-style-type: none"> undertaken 2010/11
	<ul style="list-style-type: none"> prepare community land plans of management in consultation with community 	<ul style="list-style-type: none"> scheduled for 2011/12
	<ul style="list-style-type: none"> prepare operational plans and consider within the management planning process 	<ul style="list-style-type: none"> scheduled for 2011/12
<i>C9 - Providing a range of housing opportunities to meet the diverse needs of the community.</i>	<ul style="list-style-type: none"> seek funding from government through grants and developers through developer contributions 	<ul style="list-style-type: none">
	<ul style="list-style-type: none"> provide for higher density development around transport and central business nodes 	<ul style="list-style-type: none"> recommendation of Ageing Strategy
	<ul style="list-style-type: none"> identify sites for potential seniors living with easy access to services and facilities 	<ul style="list-style-type: none"> recommendation of Ageing Strategy
	<ul style="list-style-type: none"> investigate the need for a community committee to facilitate the provision of aged care facilities and establish if need is demonstrated 	<ul style="list-style-type: none"> recommendation of Ageing Strategy
	<ul style="list-style-type: none"> allow for a mixture of housing types in the comprehensive Lithgow Local Environmental Plan and development control plans 	<ul style="list-style-type: none"> recommendation of Ageing Strategy

Community		
Strategies	Actions	Outcomes to Date
	<ul style="list-style-type: none"> identify and protect land for future urban development including senior living in the Land Use Strategy and comprehensive Lithgow Local Environmental Plan 	<ul style="list-style-type: none"> to be considered in development of new LEP in 2011/12
	<ul style="list-style-type: none"> encourage adaptable and affordable housing in medium density development 	<ul style="list-style-type: none"> recommendation of Ageing Strategy
<i>C10 - Facilitating a safe community</i>	<ul style="list-style-type: none"> prepare a crime prevention plan 	<ul style="list-style-type: none"> Crime Prevention Plan completed 2010/11 and endorsed by Attorney general in June 2011
	<ul style="list-style-type: none"> seek funding to implement the crime prevention plan 	<ul style="list-style-type: none"> funding to be sought once available
	<ul style="list-style-type: none"> continue to participate in the Police Action Community Team 	<ul style="list-style-type: none"> Mayor and General Manager attend
	<ul style="list-style-type: none"> maintain the CCTV monitoring program in the Lithgow Central Business District 	<ul style="list-style-type: none"> CCTV monitoring continuing
	<ul style="list-style-type: none"> incorporate crime prevention design principles in development control plans and the design/upgrade of public places 	<ul style="list-style-type: none"> recommendation of Ageing Strategy

Transport

Providing a choice of effective public and private transport options for those who live, work and visit our community.		
Strategies	Actions	Outcomes to Date
<i>T3 - Promoting equitable access to public transport</i>	<ul style="list-style-type: none"> representation of Council on the Transport Working Party 	<ul style="list-style-type: none"> no longer meets. Ageing Strategy recommends reconstitution of Transport Working party
	<ul style="list-style-type: none"> lobby governments 	
	<ul style="list-style-type: none"> making urban areas easier to access by public transport 	<ul style="list-style-type: none"> in subdivision applications Council takes into account access

Providing a choice of effective public and private transport options for those who live, work and visit our community.		
Strategies	Actions	Outcomes to Date
		by public transport and garbage trucks etc. Council also considers the need for bus shelter in larger subdivisions
<i>T4 - Maximising the number of passenger train services terminating at Lithgow and provide a fast train service</i>	<ul style="list-style-type: none"> lobby the State Government 	
<i>T5 - Improving and expanding the pedestrian and bicycle network</i>	<ul style="list-style-type: none"> seek funding and prepare a pedestrian access and mobility plan and consider in operational and management plan processes 	<ul style="list-style-type: none"> scheduled for 2011/12
	<ul style="list-style-type: none"> incorporate path and cycle ways in master plans for future development areas and requirements in development control plans 	<ul style="list-style-type: none"> recommendation of Ageing Strategy
	<ul style="list-style-type: none"> seek funding from government through grants and developers through developer contributions 	<ul style="list-style-type: none">

Education

Progressing to a "learning city of excellence" with a broad range of formal and non-formal education services.		
Strategies	Actions	Outcomes to Date
<i>ED2 - Enhancing the Learning City by providing learning opportunities which meet the needs of the community</i>	<ul style="list-style-type: none"> lobby and partner with learning providers 	<ul style="list-style-type: none"> Lithgow High School. and DELTA fund the Homework Zone for students of all ages and from all institutions
	<ul style="list-style-type: none"> ascertain community learning needs 	<ul style="list-style-type: none"> computer classes held throughout the year. Special classes for seniors during Seniors Week
	<ul style="list-style-type: none"> encouragement of life-long learning 	<ul style="list-style-type: none"> maintain the Learning Shop in Lithgow Library Act as exam centre for external students

Progressing to a “learning city of excellence” with a broad range of formal and non-formal education services.		
Strategies	Actions	Outcomes to Date
	<ul style="list-style-type: none"> support community learning programs and events 	<ul style="list-style-type: none"> displays and stalls for information events as requested
	<ul style="list-style-type: none"> develop and promote the Lithgow Library Learning Centre as the hub of community learning truancy reduction programs 	<ul style="list-style-type: none"> maintain the Learning Shop in Lithgow Library act as exam centre for external students
	<ul style="list-style-type: none"> provide annual donations to schools for award presentations 	<ul style="list-style-type: none"> Council provides \$50 per school per year

Health

Creating a healthy community providing opportunities and facilities for a healthy lifestyle.		
Strategies	Actions	Outcomes to Date
<i>H1 - Providing health services which meet the needs of the community</i>	<ul style="list-style-type: none"> determine adequacy of health services in light of the local profile and population modelling 	<ul style="list-style-type: none"> See Ageing Strategy Chapter 10 recommendations
	<ul style="list-style-type: none"> facilitate improved access to the Lithgow Health Service through public transport and pedestrian access 	<ul style="list-style-type: none"> See Ageing Strategy Chapter 10 recommendations
	<ul style="list-style-type: none"> lobby government and other stakeholders 	<ul style="list-style-type: none">
<i>H2 - Developing partnerships with a range of stakeholders to facilitate healthy lifestyles</i>	<ul style="list-style-type: none"> form a community health committee 	<ul style="list-style-type: none"> See Ageing Strategy Chapter 10 recommendations
	<ul style="list-style-type: none"> develop initiatives to promote a healthy lifestyle 	<ul style="list-style-type: none"> Live Well Lithgow project undertaken 2009-11
	<ul style="list-style-type: none"> seek funding from government through grants and developers through developer contributions 	<ul style="list-style-type: none">

Growth

Providing for sustainable and planned growth, while enhancing the existing rural and village identity.		
Strategies	Actions	Outcomes to Date
<i>G1 - Planning for an annual growth rate of 1 to 2% for the LGA</i>	<ul style="list-style-type: none"> monitor growth rates annually 	<ul style="list-style-type: none"> growth target reviewed in 2011 Land Use Study
	<ul style="list-style-type: none"> establish a more detailed population growth model 	<ul style="list-style-type: none"> considered in Land Use Study
	<ul style="list-style-type: none"> identify and assess the needs of the community to accommodate growth through the population model 	<ul style="list-style-type: none"> considered in 2011 Land Use Study

Health Impact Assessment of Council's Strategic Plan

In 2008, following completion of Lithgow City Council's Strategic Plan 2007, Sydney West Area Health Service (SWAHS) undertook a Health Impact Assessment of the Strategic Plan.

The Health Impact Assessment (HIA) recommendations *"aim to highlight practical ways to enhance the positive impacts or minimize any negative impacts on health, well being and health inequalities that might arise or exist in response to the Lithgow City Council Strategic plan"* SWAHS Health impact Assessment Report of the Lithgow City Council Strategic Plan.

The Health Impact Assessment made a number of key findings and recommendations. These recommendations are considered in the relevant chapters throughout the Ageing Strategy report.

Potential Positive Impacts of the Strategic Plan

The HIA found that:

- strategies within the Strategic Plan will positively affect the majority of determinants of health including employment and economic development, education, access to services, lifestyle, the natural and built environments etc
- strategies within the Strategic Plan will encourage appropriate health services and equitable access to health services
- strategies to develop partnerships to facilitate healthy lifestyles have the potential to address higher rates of hospitalisation and mortality related to risk factors of smoking, physical inactivity, overweight and obesity
- transport strategies will benefit the population by providing pedestrian access and connectivity which is important to facilitating access to services and to encourage physical activity
- Council's intention to develop an Ageing Strategy highlights the positive aspects of healthy ageing and supporting older people with services
- strategies in relation to open space, a range of housing and providing a safe community, target the determinants of health
- improved air quality will benefit older people who are more susceptible to respiratory diseases

- improved water quality will benefit older people who are more susceptible to infectious diseases

Potential Negative Impacts

The HIA found that Council needed to identify specific actions to encourage equitable access to services, including health services.

The need for strategies to address the causes of lack of social support and poor coping skills.

Recommendations

The HIA made a number of recommendations where Council is the lead agency. Those relevant to older people follow.

Community

- map the provision of services in Lithgow and identify gaps in services
- work towards integrating services for vulnerable population groups
- Council in partnership with SWAHS to implement healthy lifestyle programs
- Council to develop a comprehensive Tobacco Control Policy that will support smoke free environments
- Council and SWAHS to consider strategies for addressing the insufficient number of GPs, hours of opening and access to bulk billing
- audit existing recreational areas for accessibility and plan progressive modifications.
- improve safety and access for older people to the built environment through the provision of accessible footpaths, buildings and facilities (WHO 2007 checklist for age friendly facilities)
- implement falls prevention programs
- work with police and others to address alcohol related crime

Transport

- map transport access and walkability
- survey residents to determine transport needs
- develop innovative transport schemes to health services
- work to facilitate access to Lithgow Health Service
- work with neighbouring Councils to advocate for improved public transport at a regional level
- promote safe pedestrian and cycle access

Health

- Council to work with other stakeholders to increase the range of support services that assist older people to stay at home
- identify gaps in respite services and identify suitable models of respite care service delivery
- Council to implement healthy lifestyle programs including Live Well Lithgow Project

Ageing Strategy – Council to consider ways of encouraging older people to play meaningful roles in the community; Council to ensure that the Ageing Strategy considers the needs of all age groups as an ageing population can divert resources away from the rest of the community.

Air Quality

- maintaining Council's Solid Fuel rebate program to encourage people to convert from coal heating
- promote safe, energy efficient and sustainable housing stock for summer cooling and winter heating

Environment

- provide community health warnings in relation to hazard burning and poor air quality

Priority Recommendations for SWAHS

- the HIA also made a number of recommendations for SWAHS as the lead agency. Those relevant to older people follow
- SWAHS, in conjunction with Council and other stakeholders, to implement falls prevention programs incorporating staying active and exercise strategies
- SWAHS and relevant stakeholders to consider transport issues in hospital discharge planning and patient transport needs in the wider health planning process including home delivery of prescription services
- address elevations in asthma hospitalisation by improving air quality, decreasing secondary tobacco exposure, improving access to health care services and implementing asthma management plans
- address elevations in deaths due to lung cancer by implementing stop smoking programs and education programs around passive smoking, reducing exposures to industrial substances and monitoring compliance with the sale of tobacco and non-smoking venues
- investigate the prevalence of diabetes related mortality

Appendix 6 Summary of Issues for Older People Identified in the Lithgow Social Plan 2006-2011

Following is a summary of issues for older people identified in the Lithgow Social Plan 2006 – 2011. The Community Profile section of the Social Plan was last updated in late 2008 with 2006 census information. The following issues and recommendations are considered throughout the Ageing Strategy report.

Adaptable Housing

The need to design functional homes which are relatively easy to adapt to the needs of frail aged people or people with disabilities. This is of particular importance given the low incomes of older people in the Lithgow LGA.

Home and Community Care (HACC) and other home based support services

HACC services in Lithgow provide home based support to people with disabilities and frail aged in their homes. There are a number of HACC services in the Lithgow LGA including Food Services, Home Modification and Maintenance, Carer respite, Social Support, Respite Services Community Transport and Community Options. Capacity and waiting list data would need to be collected.

Aged Care Facilities

Almost all of the aged care nursing home and hostel facilities in the Lithgow LGA currently had a waiting list.

Community Consultation and Development

Council to conduct more regular consultation with the community, through a variety of mechanisms including surveys and meetings.

Information Dissemination

The need for improved dissemination of information including improving the content of the Council Connections Newsletter and ensuring that it is delivered to Post Office Boxes, providing information on emergency alert systems and procedures and an expressed medium priority need for a free home delivered newspaper.

Recreation

The 55+ age group is heterogeneous with very diverse recreational and transport needs. Some older residents require wheelchair access to recreational activities; others enjoy walking, some cycle and some are parents of young children.

Recreational needs identified included forums to prevent isolation, better seating in parks and playgrounds and a heated indoor pool. Open space planning to connect Wallerawang and Lake Wallace for active transport and recreation was also identified as a need.

Transport

Transport difficulties in getting to the hospital after 4pm and on weekends, as well as transport at all times between Lithgow and a number of localities including Clarence and Dargan, Forty Bends and Hartley.

Physical Access

Physical access is a very important consideration due to the increased proportion of older people who have disabilities or experience frailty.

Wheelchair access was identified as needing attention in public spaces in the Lithgow LGA, particularly at road crossings and on footpaths.

Road and Footpath Safety

Road and footpath safety concerns including Railway Parade near Lithgow Railway Station and speeding in the 50 km/h residential zone.

The need for a pedestrian crossing on the Great Western Highway at Lithgow Hospital was also identified.

Education

When asked what was good about living in the Lithgow LGA for older people, responses included Beehive and the Lithgow Library Learning Centre. Beehive is a community based centre offering education and arts and crafts courses as well as social contact one day per week. The Library Learning Centre offers a comprehensive local history collection and Community Technology Centre (often utilised by Beehive, for Seniors courses, and by other community groups.)

Older people expressed a need for other educational opportunities and it was suggested that establishing a University of the Third Age was a medium priority need.

Waste Disposal

Older people expressed a low level need for a green waste disposal bin.

Tourism and Culture

Older people suggested as a low level need for Council to develop a strategy targeting tourism into Portland such as tour buses, and desired a return of the Natural Fibres Exhibition.

Older People Action Plan from Social Plan 2006-2011

Older People's Action Plan 2006 - 2011		
Objective	Action	Outcomes to Date
Respond to the needs of an ageing population	develop an Ageing Population Strategy	completed 2011
Develop community capacity to provide housing and accommodation which is responsive to the needs of older people	develop and Promote Adaptable Housing Guidelines	recommendation of Ageing Strategy
	lobby Government for aged care facilities and services	recommendation of Ageing Strategy
	Council to take a lobbying role with government with regard to affordable housing and crisis accommodation	recommendation of Ageing Strategy
	refer issue of affordable housing for further exploration in the Strategic Plan and Local Environment Plan	affordable and adaptable housing needs considered in development of Land Use Study 2011 and to be considered in development of new LEP 2011/12
Improve Council's community consultation and information dissemination for older people	review best practice principles and processes, and develop a Community Engagement Procedure	not achieved
	review best practice principles and processes for the dissemination of information to the community and develop a Procedure on the Provision of Community Information	not achieved

Older People's Action Plan 2006 - 2011		
Objective	Action	Outcomes to Date
	continue to produce and enhance the quarterly Council Connections Newsletters.	provided quarterly
	review the effectiveness of Council Connections	Format updated in 2010/12
	enhance Council's website including a useable version of the Lithgow Community Guide	online community guide located on LINC website www.linc.org.au
Provide quality recreation and cultural opportunities which are responsive to the diverse needs of older people	prepare an Open Space Study and Action Plan	Open Space and Recreation Needs completed 2010/11 and on public exhibition until 31 July 2011
	consider actions from the Open Space Study in Council's Management Plans	under consideration
	prepare a Cultural Plan	completed 2008
	consider Actions from the Cultural Plan in Council's Management Plans	Cultural Precinct Study undertaken 2009/10 Implementation of further actions scheduled 2011/12
	develop a Feasibility Study for the Hoskins Building	a proposal has been developed in partnership with University of Western Sydney for use as a university campus. Outcome subject to funding
	prepare and Investigation Study for the Hermitage Oval	the Open Space and Recreation Needs study recommended that the former Hermitage site be zoned Public Recreation and protected for future potential use as a sports park. This to be reviewed after 1 year
	administer Healthy Local Government Grants Projects in relation to Lake Pillans and the Bowenfels Community	project completed. Council managed Live Well Lithgow project from 2009-11
	further investigate the feasibility of an Indoor Heated Swimming Pool	Stage 1 commencement scheduled 2011/12
Improve access to public transport for older people	participate in the Lithgow Transport Working Group	Transport Working Group no longer meets. Ageing Strategy recommends reconstitution
	lobby relevant agencies on issues as needed	
Respond to physical access needs of older people	develop a Disability Access Plan	scheduled for 2011/12 after completion of Ageing Strategy
	audit Council's footpath infrastructure and facilities for accessibility	scheduled for 2011/12
	improve accessibility to the Lithgow Swimming Centre	to be addressed in Stage 1 redevelopment

Older People's Action Plan 2006 - 2011		
Objective	Action	Outcomes to Date
Address the road and footpath safety needs of older people	Council to investigate ways to remediate the slipperiness of footpath paving	Main Street Lithgow pavers cleaned in early 2011
	Council to refer to TALC, the RTA and other relevant agencies regarding issues affecting road and footpath safety in the Lithgow LGA	road safety matters regularly considered by TALC
	Council to continue its maintenance program of Council's footpath and road network	maintenance program continuing
Enhance opportunities for older people to access learning opportunities	review the Learning City Action Plan and identify opportunities to further develop Lithgow as a Learning City	<ul style="list-style-type: none"> • planning underway for National Year of Reading 2012 • 'Books on Prescription' collection is about to be made available to local health professionals • commencing July 2011, 'Tea and Talk' monthly chat sessions with an expert on a topic of local interest • 'Lithgow Forum' meets quarterly • Council has increased the number of tertiary institutions sending external students to sit exams at the Library • Council is investigating extending the Homework Zone to Wallerawang Branch Library • library is liaising with TAFE and Lithgow High to encourage greater inter-library usage
	continue to resource the Library Learning Centre and Branch Libraries, the Learning Shop and the Community Technology Centre	<ul style="list-style-type: none"> • upgrades undertaken to Wallerawang Library in 2009 and Portland Library in 2011 • library resources budget enhanced in 2011/12 • development of house-bound library service under investigation
	lobby for education and training services and facilities in this area	proposal under consideration for use of Hoskins Building as university campus
	Council to consider providing support to older people in establishing local education opportunities for older people such as a University of the Third Age	recommendation of Ageing Strategy

Appendix 7 Ageing Strategy Consultation Outcomes

A number of community and agency consultations were held between late 2010 and June 2011 in a number of different locations including Lithgow, Portland, Wallerawang and Capertee to gather the views of older people and service providers. Consultations were also held with residential aged care providers as well as with Gorrie Ban, Lithgow Community Care Forum and Lithgow Aged Day centre. The following is a summary of the outcomes. These are considered in the relevant chapters throughout this report.

1. Locality Consultations

1.1 Lithgow Community Consultation held 14th December 2010

What do you like about Lithgow?

- country town
- friendly town
- close to bush
- town sticks together in crisis
- resilient
- generous
- stable community
- people always return to Lithgow
- access city
- access to larger hospitals

What changes have you seen in Lithgow?

- loss of health services
- waiting time longer
- fewer specialists
- palliative care minimal
- need for hospice
- services/ positions become vacant and are not refilled.

How do you find the general condition of Lithgow?

- uneven footpaths
- lack of ramps
- not suitable for walking frames, scooters
- paths not good in wet weather
- car park spaces too small- hard for frail aged
- need for access committee at LCC
- visual issue – poor signage, lights etc
- better indicators for vision impaired
- shopping quality is limited
- poor service from trades people
- too many empty shops
- overheads too high, hard to run own business in town
- shop doors hard to operate for frail aged- GP's also
- lots of shops have water damage
- trees can be too low, hard to navigate path especially when there is more than one person
- power station emissions a concern for residents

Action: what can Council do to improve shop facades?

How safe do you feel in community?

- not safe at night - won't walk out at night
- more swearing- Cook Street Plaza is really bad
- kids on skate boards in Lithgow Main Street

- older people on scooters can be just as dangerous
- crime in rural areas
- police are understaffed
- drug use

Action: Investigation needs to be done around the appropriate placing of elderly in Department of Housing accommodation.

Accessing transport- getting around Lithgow

- more funding needed in general for transport
- cannot get a bus to the hospital on Saturday afternoon and Sunday
- trains do not feel safe at night
- difficult to access taxis after 6pm - preference seems to be given to younger people
- transport leaving Lithgow is infrequent and often one way
- difficulties in frail aged getting from bus stop to home

Actions:

- investigation needed around more transport for elderly in rural areas
- more support needed around client care, especially with frail age getting from shops to home etc

Traffic

- pedestrian crossing adjacent to Queen Elizabeth Park is dangerous
- traffic lights do not allow enough time to for less mobile people to cross
- visibility on roads can be difficult - trees need to be pruned etc
- intersections can be difficult during peak traffic times

Are houses suitable for frail aged?

- basic items like grab rails needed
- baths hard to get in and out of
- housing is often not suitable
- houses are not heated properly
- most hallways in houses are too narrow for wheel chairs etc
- building adaptable housing should be considered so as to meet needs of the elderly and frail aged

Action: More education on how to modify homes to accommodate the needs of elderly and the frail aged.

Doctors

- easier to get same day appointment in medical centres than elsewhere
- some doctors have set patient lists with long waiting times for appointments
- continuity of care - doctors rarely visit patients in hospital or undertake home visits
- gaps in specialist services
- long waiting lists for dental care

Home Care

- doctors tend not to refer home care services
- more community education needed around home care
- special mention given to the valuable service that LINC provides

1.2 Portland Community Consultation held 8th December 2010

- HACC clients don't seem to have family enough support in Lithgow
- Lithgow Aboriginal clients have not accessed Aged Care Packages for at least 3 years
- higher demand for service in Bathurst, minimal waiting list in Lithgow
- G.P's are hard to engage and they don't appear to have a commitment to assist HACC services with their care packages

- continuity of care issues in relation to GP's and their patients leaving hospital
- awareness of ACAT and other care services needs to be raised
- HACC services have trouble recruiting in Lithgow

1.3 Wallerawang Community Consultation held at Wallerawang Bowling Club 15th December 2010

What do you like about Lithgow?

- nice landscape, visually pleasing
- friendly place to live
- library is a great community asset

What do you not like about Lithgow?

- Not enough for young people to do

What changes have you seen in Lithgow?

- more empty shops
- more housing development
- highway
- feels less safe, day or night
- lower Police presence
- poorer quality footpaths, too steep for scooters
- nursing homes good but a 4th may be required to meet the needs of aging population

Are you aware of what services are available to help prepare for old age

- good knowledge overall of home modification services
- general feeling that people do not read resources given to them
- of the people present, all felt that they were equipped enough to stay in own home

Transport

- hard to meet criteria for taxi voucher, taxis too expensive
- Translinc is a good service and is very helpful in assisting with shopping etc

Access to GP's

- waiting times vary for a doctor
- most doctors bulk bill
- in town specialists can be accessed through Translinc

1.4 Capertee Community Consultation held 10th December 2010

- transport is a major issue
- there are a lot of older men on their own in Capertee area
- poor mobile phone coverage
- difficulty in getting HACC and other services to Capertee. Capertee is in a no-service area between Lithgow and Rylstone
- there are no visiting GP's. Portland has the nearest GP service
- Police have a large area to cover and are often not at the station

2. Agency Consultations

- in home care appears to be provided longer in Lithgow than in other area (eg Blue Mts) which places higher demand on carers
- there seems to be good social and family networks in Lithgow
- in-home respite is really only consistently available through aged care packages although there is intermittent respite through eg Homecare
- under-utilisation of aged day centre groups
- identified need for additional community nursing and allied health positions

- there are no DVA specific nursing services in Lithgow
- difficulties in accessing respite residential care in nursing homes, although it is slightly easier in low level hostels. Families often have to access respite out of area
- hospital length of stay is affected because people can't access residential care locally.
- there are no known carer support services in Lithgow
- Community Aged Care Packages - 4 providers and waiting list of 5 months. Packages average 4-6 hours per week
 - Extended Aged Care packages – 2 providers and average of 14 hrs service pw
 - EACH Dementia – (high level care in home) – 1 provider and 16 hrs pw of care in home
 - some report that package clients are not getting their full allocated hours due to staff shortages
- Homecare difficult to access due to high demand
- concern about waiting lists for ACAT assessments which can take up to 6-8 weeks
- concerned about continuity of care, especially for people leaving hospital. Hospital staff don't always advise community care services on discharge
- coordination between services could be improved
- GP's are not in general referring to HACC services
- there is a possibility of a centralised intake and assessment process for HACC services being established which might reduce the local focus of services
- consider that there should be a local funded case coordination project to link people to services and coordinate upon discharge from hospital
- support large mail out of Helping you at Home HACC booklet to all households as way of getting information to potential HACC clients and their families

3. Activity Centres

Lithgow Senior Citizens Centre

Lithgow Senior Citizens Centre has met for many years in the old Hoskins Building, owned by Council, on the corner of Mort and Bridge Streets Lithgow.

They meet every Thursday and Friday afternoon with about 30 people attending each week.

Activities include cards, bingo, indoor bowls and afternoon tea.

This long established group is quite self-sufficient and attracts new members through word of mouth.

Unfortunately, their premises don't meet fire safety and other building requirements. Further, there is a proposal under consideration for the University of Western Sydney to establish a campus in the building.

Whether or not the UWS proposal proceeds, suitable alternative premises need to be found for this group. This may not mean dedicated premises for this group only, but shared premises with other groups. Lithgow Senior Citizens Centre is permanently set up for their current activities including indoor bowls. If shared premises were to be found, this might mean that they and each other user group would need to setup and pack-up after each session.

Lithgow Senior Citizens Centre highlighted the importance of their current location being close to the centre of town as many of their members don't drive. They made the point that Lithgow lacks a town hall/civic centre.

Gorrie Ban

Gorrie Ban is a volunteer run activity centre that meets every Monday in the Fatima Hall Bowenfels. Their weekly program is very popular with up to 60-70 older people attending including both active and frail older people. The following issues were raised in a community consultation with Gorrie Ban participants and volunteers:

What do you like about Lithgow?

- Lovely Town
- friendly people
- good spot to live
- friendships
- people are beautiful and friendly
- the Workies
- Bee Hive
- the climate

What do you not like about Lithgow?

- A better rail service

What changes have you seen in Lithgow?

- health system has improved
- good amount of medical centres
- shortage of surgeons
- more podiatrists needed

How accurate do you find the following statements

- my community feels like home – yes
- people care about each other in Lithgow - yes
- Lithgow is a friendly community - yes
- I would like to contribute to the community- yes
- people I don't know would help me in an emergency- yes

How prepared are you for old age

good - most already living in residential setting

Are you aware of what services are available to help prepare for old age?

- not enough information available in Lithgow around options for elderly living at home
- most feel that LINC does provide good services for home care clients

4. Residential Care

Tanderra

Discussions with the Tanderra Board highlighted the following issues:

- despite increasing need, Tanderra find it difficult to offer respite care due to the demand for permanent places. Tanderra has no dedicated respite beds and can take no respite bookings but will try to use a vacant bed after someone leaves and before it is filled permanently
- in the Tanderra Board's opinion, many people feel that they can stay at home instead of entering residential care but their homes are often not suitable and/or accessible. This view has been supported by other agencies that have said that in-home care appears to be provided longer in Lithgow than in other areas (eg Blue Mountains) because there seems to be good social and family networks in Lithgow. This places higher demand on carers and there are often not sufficient carer support services

- Tanderra has been considering options for expanding for a number of years. They don't have the land or space to extend and expanding upwards is not an option as they would then require an additional registered nurse on duty for each floor
- Tanderra also has a number of 4 bed rooms that don't meet the current standards. A lack of land to expand prevents them building more rooms, including respite beds and makes it impossible to meet accreditation standards
- they consider that a 70-90 bed facility would provide the synergy needed to operate the facility viably
- Tanderra have been in discussions with Council over a long period to find a suitable alternative site. Tanderra have looked at all the currently available land and have found nothing suitable other than a Council owned site on the corner of Sandford Avenue and Coalbrook Street. They consider that they need about 5 acres
- Tanderra would like Council to undertake the necessary community consultation as part of the processing of making land available for residential care facilities

Cooinda

Discussions with the Cooinda Board highlighted the following issues:

- Cooinda has 49 places and 1 emergency respite bed and have a waiting list
- 90% of their residents are 90+ years
- considers that there will be increasing demand for places. They don't want people to have to leave the area for accommodation and recognise the need for additional places in Lithgow
- acknowledges that people are in some cases staying at home longer than they should and facing depression and anxiety as a result
- supports the need for more day programs like Gorrie Ban and LINC that can improve the quality of life of people living at home
- Cooinda wants to maintain the local identity of residential care services

Three Tree Lodge

Discussions with the Three Tree Lodge Board highlighted the following issues:

- while they experience peaks and troughs in demand, there is a generally increasing demand for places. Like Tanderra, they have no dedicated respite beds
- there is an increasing trend towards user pays and a reliance on bonds
- there is limited capital funding available through the Commonwealth and a competitive bidding system for new beds
- they have no current plans for new beds and have a restricted amount of available land to expand
- they face increasing costs, particularly electricity which represents a very large cost.
- the Board made a number of suggestions in relation to the potential benefits from cooperation between residential facilities including joint purchase, staff pooling and training

Tabulam

Discussions with the Lithgow Health Service Manager highlighted the following issues:

- Tabulam has 22 beds and can provide day respite up to 2 days pw. Around 10 of the 22 beds are respite beds. Always full and with a waiting list
- dementia care is a growing need which is difficult for facilities to manage
- public transport is very difficult in Portland. No taxi, no community transport. For this reason, Tabulam provides its own transport
- considers that Lithgow has sufficient residential age care beds, partly due to the trend for people in Lithgow, compared to those in other areas, to stay at home longer

- considers that there is a trend towards people only moving to residential care for the last period of their life. Which is how it should be, provided people receive quality care while still at home
- there is a growing focus on providing transition care to people leaving hospital to prevent re-hospitalisation

Appendix 8. Age Structure of the Population by Locality

Figures 1 and 2 compare the age structure of Lithgow LGA with NSW and Regional NSW in 2006. Figure 3 shows the change in the age structure of the Lithgow LGA population between 2001 and 2006. Figures 4-13 compare the age structure of the different parts of Lithgow LGA with the LGA average. As can be seen, there are considerable variations across the LGA.

Comparing Figure 2 with Figure 5, it can be seen that nearly 50% of the increased number of 60-69, 70-84 and 85+ year olds between 2001 and 2006 in the Lithgow LGA occurred in the Lithgow Urban Area.

Figure 1 Lithgow LGA Compared to NSW

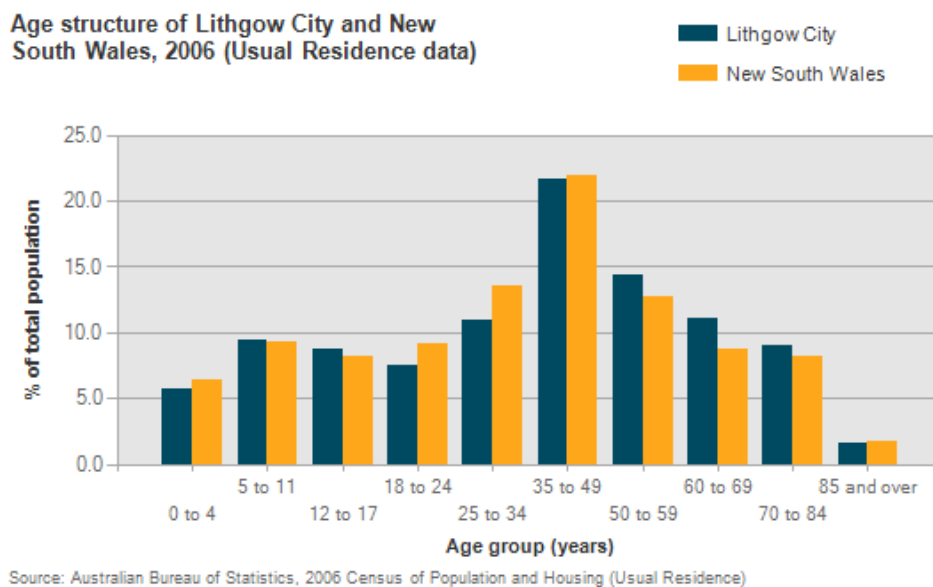


Figure 2 Lithgow LGA Compared to Regional NSW

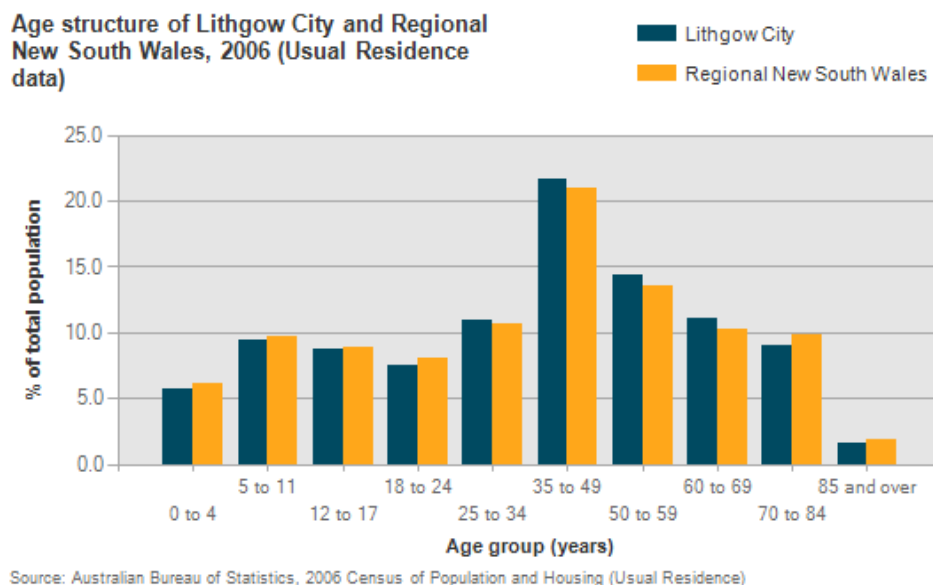
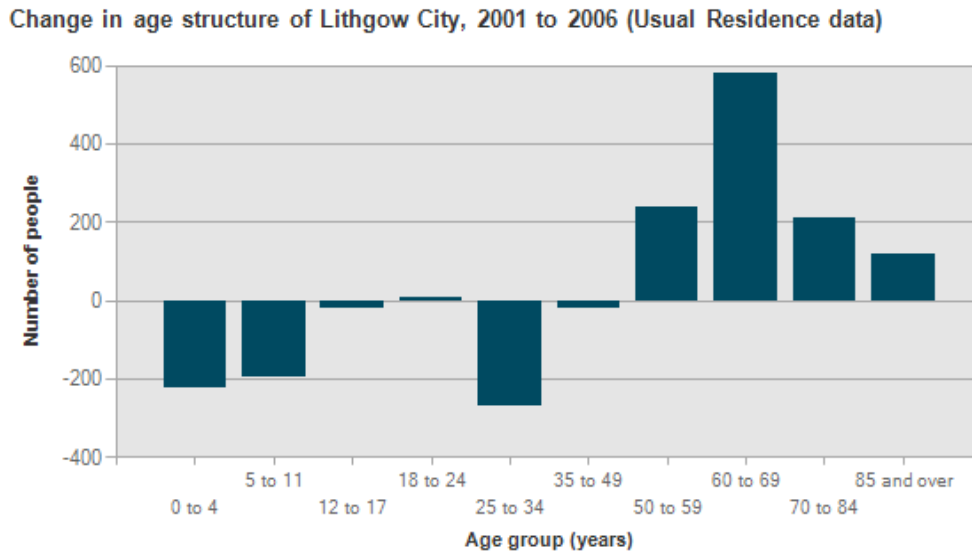


Figure 3 Change in Age Structure Lithgow LGA



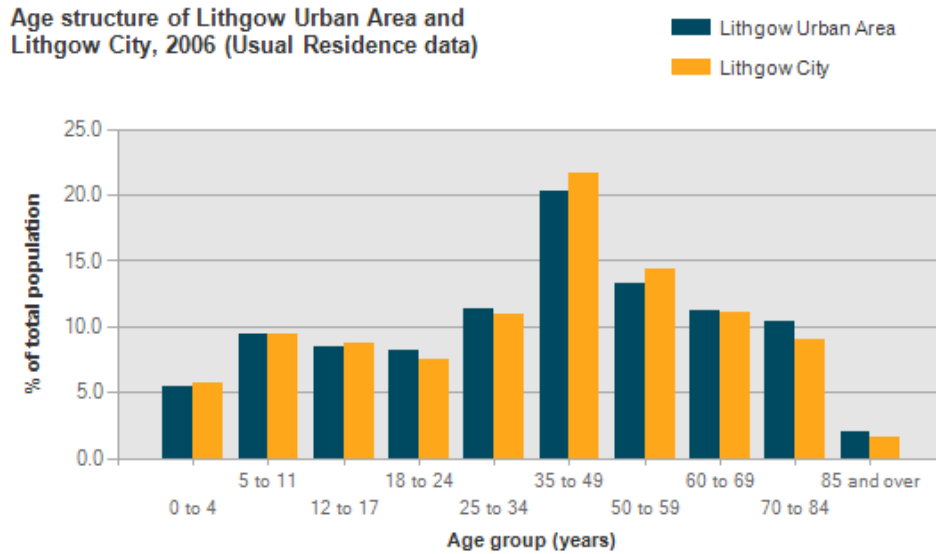
Source: Australian Bureau of Statistics, 2006 and 2001 Census of Population and Housing (Usual Residence)

The median age of Lithgow LGA in 2006 was 40 years.

Lithgow Urban Area

Figures 4 and 5 compare Lithgow Urban Area with the Lithgow LGA and show that Lithgow Urban Area has a slightly lower percentage of people aged 50-59 and a slightly higher percentage of people aged 70-74 and 85+ years. The median age of Lithgow Urban Area in 2006 was 40 years.

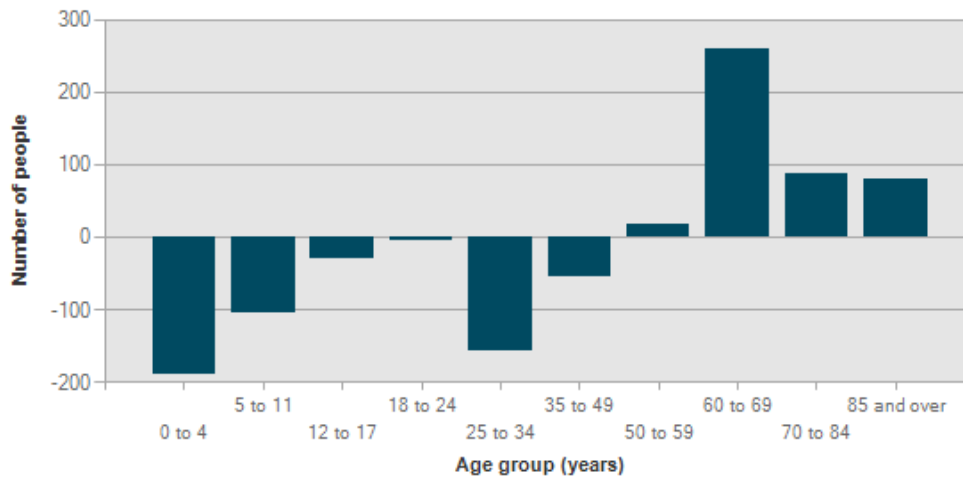
Figure 4 Lithgow Urban Area



Source: Australian Bureau of Statistics, 2006 Census of Population and Housing (Usual Residence)

Figure 5 Change in Age Structure Urban Area

Change in age structure of Lithgow Urban Area, 2001 to 2006 (Usual Residence data)

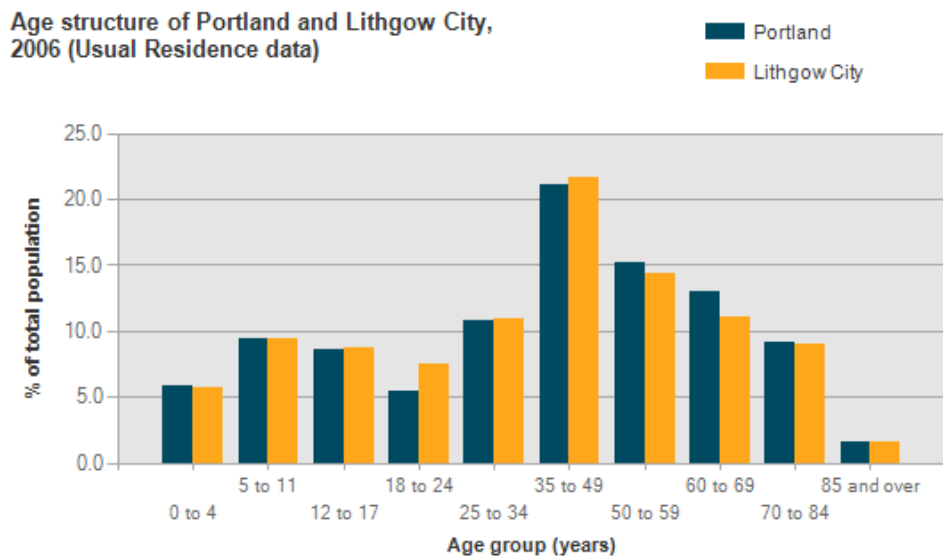


Source: Australian Bureau of Statistics, 2006 and 2001 Census of Population and Housing (Usual Residence)

Portland

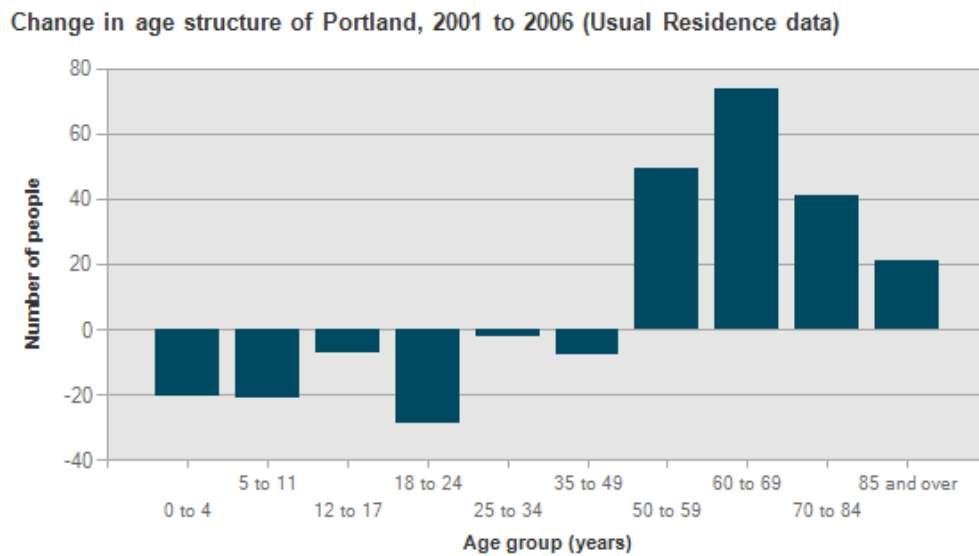
Figures 6 and 7 compare Portland with the Lithgow LGA and show that Portland has a higher percentage of people aged 50-59 and 60-69 years. In common with the Lithgow LGA as a whole, Portland lost people in all of the younger age groups. The median age of Portland in 2006 was 42 years.

Figure 6 Portland



Source: Australian Bureau of Statistics, 2006 Census of Population and Housing (Usual Residence)

Figure 7 Change in Age Structure Portland



Source: Australian Bureau of Statistics, 2006 and 2001 Census of Population and Housing (Usual Residence)

Wallerawang

Figures 8 and 9 show that Wallerawang has a younger population than the Lithgow LGA. Wallerawang has a higher percentage of children and young people and a lower percentage of people aged 60 years and over. Despite this, Wallerawang lost people in the younger age cohorts and gained people in the older age cohorts between 2001 and 2006. The median age of Wallerawang in 2006 was 37 years.

Figure 8 Wallerawang

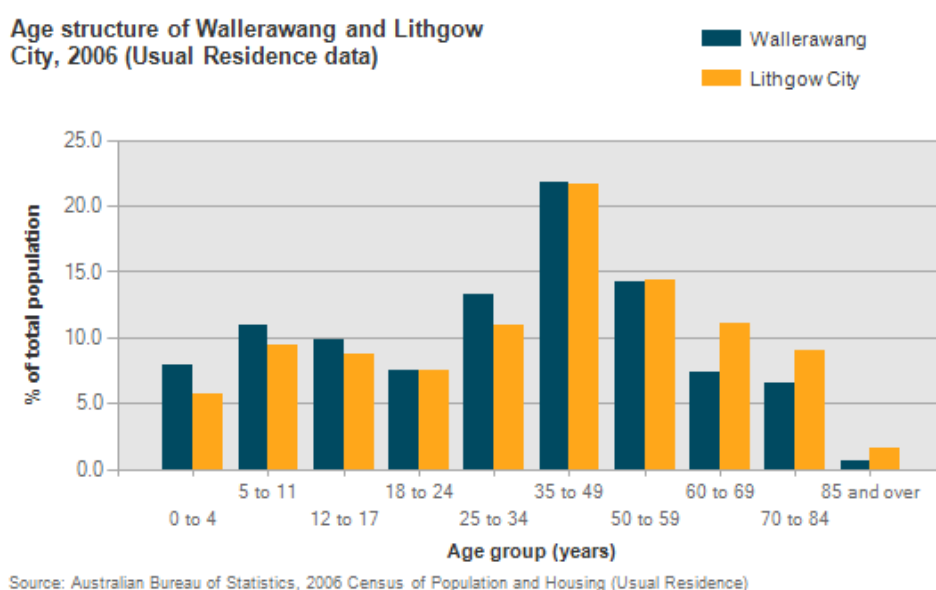
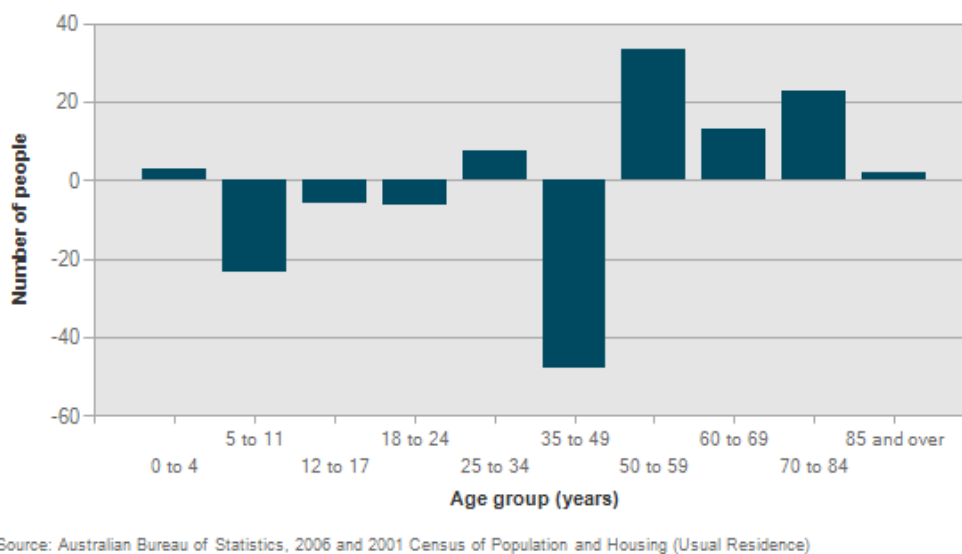


Figure 9 Change in Age Structure Wallerawang

Change in age structure of Wallerawang, 2001 to 2006 (Usual Residence data)



Rural North including Marrangaroo

Figures 10 and 11 show that the Rural North area of Lithgow, which includes Marrangaroo, has a higher percentage of its population in the 25 – 59 year age cohorts and a lower percentage of older people than the Lithgow LGA. Rural North also lost people in the younger age cohorts and gained people in the older age cohorts between 2001 and 2006. The median age of the Rural North area in 2006 was 40 years.

Figure 10 Rural North including Marrangaroo

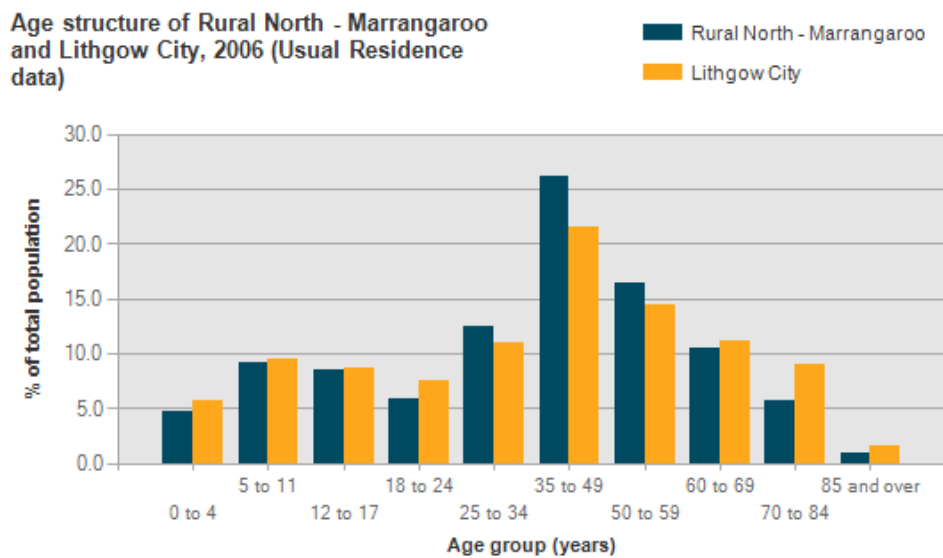
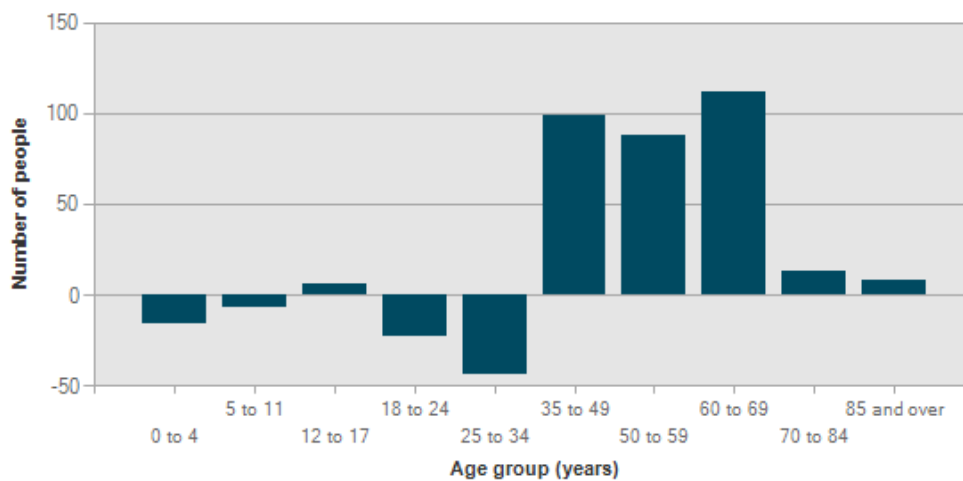


Figure 11 Change in Age Structure Rural North including Marrangaroo

Change in age structure of Rural North - Marrangaroo, 2001 to 2006 (Usual Residence data)



Rural South Including Little Hartley

Figures 12 and 13 show that the Rural South area of Lithgow, which includes Little Hartley, has a higher percentage of its population in the 35 – 69 year age cohorts and a lower percentage of people in the 70-84 and 85+ age cohorts than the Lithgow LGA. Rural South also gained people in most age cohorts between 2001 and 2006, in particular those aged 60-69 years. The median age of the Rural South in 2006 was 42 years.

Figure 12 Rural South Including Little Hartley

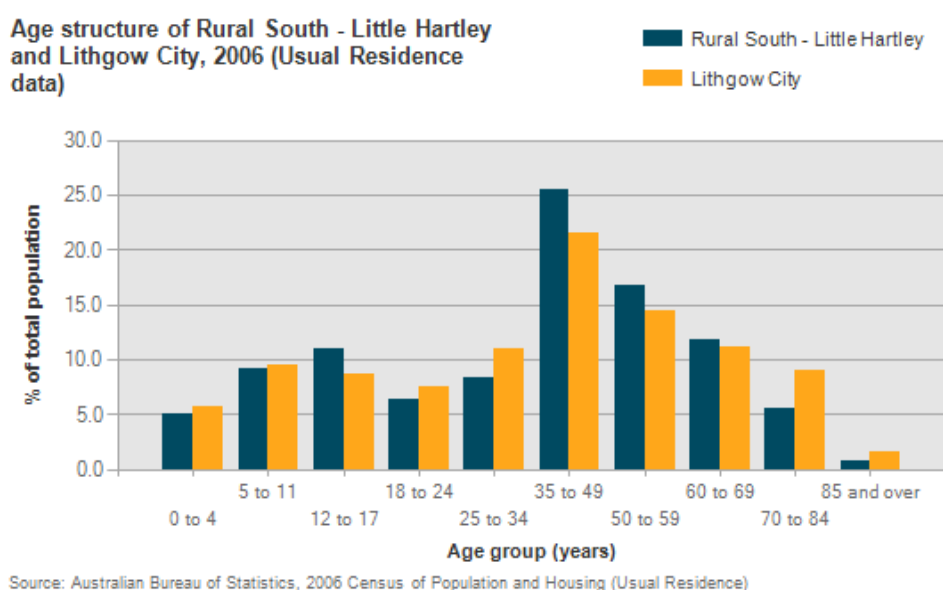
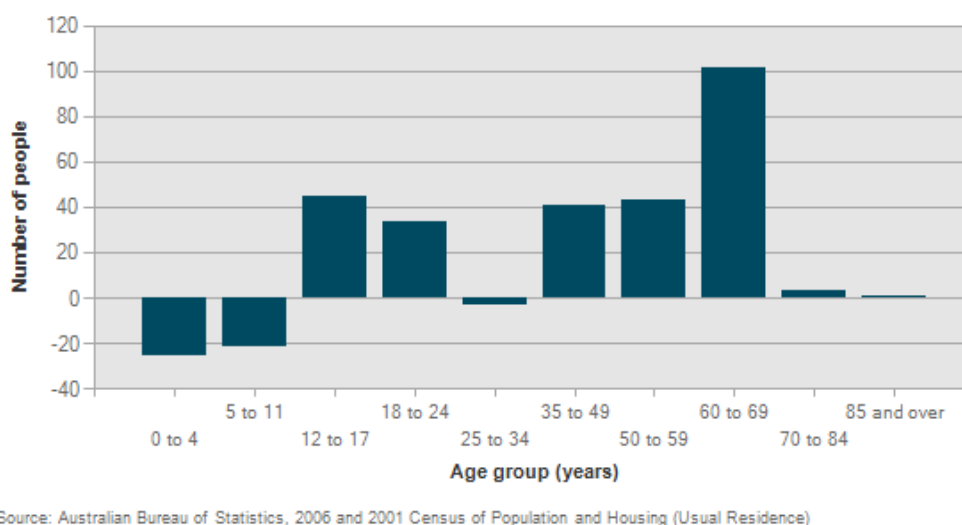


Figure 13 Change in Age Structure Rural South Including Little Hartley

Change in age structure of Rural South - Little Hartley, 2001 to 2006 (Usual Residence data)



Appendix 9 Combined Action Plan

Chapter 5 Preparation for Ageing

Preparation for Ageing Action Plan			
Objective	Action	Key Partnerships	Priority*
Information Older people have the information resources to assist them to plan for ageing	Council to provide preparation for ageing information kits, information on the Council website and "What's On for Older People" newsletters	Council, aged service sector and media.	High
Financial Planning Older people receive quality and independent financial planning advice prior to and during retirement	Develop financial planning programs and seminars to older people prior to and during retirement	Council, aged services and finance sector	Medium
Work Older people have access to flexible working arrangements and part-time work	Promotion of flexible working arrangements including part-time work by Council and other employers, and recognition by employers and the community of the value of older employees	Council and business	Medium
	Employment programs to be targeted to older workers	Council and business	Medium

Chapter 6 Social Engagement

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
Promote the benefits of active ageing	Hold an annual Active Ageing Expo and other initiatives that acknowledge the value, achievements and contributions of older people	Council, community organisations, government organisations and business	High
	Promote positive and active images of older people in local media and Council publications	Council, community organisations, government organisations, business and	High

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
		local media	
	Develop older person and youth interaction programs through the involvement of local schools.	Council, schools and community organisations	Medium
	Assist Lithgow Senior Citizens Centre to find new premises	Council, Lithgow Senior Citizens Centre and community organisations	High
	Provide support to Gorrie Ban, Beehive and other similar organisations for older people	Council and community organisations	Medium
	Provide support to Men's Sheds and other men's activities	Council, Men's Sheds and other community organisations	High
Volunteering Promote the community and individual benefits of volunteering	Develop programs, including recognition programs to encourage older people to volunteer	Council, community organisations and Volunteering Central West	High
	Encourage younger people to volunteer	Council, community organisations, schools and Volunteering Central West	Medium
Work Older people have access to flexible working arrangements and part-time work during retirement	Model best practice in offering flexible working arrangements to older employees in preparation for semi - retirement and planned retirement	Council, Lithgow Business Association and local business	Medium
	Advocate to employers the value of offering flexible working arrangements to older employees	Council and Lithgow Business Association	Medium
	Council to offer phased retirement programs for its older employees and to provide pre-retirement seminars to employees	Council	Medium
Information provision	Provide regular information on services and activities	Council, local organisations	High

Social Engagement Action Plan			
Objective	Action	Key Partnerships	Priority*
Improve older people's awareness of local services and facilities	for older people through Council Connections, Council website, local media and other Council publications	and media	
	Encourage applications from the community for Council Financial Assistance to support older persons' organisations	Council, community organisations	High

Safety Action Plan			
Objective	Action	Key Partnerships	Priority*
Public places are designed with safety in mind	Incorporate crime prevention through environmental design principles in development control plans and the design/upgrade and maintenance of public places	Council and Crime Prevention Committee	High
Enhanced safety of older people using public places at night	Audit, and enhance where necessary, street lighting in areas of high pedestrian activity	Council and Crime Prevention Committee	Medium
Improved safety and community engagement of older people	Work with Housing NSW to develop strategies for enhancing the safety of older people and promoting community development in public housing areas	Housing NSW, Crime Prevention Committee and community	Medium
	Run a media campaign to encourage the community to report crime	Council, Police, community organisations	High
The needs of older people are considered in emergency planning and management	Develop an emergency management plan for vulnerable populations of older people	Police, emergency, health and welfare agencies	Medium

Education Action Plan			
Objective	Action	Key Partnerships	Priority*
Education	Maintain a continued focus	Council,	High

Education Action Plan			
Objective	Action	Key Partnerships	Priority*
Older people have social engagement and learning opportunities in retirement	on supporting and resourcing Learning City activities	educational providers, industry, community	
	Progressively implement a housebound library service for isolated older people	Council, community organisations	High
	Enhance Library resources for older people including talking books, large print books and e-books	Council, State Library of NSW	High
	Provide technology classes through the Library Technology Centre for older people	Council, Central West Community College, TAFE	High
	Continue to provide activities for older people at the Library including quarterly Lithgow Forums and during Seniors' Week	Council, Central West Community College, TAFE	High
	Provide expanded volunteering opportunities for older people at the Library	Council, Central West Volunteering and community organisations	High
	Encourage the establishment of tertiary education facilities in Lithgow	Council, tertiary institutions and TAFE	Medium
	Support Beehive to provide non-vocational community education facilities in Lithgow	Council and Beehive	Medium
		Work towards establishing a University of the Third Age in Lithgow	Council and community
	Improve the literacy levels of all age groups (including workplace literacy) and encourage further education	Council, TAFE and business	High

Chapter 7 Transport and Access

Transport and Access Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved Transport Planning and provision	Re-establish the Transport Working Group	Ministry of Transport, local transport providers, Council and community	High
	Improve transport access to Lithgow Hospital and Community Health Centre	Council, transport providers, the community and Lithgow Health Service	High
	Investigate options for improving transport in rural areas	Translinc, transport providers, Council and other partners	Medium
	Review Council's planning instruments and procedures to encourage public transport and footpath and cycle ways in future development areas	Council, transport providers and community	Medium
	Expand the availability of community transport options within Lithgow including shopper bus services	Translinc, Council and other partners	High
	Audit bus shelters in areas where older people live and progressively upgrade with safe and weather protective shelters	Council and bus company	Medium
	Produce a transport information directory	Council, transport providers, LINC and other partners	Medium
Improve access to public buildings and places	Establish a Council access committee	Council, community and business community	High
	Develop a Disability Access Plan for Council's footpath and community facilities	Council, community, relevant service providers and	Medium

Transport and Access Action Plan			
Objective	Action	Key Partnerships	Priority*
		business community	
	Prepare a pedestrian access and mobility plan to improve walkability that focuses on access to Lithgow CBD area	Council, community and business community	High
	Install an accessible public toilet facility in the centre of Lithgow CBD	Council	High
Enhanced pedestrian safety and amenity	Introduce measures to improve pedestrian safety and amenity in areas of high pedestrian activity	Council	High
Enhanced road safety of older people	Promote Council's road safety programs to older people and develop specific road safety programs for older people	Council and RTA	High

Chapter 8 Healthy Lifestyles and Recreation

Healthy Lifestyles and Recreation Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved recreation planning	Undertake strategic asset planning with the needs of older people in mind in relation to parks, playgrounds and recreation areas including play and picnic opportunities, seating, tables, BBQ's, water, shade and public toilets and consideration of safety	Council, user groups and community	High for Hassans Walls, Endeavour Park, Queen Elizabeth Park, Saville Park, Portland and Lake Wallace
	Develop and progressively implement the Farmers Creek corridor concept linking residential areas and key points of interest and including access to seats, water, shade and public toilets and consideration of safety	Council, user groups and community	High
	Develop a master plan for the Tony Luchetti Sportsground/Lithgow Memorial Pool/Watsford Playing Field area and	Council, user groups and community	High

Healthy Lifestyles and Recreation Action Plan			
Objective	Action	Key Partnerships	Priority*
	proceed with future stages of the indoor heated aquatic centre		
Adoption of healthy lifestyles within community	Promote social marketing programs that incorporate physical health, exercise, diet, emotional health and attitudes to ageing	Council, SWAHS and community	High
	Develop walking and cycling programs utilising community volunteers as leaders	Council, SWAHS and community	Medium
	Enhance the provision of exercise programs for older people	Council, SWAHS, sporting and recreation groups and community	Medium
	Promote health awareness programs relating to cardiovascular, respiratory, weight and diabetes	Council, SWAHS and community	High
	Develop a comprehensive Tobacco Control Policy to create smoke free environments in public places	Council, LBA, SWAHS and the community	Medium

Chapter 9 Housing and Residential Care

Housing Action Plan			
Objective	Action	Key Partnerships	Priority*
Increased housing choice. Improved housing affordability and location	Develop a Lithgow housing strategy	Council, Housing NSW, older people, private sector, residential care providers	High
	Review current LEP and development control plans and policies to facilitate the development of mixed densities around transport and service nodes	Council, community and housing industry	Medium
	Provide fact sheets for older people & developers on aged	Council, community and housing industry	Medium

Housing Action Plan			
Objective	Action	Key Partnerships	Priority*
	housing		
	Identify well located sites for seniors housing	Council, housing industry, Housing NSW and community	Medium
	Develop and actively promote Adaptable Housing Guidelines	Council, housing industry, and community	Medium
	Develop a community information strategy to promote housing options for seniors	Council, housing industry, Housing NSW and community	High
	Develop collaborative partnerships and joint-ventures to facilitate the provision of seniors housing, including singles housing	Council, housing industry, Housing NSW and community	Medium
Improved safety in the home	Sponsor workshops and provide information on safety in the home, prevention of falls and injury prevention, care issues and home security	Council, SWAHS ¹ , Housing NSW and community organisations.	Medium
	Develop collaborative arrangements for reducing the incidence of and for responding to domestic squalor	Council, SWAHS, Housing NSW and community organisations	Medium
Improved energy efficiency and housing suitability	Encourage energy efficient and sustainable housing	Council, housing industry, Housing NSW	Medium
	Enhance the provision of home modification and maintenance services	Department Ageing Disability and Home Care and community organisations	Medium

Residential Care Action Plan			
Objective	Action	Key Partnerships	Priority*
Ensure there are adequate residential aged care places to meet current and projected need	Facilitate the amalgamation of Tanderra and Coinda residential care facilities	Council, Coinda and Tanderra management	High
	Undertake a management and operational review of both facilities to identify	Council, Coinda and Tanderra	High

¹ Now Nepean Blue Mountains Local Health District

Residential Care Action Plan			
Objective	Action	Key Partnerships	Priority*
	opportunities for efficiencies and the sharing of resources and expertise	management	
	Undertake a detailed site assessment of the Tanderra and Coinda sites to determine their suitability for expansion to meet current and future need	Council, Coinda and Tanderra management	High
	Undertake a detailed site assessment of the former Hermitage site to determine its suitability for residential aged care	Council and residential aged care providers	High
	Develop a business plan including indicative costs and potential funding sources for both options of expansion on current sites or relocation to alternative site	Council, Coinda and Tanderra management	High
Ensure that there are sufficient short-term respite beds to meet community need	Expand the provision of respite beds in residential care, hospital and community based settings	Residential care facilities, Lithgow Health Service, community organisations and Council	High
Promote efficient management and operation of residential facilities	Encourage cooperation, resource sharing and joint purchase arrangements between all residential facilities	Residential facilities, Council.	Medium
Promote access to residential places for couples	Consider the needs of couples in residential aged care planning	Residential facilities, Council	Medium

Chapter 10 Health and Community Care

Health Action Plan			
Objective	Action	Key Partnerships	Priority*
Improved range of local health services	Establish a Section 355 Council Health Committee to advocate community needs in relation to health services	Council, Nepean Blue Mountains Local Health District, health practitioners	High

Health Action Plan			
Objective	Action	Key Partnerships	Priority*
		and community	
Encourage health promotion programs	Implement falls prevention programs	Nepean Blue Mountains Local Health District, Department of Health and Ageing and community organisations	High
	Develop a comprehensive Tobacco Control Policy for Lithgow. See Chapter 8 Healthy lifestyles and recreation recommendations		
Improved environmental health	Maintain Solid Fuel rebate program to encourage people to convert from coal heating	Council	Ongoing
Ensure there is a skilled local health workforce	Facilitate workforce planning to ensure there are adequate numbers of trained health staff	Council, Lithgow Health Service and medical practitioners	Medium

Community Care Action Plan			
Objective	Action	Key Partnerships	Priority*
Coordinated service planning	Lithgow HACC Forum, with the support of the Central West HACC Development Officer to develop a service planning and service improvement focus including identifying service gaps and how the service network can best meet the needs of older people to remain at home	Department of Ageing Disability and Home Care, Council, Nepean Blue Mountains Health Service, Centrelink, Department of Health and Ageing and community organisations	High
Improved service coordination	Council to seek funding to assist in employing an Aged/Disability Development Officer	Department of Ageing Disability and Home Care, Department of Health and Ageing and	High

Community Care Action Plan			
Objective	Action	Key Partnerships	Priority*
		Department of Families, Housing, Community Services and Indigenous Affairs	
	Council to seek reinstatement of a full-time ACAT service based in Lithgow	Council and community organisations	High
Improved service information	Council to assist with the regular update and wide distribution of the <i>Helping you at Home</i> directory of services for older people in Lithgow	Council, LINC and other community organisations.	High
	Council and local services to identify and promote a local telephone contact point for information on available services	Council, GP's, LINC, other community organisations and Commonwealth Respite and Carelink Centre	High

Chapter 11 Issues for Council

Issues for Council Action Plan			
Objective	Action	Key Partnerships	Priority*
Promote Population Growth	See Economic Development Strategy and Land Use Study		
Promote Economic Development	See Economic Development Strategy		
Encourage lifelong learning opportunities	Encourage the establishment of tertiary and community education facilities in Lithgow. See Chapter 6 Social Engagement		
	Improve the literacy levels of all age groups (including workplace literacy) and encourage further education	Council, TAFE and business	High

Issues for Council Action Plan			
Objective	Action	Key Partnerships	Priority*
Improve the Liveability of the community	Develop a liveability index and plan and prioritise community infrastructure provision and maintenance according to their contributions to this index	Council, Sydney West Area Health Service	High
	Proceed with future stages of the indoor heated aquatic centre and develop masterplan for showground/skatepark/aquatic centre precinct. See Chapter 8 Healthy Lifestyles and Recreation		
Promote Housing choice	Accelerate planning for walking, cycling and passive recreation See Chapter 8 Healthy Lifestyles and Recreation		
Model the financial impacts of the ageing population	Implement the Cultural Precinct concept and support the development of cultural industries	Council, business, funding bodies, cultural industries	High
	Encourage housing choice for all family types and ages. See Chapter 9 Housing and Accommodation		
	Model the financial impact over the next 10-15 years of reduced rate income and project changing infrastructure requirements	Council	High
Raise awareness of the impacts of an ageing population	Incorporate ageing issues in Council's Community Strategic Plan and annual Management Plans	Council	High
Provide appropriate customer service	Train customer service and other council staff in providing service to older people with dementia and other medical conditions	Council	Medium