



Noarlunga Safe Community

International Safe Communities
Redesignation Report
December 2009

A member of the International
Safe Communities Network



Introduction

Noarlunga Safe Community (NSC) is a long term community based injury prevention and safety program conducted within the southern suburbs of Adelaide, South Australia.*

The program strives to address all forms of injury, intentional and non-intentional, through a collaborative regional approach. The public sector, local government, private sector, voluntary groups and the community work together to increase safety and reduce the human, social and economic costs associated with injury.

The program, initiated in the early 1990s, first received official status as a member of the International Safe Communities Network in 1996, under the endorsement of the World Health Organisation (WHO) Collaborating Centre on Community Safety Promotion, from the Karolinska Institute in Sweden.

Over the next seven years Noarlunga Safe Community was embedded within the City of Onkaparinga, the local Council in the southern suburbs of Adelaide. Many projects were further developed and new initiatives identified that required a coordinated, comprehensive and inter-agency response.

During this period, while a number of injury prevention and safety projects were backed through external funding opportunities, others were cemented as core business of the agencies involved, ensuring a sustainable, long term approach.

In 2003, NSC sought redesignation as part of the International Safe Communities Network and approval was granted. Noarlunga Safe Community was the second Safe Community in the world to attain redesignation.

That report explicitly highlighted the progress, including outcomes and achievements, in a number of the key priority areas of workplace, home, recreation, community and personal safety.

The original program initiated through the then Noarlunga Health Services is now remembered as a mere shadow of the current program – a tapestry of community based injury prevention programs co-existing under the banner of Noarlunga Safe Community. Several original key priority areas still remain; other associated initiatives and projects have grown in number and diversity. The current priority areas include community safety, home safety, personal safety and workplace safety.

This report provides a snapshot of the ongoing progress of NSC since 2003, reflecting the vast breadth and depth of the community based injury prevention and safety program. The report is designed to highlight some of the achievements and successes of the program to date, referenced against the six indicators for membership of the International Safe Communities Network.

* This program was formally implemented under the title of 'Noarlunga Towards a Safe Community'.

The World Health Organisation Collaborating Centre on Community Safety Promotion has identified six indicators for membership as an International Safe Community. These are as follows:

1. An infrastructure based on partnership and collaborations, governed by a cross-sectional group that is responsible for safety promotion in their community.
2. Long term, sustainable programs covering both genders and all ages, environments, and situations.
3. Programs that target high risk groups and environments, and programs that promote safety for vulnerable groups.
4. Programs that document the frequency and causes of injuries.
5. Evaluation measures to assess their programs, processes and the effects of change.
6. Ongoing participation in national and international Safe Communities Networks.

The following report represents the re-application for continued membership of the International Safe Communities Network.

The accompanying CD provides a comprehensive account of many of the other initiatives undertaken since redesignation in 2003. These include program and project reports, national and international conference presentations, international publications and radio and TV interviews.



Indicator 1

An Infrastructure based on partnership and collaborations governed by a cross-sectional group that is responsible for safety promotion in their community

Since 1994 the Noarlunga Safe Community has had a well established Reference Committee with diverse representation from agencies, sectors and individuals across the City of Onkaparinga (formerly known as the City of Noarlunga).

This key group has continued to meet bi-monthly and has overall responsibility for the program's development and outcomes in relation to the four identified priority areas – community, home, personal and workplace safety.

Noarlunga Safe Community Reference Committee has representation from:

- City of Onkaparinga
- Department of Education and Children's Services
- Lonsdale and Hackham Business Associations
- Local High Schools and Primary Schools
- Local Community
- SafeWork SA
- Southern Primary Health
- Family and Youth Services
- South Australia Police
- Members of Parliament
- Safety Assist
- SA Metropolitan Fire Service
- Uniting Care Wesley – Children for Communities

Over the past sixteen years, representation on the Reference Committee has changed in accordance with the needs of initiatives being implemented – however, many of the original agencies continue to be actively involved and are deeply committed to the progress and sustainability of the program.

It is important to note that the upcoming redesignation meeting of Noarlunga Safe Community will mark the 80th occasion that the Reference Committee has met.

The four current key priority areas of community, home, personal and workplace safety have a number of subcommittees which provide specific local management and direction for the injury prevention and safety initiatives being designed, implemented and evaluated.

Some of these subcommittees are original members of NSC from its inception in 1996, whilst other committees and working parties have been formed to address new areas of community safety.

For example, within workplace safety, the Safe and Healthy Workplace in the South Project has a well established committee comprising representatives from education, health, local business employers and employees and business associations – all have played important roles in ensuring the ongoing sustainability and viability of the project.

Within the area of personal safety, there is a long term well established committee – Onkaparinga Collaborative Approach for the Prevention of Domestic and Family Violence. This committee meets regularly and represents more than 50 agencies in the southern area of Adelaide committed to working together to prevent the impact of violence on people’s lives.

All of the subcommittees and working parties report up through representatives on the Reference Committee.

Representatives on the Reference Committee also provide relevant information and data from their own internal committees. This information and progress contributes to a rich community safety overview for reporting through to the International Community Safety Network.

Noarlunga Safe Community does not have an overall coordinator for the program; its ongoing development has been assured by the Southern Adelaide Health Service (SAHS) as the main funding body and significant supporter of the program.

Over the years a range of new opportunities for funding specific projects and programs have also arisen from other agencies and sectors enabling innovative approaches to be implemented in the region. A number of these have been cited as good examples of community safety and have been shared widely across the state. However, it has been the commitment and goodwill of the individuals and agencies involved at the grass roots level that has underpinned Noarlunga Safe Community’s success and quality outcomes for injury prevention and safety.



Indicator 2

Long-term, sustainable programs covering both genders and all ages, environments, and situations

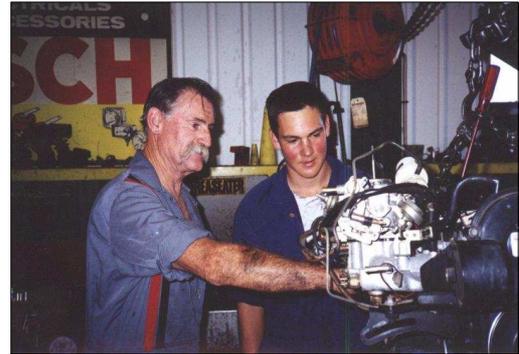
Noarlunga Safe Community has a number of priority areas that address Indicator 2. There are programs that engage people of all ages and cover a wide range of initiatives in varied settings and environments. Safe and Healthy Workplaces in the South, the 'flagship' program established in 1996, is one of these initiatives that continues to grow in diversity and reaches out to a large percentage of the local population.

Program Title

Safe and Healthy Workplaces in the South.

Program Aim

The Safe and Healthy Workplaces in the South program is a community based approach to injury prevention that aims to promote safer and healthier workplaces and reduce the risk of injury in small industry.



Strategies

The program, which has been running for the past thirteen years, aims to address all forms of workplace health and safety by developing regional partnerships between local small business operators through the Lonsdale and Hackham Business Associations, the Motor Trade Association, SafeWork SA and Southern Primary Health - Noarlunga (SPH-N).

Using a range of strategies, the program encourages small business employers to introduce and maintain long-term, safe working practices. Strategies include:

- Working with small business to promote safer and healthier workplaces by providing on-site OH&S workplace training opportunities such as fire safety, chemical safety, manual handling and eye safety.

Approximately 160 businesses have attended these workshops. Following each of the on-site workshops educational materials are made available to participants.

- The Blood Awareness in Small Business program, which seeks to lessen the transmission of blood borne diseases in the workplace and to educate employers and employees in small businesses about first aid procedures and health issues associated with blood borne viruses.

190 high risk small businesses located in the Lonsdale and Hackham light industrial areas continue to take part in this initiative.

- An Alcohol and Drugs Policy for the workplace was developed collaboratively with local employers. This was implemented to meet the needs of small business.
- Emergency First Aid courses which teach employers and employees how to handle emergency situations in the workplace, home and community.

A total of 28 First Aid evening courses have been run. Over 500 employers, employees and family members have received the nationally accredited Red Cross Basic First Aid Training.

- The Young Men's Dental Health Project provided young workers in the industrial settings of Lonsdale and Hackham with a range of dental health information and resources including a comprehensive directory of accessible and affordable dental care services. Poor dental health has been shown to impact on health and safety in the workplace.

1 500 Dental Resource Kits were distributed to young male workers in the Lonsdale and Hackham light industry areas.

- Employer and employee health risk factor screenings have taken place in central locations in both the Lonsdale and Hackham industrial estates. The screenings, run by Primary Health Care Nurses, provide an opportunity for workers to identify health risk factors and become familiar with how to access General Practitioners and the wide range of health services available to them.

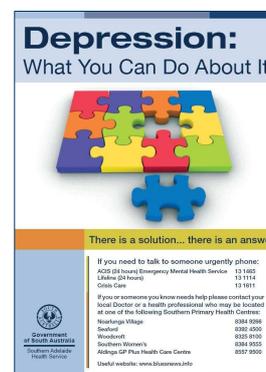
In excess of 450 workers have taken part in the health risk factor screenings.

- Community information on a broad range of topical health issues and programs [the Groups, Courses and Activities booklet] is promoted to the local small business community by Southern Primary Health – Noarlunga 4 times each year.

This has a reach of 300 businesses and approximately 4500 employers, employees and their families.

- Southern Primary Health – Noarlunga has developed a 'Depression in the Workplace' program in association with local Business Associations. Initiatives focus on practical programs and resources to deal with the issue of depression in the small business community.

The depression/suicide prevention program works 'face to face' with some 250 local small businesses. Each worksite has been provided with a range of information and educational resources to raise their awareness of mental health and depression and to promote access to services and support, both emergency and ongoing.



Outcomes

Approximately 300 small businesses and some 4500 workers and their families in the outer southern suburbs of Adelaide continue to participate in this innovative program and have worked towards achieving safer and healthier working environments.

For further information on the following Safe and Healthy Workplaces in the South initiatives please refer to the CD.

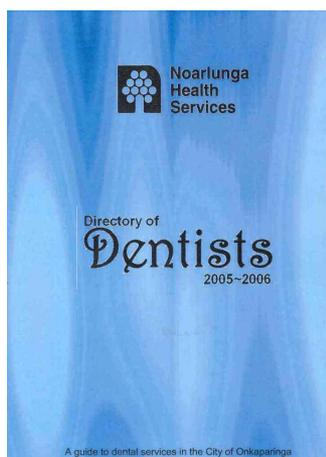
Depression in Small Business



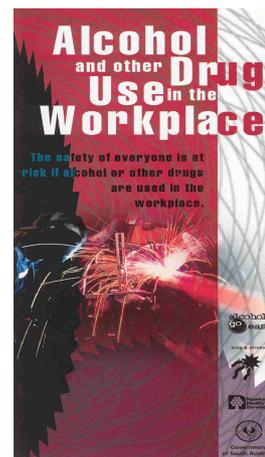
Blood Awareness in Small Business



The Young Men's Dental Health Project



Alcohol & other Drugs in the Workplace



Other Noarlunga Safe Community initiatives that also meet Indicator 2.

- **Safe Dreaming Trails to School Project**
- **Safety Connections Project**

For further information on these two projects please refer to the CD.

Indicator 3

Programs that target high-risk groups and environments, and programs that promote safety for vulnerable groups

Evidence shows that when initiatives for the prevention of injuries and the promotion of safety are aimed at those people most 'at risk', significant outcomes can be achieved to prevent longer term impacts on health and well-being.

Within the City of Onkaparinga, there are many different populations who have specific injury prevention and safety needs at the individual, family, community and intersectorial level.

There are several evidence-based programs that address such specific needs and result in positive outcomes for injury prevention and safety.

The following Noarlunga Safe Community programs reflect Indicator 3.

Program Title

Healthy Body Art – Primary School Education Program.

Program Aim

The aim of the program is for young people to be well informed about the risks of body piercing in order to make safe and healthy choices and remain free from infection and injury. The program specifically targets primary school students in Year 6/7.

Strategies

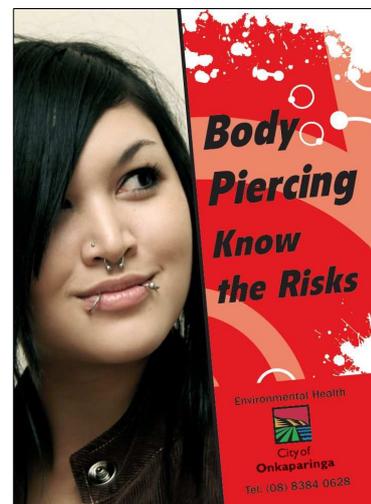
Body Art is increasing in popularity with young people. Body piercing in particular, is the fastest growing form of body decoration and is widely practiced within the community.

Young people, who are at a critical point in developing their identity and place in the world, need to fully understand the relationship between body art, blood, and the risk of contracting a blood borne virus.

The scope for body piercing is substantial and since body piercing is an invasive procedure, there can be health risks. Any penetration of the skin with resultant bleeding has the potential to cause infections including the transmission of blood borne viruses such as HIV and Hepatitis B or C.

As the trend for body piercing increases, it is crucial that young people are well informed about the risks associated with body art and the importance of safe, hygienic and professional body piercing.

As many adolescents already have a piercing, or are considering a piercing, a targeted education program, linked into the existing health education curriculum was developed.



The specific education program is run in conjunction with Environmental Health Officers from the City of Onkaparinga and Department of Education and Children's Services, South Australia (DECS). This program does not set out to condone body piercing – the information and resources provided are designed to get adolescents talking with their teachers and parents about the associated health issues involved with piercing.

Outcomes

In the last 12 months over 900 primary school students and their teachers have taken part in the education program – thus enabling young people in particular, to make informed choices about proceeding with a body piercing.

Program Title

Onkaparinga Collaborative Approach for the Prevention of Domestic Violence and Indigenous Family Violence (OCA).

Program Aim

The OCA addresses issues faced by women living with the experience of violence and abuse in partnerships, the children and young people in their care, and the men who use violent and abusive behaviours; it acknowledges the impact on the family and the community as a whole.

Strategies

The strength of the OCA lies in the increasing partnerships and the widening networks across the southern region to address domestic violence.

A number of initiatives have been identified and developed – these include:

- Providing support groups for women experiencing domestic violence along the continuum from crisis to medium and long-term support.
- Forums, training days, resources and action groups to assist families in dealing with the impact of children's violence towards parents & caregivers.
- Promoting the annual "Week without Violence" within the community and engaging with a wide range of stakeholders including schools, churches and businesses.
- An educational program designed for men who use violence and abuse.



Outcomes

Fifty-four government, non-government and community organisations have signed a Statement of Commitment reflecting their stance against domestic violence and Indigenous family violence and their continued willingness to work collaboratively in this complex injury prevention and safety area.

Program Title

Overdose Response for Intravenous [IV] Drug Users.

Program Aim

The aim of the project was to provide IV drug users in the local community with practical information on drug overdose and amphetamine use risk factors, and educate them about the simple first aid procedures to take prior to calling the ambulance service.

Overdose can happen to anyone who uses drugs, especially so if they mix their drugs. In many cases of overdose, death occurs several hours after the drug is injected. When an overdose occurs people who are present often have time to save a life by putting the person in the recovery position, performing simple first aid procedures and calling an ambulance.

Strategies

Strategies to maximise attendance at the First Aid sessions, by this difficult to reach group, included:

- The recruitment of IV drug users through Peer Educators at the Clean Needle Program at SPH-N.
- Provision of personal first aid kits and resuscitation masks to participants.
- Presentation of Certificates of Attendance to each participant.
- Drug and Alcohol Services, South Australia facilitating a specialist overdose risk factor session.
- SA Ambulance providing the first aid training, teaching correct procedures specifically related to drug overdose.



Outcomes

The number of overdose fatalities can be reduced when a community health & drug service provide appropriate information, training and support on how to respond to overdose. A small but significant number of IV drug users attended these information sessions.

The project has improved overdose outcomes for IV drug users in the community by:

- Providing IV drug users with practical information on drug overdose and amphetamine use risk factors.
 - Educating IV drug users about simple first aid procedures such as cardio-pulmonary resuscitation and expired air resuscitation.
 - Evaluating the effectiveness of the first aid sessions and making appropriate recommendations for future improvements.
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Program Title

Falls Prevention

Be Safe and Independent at Home

Pathways to Independence

Program Aim

The following two programs have been designed within the southern area to take care of people who have experienced a fall or who are at risk of falling. These programs include risk factor profiling, assessment, referral and service provision.

[Be Safe and Independent at Home](#)

Strategies

The Be Safe and Independent at Home community based injury prevention program began in 2000 and aimed to prevent injury among older people, especially those injuries due to falls in the home environment. The program also encouraged safe and independent living at home and in the community, and supported older people's ability to retain independence in and around their home.

Be Safe and Independent at Home operated as a free home advisory service conducted by Occupational Therapists through the Noarlunga Hospital. This program provided access to low cost equipment and environmental modifications to ensure a safe, injury free home environment.

The program provided falls prevention educational materials, community education programs and liaison and collaboration with local agencies.

The majority of referrals to the Be Safe and Independent at Home service were received from clients and their families.

Outcomes

Between 2000 and 2006, a total of 1320 home assessments were made.

Whilst this program has had significant and positive outcomes over a number of years, it was identified by the regional health service as resource intensive and therefore the ongoing viability for the longer term could not be guaranteed. This then led to the consideration of the prevention of falls from a broader regional perspective.

Pathways to Independence

Strategies

In 2006 a Falls Prevention Planning program was established by the Southern Adelaide Health Service to look at regional falls, falls injury data and current prevention services as priorities for the region.

As a result, the SAHS Falls Prevention Advisory Group established the Pathways to Independence program. A major goal for this initiative was to implement a program that would result in a reduction of falls resulting in unnecessary costly hospital admissions.

Strategies

Features of this regional approach to falls prevention are:

- a common entry point
- common assessment tool – to determine a person's risk factor profile, including assessment of risk factors associated with early cognitive and psychosocial decline
- appropriate referral – to give advice on agencies that might be available to offer support
- coordinated follow up – to develop a plan and liaise with GPs for follow up at 6 weeks and then at 6 and 12 monthly periods
- assessors who are trained in using a tool that reflects best practice and evidence based National Ageing Guidelines.

Outcomes

This relatively new program demonstrates how the acute, non-government and community sectors can work together using a collaborative approach.

- The total number of enrolments into the program in 2008/09 is 361.
- Referrals were received from major hospitals, selected GPs and some non-government agencies.
- Twice as many females as males were enrolled in the program with the majority 85+ years.
- The majority of identified fallers within the SAHS catchment area are from City of Onkaparinga.
- Between July 2007 and June 2008 there has been a 50% reduction in falls related admissions post intervention.
- Sixty-six clients were enrolled in the Early Cognitive and Psychosocial Decline pilot program – with an achievement of 37.5% reduction in admission. This is a significant result in the prevention of falls when addressing cognitive impairment and the impact of psychosocial issues.

Indicator 4

Programs that document the frequency and causes of Injuries

Evidence of the frequency and causes of injuries lies in the Injury Surveillance field where access to system-wide broad data sets is beneficial in the planning and development of injury prevention programs. While there are good examples of data surveillance in other states, access to comprehensive and relevant statistics is limited in South Australia in some areas of injury prevention and safety.

Noarlunga Safe Community has built its programs on a localized approach by accessing regional data specific to the nature and needs of individual programs. The following two initiatives clearly demonstrate the importance of collating good data upon which to build more rigorous program development and implementation.

Program Title

Healthy Body Art: Body Piercing Infection and Injury Research Report [2006].

Program Aim

To identify the rates of infection and injury experienced by people who have had a body piercing.

Strategies

During 2006, two surveys to document the rates of infection and types of injuries related to body piercing were conducted by Southern Primary Health – Noarlunga. In Australia, prior to this research, only anecdotal information existed regarding the type and extent of problems associated with body piercing.

The first survey was a detailed questionnaire distributed to 38 body piercing practitioners actively working in professional salons.

The second survey was presented to GPs throughout the southern suburbs of Adelaide via the Southern Division of General Practice. Surveys were distributed to individual GPs in many of the 96 practices in the region.

A total of 22 body piercing salons and 134 individual GPs from the Southern Division of General Practice responded to the survey.

Outcomes

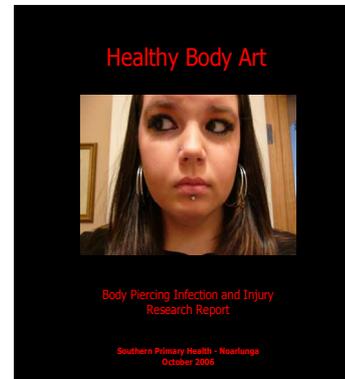
The 2006 Healthy Body Art: Body Piercing Infection and Injury Research Report [2006] established that infection and injury as a result of body piercing was a major health issue in the local community.

The research showed that during 2006, ninety-six percent of the 134 GPs surveyed in Adelaide's southern suburbs had treated people for body piercing infections or injuries during a 12 month period.

The survey of 134 GPs and 22 body piercing salons revealed that they had collectively treated more than 1400 people for body piercing infections or injuries during that time.

As well as identifying the high rates of infection and injury following a piercing, body piercers were asked to reflect on the action they felt needed to be taken to make access to professional body piercing safer for both practitioners and consumers.

This research project provided substantial information to enable a detailed plan of intervention to be further developed. A comprehensive analysis of the survey results laid the foundation for the development and implementation of two major projects, the Healthy Body Art – Primary School Education Program and the Infection Control Education and Training for Body Piercers and Tattooists Program.



These two programs aimed to:

- Ensure that those who provide skin penetration procedures are trained in best practice and have access to education and training in implementing a range of sound infection control and first aid strategies (see Indicator 5).
- Develop targeted educational resources and programs that link into existing health curriculum to enable young people to make informed and healthy choices in regard to body piercing (see Indicator 3).

Program Title

Handwashing Facilities in Primary Schools in the City of Onkaparinga.

Program Aim

The aim of this research was to identify the extent to which handwashing facilities were available and functional in primary schools in the City of Onkaparinga.



Strategies

In 2008 a perceived need for a targeted handwashing program was identified. This arose during student activity sessions in the current “Healthy Body Art” – Body Piercing Educational Program presented in schools by the EHO Department, City of Onkaparinga in consultation with Southern Primary Health – Noarlunga.

As part of that program Yr 6/7 students were engaged in a controlled handwashing experiment. Results were alarming to both teachers and children and reflected the inconsistencies in hand hygiene awareness levels. Furthermore, the EHO noted disparity between schools in the provision of facilities for appropriate handwashing.

An outbreak of gastroenteritis in a school in the southern area highlighted the need for attention to hygiene issues. A targeted questionnaire was developed and circulated to staff in 52 government and non-government primary schools within the City of Onkaparinga, seeking feedback in relation to handwashing facilities for students.

Outcomes

The survey results have created a clear, informative overview of handwashing facilities in primary schools within the City of Onkaparinga.

Responses were received from 21 schools. This response data clearly validated the perceived issue, that schools have concerns about the provision of adequate handwashing facilities for students – an important issue in promoting good infection control in the school environment.

The findings from this study demonstrate that almost half of the schools in the City of Onkaparinga area consider their handwashing facilities to be of average quality or below. Nearly 80% of teachers rated student handwashing facilities/practices as 'less than good'.

Analysis of the survey results confirms that inadequate handwashing facilities in some schools may hinder infection control. For staff, the issue is complicated by contributing factors such as financial constraints and restricted access to facilities due to inappropriate student behaviour.

The survey outcome supports the implementation of a handwashing/hand hygiene program for schools during 2010. It is recommended that the program be developed as a collaborative initiative by EHO's, teachers and students and delivered by an EHO to strengthen health outcomes for school communities within the City of Onkaparinga.

Indicator 5

Evaluation measures to assess their programs, processes and the effects of change

Engaging the community to address issues that impact on their health, safety and well-being is a basis from which all Noarlunga Safe Community programs are derived. The planning and implementing of initiatives involves a high degree of commitment and focus; the history of NSC reflects many examples of this.

Having a comprehensive picture of effectiveness however is fundamental to the success of substantial injury prevention and safety programs. With evaluation measures underpinning all programs, the following two exemplars reflect the commitment in meeting Indicator 5.

Program Title

Keep Safe Stay Cool.

Program Aim

The program aims to encourage young people to understand the importance of healthy relationships with a view to reducing the incidence and tolerance of interpersonal violence.

Strategies

Keep Safe Stay Cool is an internationally evidence-based early intervention program targeting young people between the ages of thirteen and twenty-five years. It uses a peer education model to promote healthy relationships as opposed to interpersonal violence. Keep Safe Stay Cool utilises a framework of human rights to encourage change in young people's beliefs, attitudes and behaviours regarding interpersonal relationships.

After extensive training, provided by a SPH-N social worker, peer educators design and present interactive sessions to high school classes and youth groups. The peer educators work in mixed gender pairs to present to mixed classes.



Outcomes

Keep Safe Stay Cool has developed strategies to evaluate longitudinal change in relation to the prevention of interpersonal violence. Pre and post testing, re-visiting classes after a year, enlisting the teacher's help to review attitudinal changes and holding focus groups in control group situations have been strategies that have been employed.

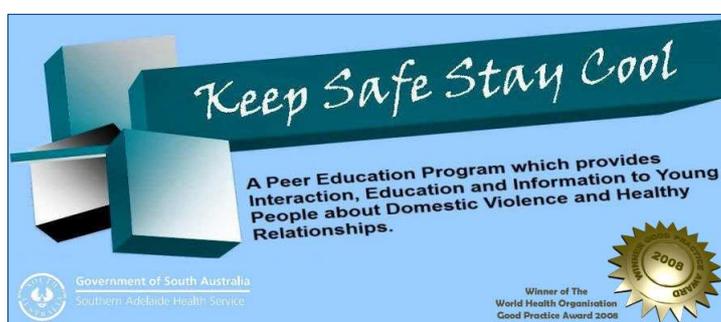
Since its inception the program has trained 58 peer educators, run 800 sessions and reached out to over 14 000 young people.

While Keep Safe Stay Cool is not a therapeutic program, there are indicators that it has value for young people who are dealing with issues of abuse and who need support to access appropriate interventions.

Keep Safe Stay Cool was the winner of the World Health Organisation's Good Practice Award, 2008.

Detailed and extensive results of the evaluation can be found at the following website:

Website: www.keepsafestaycool.com.au/



Program Title

Infection Control Education and Training for Body Piercers and Tattooists.

Program Aim

The aim of the program was to reduce the incidence of workplace infection within body piercing and tattooing businesses located in SA as identified by the Healthy Body Art: Body Piercing Infection and Injury Research Report [2006]. This was achieved through the development and delivery of specialist Infection Control educational workshops for Body Piercers & Tattooists. The workshop information was supported by a series of Infection Control information posters suitable for display in salons.

This program was funded by SafeWork SA's OHSW Small Grants Program.

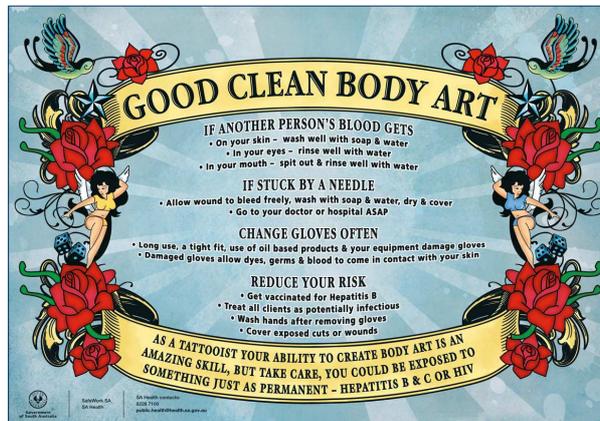
Strategies

A Project Steering Committee and Industry Consultation Committee were formed to provide direction for the Infection Control Program.

The Industry Consultation Committee in particular was to represent the views of professional Body Piercers and Tattooists, to promote the program within the local body piercing and tattooing community and to advise on the development of project materials and participate in the evaluation process.

The Infection Control Consultant and the Educator from the Hepatitis C Council of SA visited businesses to provide a comprehensive audit of infection control issues.

Following verification of these common infection control issues and in liaison with the Industry Consultation Committee, solutions and practical strategies found to be effective were assessed for inclusion in the Infection Control Education workshops.



Following the workshop program there was a detailed evaluation of the success and effectiveness of the workshops and the Infection Control posters. Through questionnaires and face-to-face interviews, participants were asked about their perceptions of the effectiveness of the workshops and resources, in terms of the key information provided and the relevance of this information to their practice.

Outcomes

Three Tattooing Infection Control workshops and two Body Piercing Workshops were held in the northern, southern and central suburbs of Adelaide. A total of 70 Tattooists and 50 Body Piercers attended the four hour workshops.

A total of 23 metropolitan and country Tattoo Studios had representatives attend the workshops. This participation rate of 77% is significant when one considers there are only 30 professional tattooing studios operating in SA.

A specialized Statewide Infection Control workshop was held for Environmental Health Officers [EHO's]. Environmental Health Officers play an important role in environmental health and safety. Twenty four EHO's from across South Australia attended the full day workshop.

The implementation of the Infection Control Education and Training for Body Piercers and Tattooists Program has, in conjunction with strong Industry representation and support, resulted in the following outcomes:

- Employers and employees engaged in skin penetration activities have been provided with specific, practical and cost effective infection control strategies and resources to protect themselves against infection and disease.

- Feedback from employers and employees involved in the program has shown that the use of a collaborative agency approach has effectively raised awareness of health and safety issues in tattoo studios and piercing salons and led to genuine change in the approach to workplace infection control and safety.
- Employers and employees in the Body Piercing and Tattooing Industry have gained a greater understanding of their rights and responsibilities in relation to establishing and maintaining a safe working environment both for themselves and for their clients.
- Current EHOs have been provided with up to date information regarding skin penetration infection control techniques.
- A specific unit of study on Infection Control in Body Piercing and Tattoo Studios has been included in the 2009 Flinders University, Bachelor of Environmental Health course.

For further information on these two projects please refer to the CD.

Indicator 6

Ongoing participation in national and international Safe Communities networks

The Noarlunga Safe Community program has a strong history of professional liaison at a national and international level. This is evidenced by participation at national and international conferences, the hosting of many overseas visitors, regular e-mail contacts and the strategic positioning of web-sites to disseminate information.

International Conferences

Since redesignation in 2003, representatives from Noarlunga Safe Community have attended and presented papers at the following International Safe Community Conferences:

- 2nd Asian Regional Conference on Safe Communities, Dhaka, 2005
- 17th International Safe Communities Conference, Christchurch, NZ, 2008

These presentations can be viewed on the accompanying CD.

National and State links

Noarlunga Safe Community is an active member of the Australian Safe Communities Foundation (ASCF).

The ASCF has been set up to advocate for safety promotion at a national level and to complement the activities of established injury prevention and community safety organisations within states and local regions.

The ASCF is a Certifying Centre for Safe Community Programs on behalf of the WHO Collaborating Centre on Community Safety Promotion, Department of Public Health Sciences, Division of Social Medicine, Karolinska Institute, Sweden.

Representatives from NSC are actively involved in the peer review process for potential International Safe Community applicants.

Noarlunga Safe Community has demonstrated a willingness to share expertise and provide leadership to local governments in the development of safer communities. A particular focus has already been placed on the development of relationships and active support of two prospective Safe Communities in South Australia, Barossa and Wandana.

Noarlunga Safe Community is regularly invited to present injury prevention programs and safety initiatives to other local and State governments as well as international delegations.

Noarlunga Safe Community – Sherpur Safe Community, Bangladesh Injury Prevention Programs

Noarlunga Safe Community continues to provide advocacy and an enabling role through its working partnerships with the communities and other agencies both within Australia and internationally.

One example of this proactive approach is the liaison during 2000–2006 when Noarlunga Safe Community worked collaboratively with Sherpur Safe Community [SSC] Bangladesh, in developing and implementing two important initiatives – an innovative eye injury prevention program for local metal workers and a local tubewell handle safety program for rural village communities in the Sherpur district.

At a community level, local small businesses in the Lonsdale and Hackham Industrial estates have provided project support through the donation of new and used safety equipment. The local business community has embraced the concept and taken pride in supporting workers from a developing country. In the past two projects one local business employer, who is also a member of the Noarlunga Safe Community Reference Committee, has played an integral role in the development of the work in Bangladesh.

Noarlunga Safe Community will maintain its International Safe Communities role by working in 2010 with the SSC in a collaborative injury prevention program – a hearing loss prevention program to support textile mill workers.

In this way Noarlunga Safe Community will be able to continue and strengthen this unique collaborative partnership which is recognised throughout the International Safe Communities movement.

This collaborative liaison between Sherpur and Noarlunga demonstrates ongoing participation in international Safe Communities networks and provides the opportunity for us to not only support others but to learn and grow as real members of the global community.





**Government
of South Australia**

SA Health

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