



Board of Management

27 April 2016



local councils working together to protect the health of the community



**EASTERN HEALTH AUTHORITY
BOARD OF MANAGEMENT MEETING**

WEDNESDAY – 27 April 2016

Notice is hereby given that a meeting of the Board of Management of the Eastern Health Authority will be held at the EHA Offices, **101 Payneham Road, St Peters** on Wednesday 27 April 2016 commencing at 6.30 pm.

A light meal will be served at 6.00 pm.

A handwritten signature in black ink, which appears to read 'M. Livori'.

**MICHAEL LIVORI
CHIEF EXECUTIVE OFFICER**

AGENDA

EASTERN HEALTH AUTHORITY BOARD OF MANAGEMENT MEETING

WEDNESDAY – 27 April 2016

Commencing at 6.30 pm

- 1 Opening
- 2 Apologies
- 3 Chairperson's remarks
- 4 Confirmation of minutes – 24 February 2016
- 5 Matters arising from the minutes

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6.1 FINANCE REPORT AND SECOND (DECEMBER 2015) BUDGET REVIEW FOR 2015/2016

Author: Michael Livori

Ref: AF15/10

Summary

In accordance with regulation 9 of the Local Government (Financial Management) Regulations 2011

- (1) *A council, council subsidiary or regional subsidiary must prepare and consider the following reports:*
- (a) *at least twice, between 30 September and 31 May (both dates inclusive) in the relevant financial year (where at least 1 report must be considered before the consideration of the report under sub regulation (1)(b), and at least 1 report must be considered after consideration of the report under sub regulation (1)(b))—a report showing a revised forecast of its operating and capital investment activities for the relevant financial year compared with the estimates for those activities set out in the budget presented in a manner consistent with the note in the Model Financial Statements entitled Uniform Presentation of Finances;*
 - (b) *between 30 November and 15 March (both dates inclusive) in the relevant financial year—a report showing a revised forecast of each item shown in its budgeted financial statements for the relevant financial year compared with estimates set out in the budget presented in a manner consistent with the Model Financial Statements.*

Report

The second review of the Eastern Health Authority's (EHA's) budget for the 2015/2016 financial year was presented to board members at the meeting of 24 February 2016 where the following resolution was made:

Cr D Shetliffe moved:

That:

1. The First (September 2015) Budget Review for 2015/2016 Report is received.
2. The amended budget for 2015/2016 as detailed in attachment 2 of the First (September 2015) Budget Review for 2015/2016 Report is adopted.

Seconded by Cr M Ryan

CARRIED UNANIMOUSLY 3: 022016

Correspondence received from all Constituent Councils which details the respective council's approval for the budget variations proposed is provided as attachment 1. Remaining correspondence from Constituent Councils will be tabled at the meeting.

EHA has now complied with clause 25 (3) of Schedule 2 of the Local Government Act, in seeking approval from its Constituent Councils before amending its budget.

Accordingly, it is now appropriate that EHA officially resolve to amend the budgeted financial statements for 2015/2016. Upon making the resolution, the amended budgeted financial statements for 2015/2016 as detailed in attachment 2 to this report will be effective.

RECOMMENDATION

That it be a recommendation to the Eastern Health Authority:

1. The December 2015 (Second) Budget Review Report is received.
2. The amended budgeted financial statements for 2015/2016 as detailed in attachment 2 of the December 2015 (Second) Budget Review Report are adopted.

REFERENCE: S/04006 (287453)
ENQUIRIES TO: MARIO BARONE
TELEPHONE: (08) 8366 4539



**City of
Norwood
Payneham
& St Peters**

**CHIEF
EXECUTIVE'S
OFFICE**

14 April 2016

Mr Michael Livori
Chief Executive Officer
Eastern Health Authority
PO Box 275
STEPNEY SA 5069

E-MAILED
14/4/16

Dear Michael

EASTERN HEALTH AUTHORITY 2015-2016 SECOND BUDGET REVIEW

Thank you for your letter dated 10 March 2016, in which you have requested the Council's consideration of the Authority's Second Budget update for the 2015-2016 Financial Year.

It is noted that the 2015-2016 Second Budget Review is reporting an Operating Deficit of \$24,917, which is in line with the Adopted Operating Deficit.

Given that the variations which have been requested will have no impact on the City of Norwood Payneham & St Peters budget for the 2015-2016 Financial Year, I approve the variations on behalf of the City of Norwood Payneham & St Peters, pursuant to the delegated authority granted to me, as the Chief Executive Officer, by the Council.

Should you require any further information, please contact me on 8366 4539 or email mbarone@npsp.sa.gov.au.

Yours sincerely


Mario Barone
CHIEF EXECUTIVE OFFICER

cc Acting General Manager, Corporate Services

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Norwood SA 5067

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MH:MDB
Container Ref: B280

Enq: Michelle Hammond
Ph: 8366 9260

11 April 2016

Mr Michael Livori
Chief Executive Officer
Eastern Health Authority
PO Box 275
STEPNEY SA 5069

Dear Mr Livori

Eastern Health Authority Second Budget Review for 2015/2016

I wish to advise that at its meeting held on Tuesday 5 April 2016 Council noted the proposed changes to the Authority's 2nd Revised Budget for 2015/2016

If you have any queries, please contact me on the above number.

Yours sincerely



Michelle Hammond CPA
General Manager Corporate & Community Services

12 APR 2016



18 April 2016

Mr Michael Livori
Chief Executive Officer
Eastern Health Authority Inc
PO Box 275
Stepney SA 5069

Dear Michael

Eastern Health Authority (EHA) Second Budget Review for 2015/2016

Thank you for your letter dated 10 March 2016 in relation to the Eastern Health Authority Second Budget Review for 2015/2016.

Having reviewed the Financial Reports in item 6.2 of the Eastern Health Authority Board of Management Meeting 24 February 2016, the budget variation is approved.

If you require any further information please contact me on 8366 4255.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Paul Deb', with a stylized flourish at the end.

Paul Deb
Chief Executive Officer

| EASTERN HEALTH AUTHORITY STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDING 30 JUNE 2016 | | | | | |
|--|---|-----------------------------|---------------------|--------------------|-----------------------------|
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | REVISED BUDGET 2015/2016 |
| \$ | INCOME | \$ | \$ | \$ | \$ |
| 1,576,605 | Council Contributions | 1,609,306 | - | - | 1,609,306 |
| 157,329 | Statutory Charges | 194,000 | - | - | 194,000 |
| 303,449 | User Charges | 307,000 | - | - | 307,000 |
| 117,983 | Grants, subsidies and contributions | 126,500 | - | - | 126,500 |
| 20,871 | Investment Income | 20,000 | - | - | 20,000 |
| 6,607 | Other Income | 14,000 | - | - | 14,000 |
| 2,182,844 | TOTAL INCOME | 2,270,806 | - | - | 2,270,806 |
| | EXPENSES | | | | |
| 1,353,987 | Employee Costs | 1,616,000 | (30,000) | (60,000) | 1,526,000 |
| 608,512 | Materials, contracts and other expenses | 576,200 | 30,000 | 60,000 | 666,200 |
| 24,016 | Finance Charges | 22,672 | - | - | 22,672 |
| 83,705 | Depreciation | 80,851 | - | - | 80,851 |
| 2,070,220 | TOTAL EXPENSES | 2,295,723 | - | - | 2,295,723 |
| 112,624 | Operating Surplus/(Deficit) | (24,917) | - | - | (24,917) |
| - | Net gain (loss) on disposal of assets | - | | | - |
| 112,624 | Net Surplus/(Deficit) | (24,917) | - | - | (24,917) |

| EASTERN HEALTH AUTHORITY STATEMENT OF CASH FLOWS FOR THE YEAR ENDING 30 JUNE 2016 | | | | | |
|--|--|-----------------------------|---------------------|--------------------|-----------------------------|
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | REVISED BUDGET 2015/2016 |
| \$ | CASHFLOWS FROM OPERATING ACTIVITIES | \$ | \$ | \$ | \$ |
| | <u>Receipts</u> | | | | |
| 2,159,499 | Operating Receipts | 2,250,806 | - | - | 2,250,806 |
| 25,557 | Investment Receipts | 20,000 | - | - | 20,000 |
| | <u>Payments</u> | | | | |
| (2,036,294) | Operating Payments to Suppliers & Employees | (2,192,200) | - | - | (2,192,200) |
| (25,237) | Interest Expense | (22,672) | - | - | (22,672) |
| 123,525 | Net Cash Provided/(Used) by Operating Activities | 55,934 | - | - | 55,934 |
| | CASH FLOWS FROM FINANCING ACTIVITIES | | | | |
| - | Loans Received | - | | | - |
| (53,369) | Loan Repayments | (55,934) | - | - | (55,934) |
| (53,369) | Net Cash Provided/(Used) by Financing Activities | (55,934) | - | - | (55,934) |
| | CASH FLOWS FROM INVESTING ACTIVITIES | | | | |
| | <u>Receipts</u> | | | | |
| - | Sale of Replaced Assets | - | - | - | - |
| | <u>Payments</u> | | | | |
| - | Expenditure on renewal / replacements of assets | - | - | - | - |
| - | Expenditure on new / upgraded assets | - | - | - | - |
| - | Distributions paid to constituent Councils | (200,000) | - | - | (200,000) |
| - | Net Cash Provided/(Used) by Investing Activities | (200,000) | - | - | (200,000) |
| 70,156 | NET INCREASE (DECREASE) IN CASH HELD | (200,000) | - | - | (200,000) |
| 719,815 | CASH AND CASH EQUIVALENTS AT BEGINNING OF REPORTING PERIOD | 759,815 | 30,156 | | 789,971 |
| 789,971 | CASH AND CASH EQUIVALENTS AT END OF REPORTING PERIOD | 559,815 | 30,156 | - | 589,971 |

| EASTERN HEALTH AUTHORITY STATEMENT OF FINANCIAL POSITION | | | | | |
|--|--|-----------------------------|---------------------|--------------------|-----------------------------|
| FOR THE YEAR ENDING 30 JUNE 2016 | | | | | |
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | REVISED BUDGET 2015/2016 |
| \$ | CURRENT ASSETS | \$ | \$ | \$ | \$ |
| 789,971 | Cash and Cash Equivalents | 559,815 | 30,156 | | 589,971 |
| 162,272 | Trade & Other Receivables | 178,512 | (16,240) | | 162,272 |
| - | Other | - | - | - | - |
| 952,243 | TOTAL CURRENT ASSETS | 738,327 | 13,916 | - | 752,243 |
| | CURRENT LIABILITIES | | | | |
| 108,708 | Trade & Other Payables | 181,322 | (72,614) | | 108,708 |
| 236,220 | Provisions | 251,094 | (14,874) | | 236,220 |
| 55,934 | Borrowings | 50,920 | | | 50,920 |
| - | Other | - | - | - | - |
| 400,862 | TOTAL CURRENT LIABILITIES | 483,336 | (87,488) | - | 395,848 |
| 551,381 | NET CURRENT ASSETS/(CURRENT LIABILITIES) | 254,991 | 101,404 | - | 356,395 |
| | NON-CURRENT ASSETS | | | | |
| 441,095 | Equipment | 363,098 | (2,854) | | 360,244 |
| - | Other | - | - | - | - |
| 441,095 | TOTAL NON-CURRENT ASSETS | 363,098 | (2,854) | - | 360,244 |
| | NON-CURRENT LIABILITIES | | | | |
| 41,662 | Provisions | 43,218 | (1,556) | | 41,662 |
| 435,198 | Borrowings | 384,279 | | | 384,279 |
| 476,860 | TOTAL NON-CURRENT LIABILITIES | 427,497 | (1,556) | - | 425,941 |
| 515,616 | NET ASSETS | 190,592 | 100,106 | - | 290,698 |
| | EQUITY | | | | |
| 515,616 | Accumulated Surplus/(Deficit) | 190,592 | 100,107 | - | 290,699 |
| 515,616 | TOTAL EQUITY | 190,592 | 100,107 | - | 290,699 |

| EASTERN HEALTH AUTHORITY STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDING 30 JUNE 2016 | | | | | |
|---|--------------------------------------|-----------------------------|---------------------|--------------------|-----------------------------|
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | REVISED BUDGET 2015/2016 |
| \$ | ACCUMULATED SURPLUS | \$ | \$ | \$ | \$ |
| 402,992 | Balance at beginning of period | 415,509 | 100,107 | | 515,616 |
| 112,624 | Net Surplus/(Deficit) | (24,917) | - | - | (24,917) |
| - | Distribution to Constituent Councils | (200,000) | - | - | (200,000) |
| 515,616 | Balance at end of period | 190,592 | 100,107 | - | 290,699 |
| 515,616 | TOTAL EQUITY | 190,592 | 100,107 | - | 290,699 |

6.2 FINANCE REPORT AND THIRD (MARCH 2016) BUDGET REVIEW FOR 2015/2016

Author: Michael Livori
Ref: AF15/10

Summary

So that members can ensure that Eastern Health Authority (EHA) is operating according to its adopted budget, financial performance is regularly monitored and statutory budget reviews are considered.

In accordance with regulation 9 of the *Local Government (Financial Management) Regulations 2011*,

- (1) *A council, council subsidiary or regional subsidiary must prepare and consider the following reports:*
- (a) *at least twice, between 30 September and 31 May (both dates inclusive) in the relevant financial year (where at least 1 report must be considered before the consideration of the report under sub regulation (1)(b), and at least 1 report must be considered after consideration of the report under sub regulation (1)(b))—a report showing a revised forecast of its operating and capital investment activities for the relevant financial year compared with the estimates for those activities set out in the budget presented in a manner consistent with the note in the Model Financial Statements entitled Uniform Presentation of Finances;*
 - (b) *between 30 November and 15 March (both dates inclusive) in the relevant financial year—a report showing a revised forecast of each item shown in its budgeted financial statements for the relevant financial year compared with estimates set out in the budget presented in a manner consistent with the Model Financial Statements.*

This report provides the third and final of the budget reviews required in accordance with regulation 9 (1) and relates to the financial performance of EHA between 1 July 2015 and 31 March 2016. It provides the opportunity to amend the adopted budget in line with revised projections of income and expenditure for the 2015/2016 financial year.

Report

The report below gives a simple analysis of year to date income, expenditure and operating result.

| Eastern Health Authority - Financial Statement (Level 1) | | | | |
|--|--------------|--------------|--------------|-------------|
| 1 July 2015 to 31 March 2016 | | | | |
| | Actual | Budgeted | \$ Variation | % Variation |
| Total Income | \$ 1,955,263 | \$ 2,000,776 | \$ (45,513) | -2% |
| Total Expenditure | \$ 1,533,288 | \$ 1,653,461 | \$ (120,172) | -7% |
| Operating Result | \$ 421,975 | \$ 347,315 | \$ 74,660 | 21% |

The report shows that for the reporting period income was \$45,513 (-2.0%) less than budgeted and expenditure was \$120,172 (-7%) less than budgeted.

The net result is a variation of \$74,660 on the budgeted year to date comparative operating result.

A more detailed report is provided as attachment 1. The report provides detail on year to date performance of individual budget lines. Any variation greater than \$5,000 is detailed in the table below with explanatory comments.

| Summary Table of Funding Statement Variations | | | | |
|---|-------------|-------------|------------|--|
| Favourable variances are shown in black and unfavourable variances are shown in red . | | | | |
| Description | YTD Budget | YTD Actual | Variation | Comment |
| Income | | | | |
| Food Inspection Fees | \$60,000 | \$43,671 | (\$16,329) | Delay in appointment of staff to budgeted positions. -10K variation requested. |
| Fines and Expiations | \$67,500 | \$17,882 | (\$49,618) | Decrease in expiations issued. -40K variation requested. |
| City Of Unley | \$69,500 | \$90,438 | \$20,938 | SRF license investigations and approval. 20K variation requested. |
| Expenditure | | | | |
| Employee Costs | \$1,074,000 | \$1,015,437 | (\$58,563) | Delay in appointment of staff to budgeted positions. -70K variation requested. |
| Maintenance | \$48,750 | \$41,822 | (\$6,928) | -5K variation requested at this point in time. |
| Printing and Stationery | \$22,500 | \$13,439 | (\$9,061) | -5K variation requested. |
| Income Protection | \$16,000 | \$10,953 | (\$5,047) | Reduction in premium for this FY due to staff levels. -5K reduction requested. |
| Website Upgrade | \$- | \$- | | 20K variation requested for website upgrade. |

The total of the operating budget variations requested in relation to the above table result see a \$35K improvement to the estimated budget

result. The estimated result is a surplus of \$10,083 compared to the previous estimate of a deficit of \$24,917.

It is requested that the variations resulting from the changes to operating budget lines are incorporated into a revised financial statement for 2015/2016.

A summary of the variations requested within the Financial Statements are provided in the following table. Variations are only required to the Statement of Comprehensive Income.

| Revised Statement of Comprehensive Income | | | | |
|--|------------------|-----------------|------------------|--------------------------------|
| | Adopted Budget | Variation | Revised Budget | Comment |
| Income | | | | |
| Statutory Charges | 194,000 | (50,000) | 144,000 | Decrease in fines issued |
| User Charges | 307,000 | 20,000 | 327,000 | Extra income from SRF contract |
| Total Income | 2,270,806 | (30,000) | 2,240,806 | |
| Expenses | | | | |
| Employee Costs | 1,526,000 | (70,000) | 1,456,000 | See comments in body of report |
| Material, contracts and other expenses | 666,200 | 5,000 | 671,200 | See comments in body of report |
| Total Expenses | 2,295,723 | (65,000) | 2,230,723 | |
| Operating Surplus/(Deficit) | (24,917) | 35,000 | 10,083 | |
| Revised Statement of Cash Flows | | | | |
| | Adopted Budget | Variation | Revised Budget | Comment |
| Net Increase (Decrease) In Cash Held | | | | |
| Cash and Cash Equivalents at End of Reporting period | 589,815 | 35,000 | 624,971 | |
| Revised Statement of Financial Position | | | | |
| | Adopted Budget | Variation | Revised Budget | Comment |
| Current Assets | | | | |
| Cash and cash Equivalents | 589,815 | 35,000 | 624,971 | |
| Total Current Assets | 752,243 | 35,000 | 787,243 | |
| Net Current Assets(Current Liabilities) | 356,395 | 35,000 | 391,395 | |
| Net Assets | 290,698 | 35,000 | 325,698 | |

| Revised Statement of Financial Position (cont.) | | | | |
|---|----------------|---------------|----------------|---------|
| Equity | | | | |
| | Adopted Budget | Variation | Revised Budget | Comment |
| Accumulated Surplus/(Deficit) | 290,698 | 35,000 | 325,698 | |
| Total Equity | 290,698 | 35,000 | 325,698 | |
| Revised Statement of Change in Equity | | | | |
| | Adopted Budget | Variation | Revised Budget | Comment |
| Accumulated Surplus | | | | |
| Net Surplus/(Deficit) | (24,917) | 35,000 | 10,083 | |
| Balance at End of Period | 290,699 | 35,000 | 325,699 | |
| Total Equity | 290,699 | 35,000 | 325,699 | |

Included as Attachment 2 is a copy of the revised 2015/2016 Budgeted Statutory Financial Statements which include the:

- Revised Statement of Comprehensive Income
- Revised Statement of Cash flows
- Revised Statement of Financial Position
- Revised Statement of Changes in Equity

A Bank Reconciliation and Available Funds report for the period ending 30 March 2016 is provided as attachment 3. It shows that at 30 March 2016 available funds were \$746,090 in comparison with \$284,031 on 30 December 2015.

Pursuant to clause 25 (3) of Schedule 2 of the Local Government Act, EHA must seek approval from its Constituent Councils before amending its budget. A written request for the approval of the amendments must be sent to all Constituent Councils which must be accompanied by the proposed amendments.

If the Constituent Councils grant approval then EHA may officially resolve to amend the budget and upon making that resolution, the amended budget will be effective.

RECOMMENDATION

That:

1. The Finance Report and Third (March 2016) Budget Review Report for 2015/2016 be received.
2. Correspondence is forwarded to EHA's Constituent Councils requesting that the amendments to the Budgeted Financial Statements as detailed in attachment 2 are approved.

| Eastern Health Authority - Financial Statement (Level 3) | | | | |
|--|---------------------|---------------------|--------------------|-------------|
| 1 July 2015 to 31 March 2016 | | | | |
| Income | Actual | Budgeted | \$ Variation | % Variation |
| Constituent Council Income | | | | |
| City of Burnside | \$415,037 | \$415,037 | \$0 | 0% |
| City of Campbelltown | \$389,840 | \$389,840 | \$0 | 0% |
| City of NPS | \$490,646 | \$490,646 | \$0 | 0% |
| City of Prospect | \$219,621 | \$219,621 | \$0 | 0% |
| Town of Walkerville | \$94,162 | \$94,162 | \$0 | 0% |
| Total Constituent Council Contributions | \$ 1,609,306 | \$ 1,609,306 | \$ - | 0% |
| Statutory Charges | | | | |
| Food Inspection fees | \$43,671 | \$60,000 | (-\$16,329) | -27% |
| Legionella registration and Inspection | \$13,894 | \$13,334 | \$560 | 4% |
| SRF Licenses | \$867 | \$0 | \$867 | 0% |
| Fines | \$17,882 | \$67,500 | (-\$49,618) | -74% |
| Total Statutory Charges | \$ 76,314 | \$ 140,834 | \$ (64,520) | -46% |
| User Charges | | | | |
| Immunisation - non funded vaccines | \$30,912 | \$33,750 | (-\$2,838) | -8% |
| Immunisation - Worksites | \$1,875 | \$0 | \$1,875 | 0% |
| Food Auditing | \$51,491 | \$48,000 | \$3,491 | 7% |
| City of Unley | \$90,438 | \$69,500 | \$20,938 | 30% |
| Food Safety Training | \$455 | \$1,500 | (-\$1,045) | -70% |
| Total User Charges | \$ 175,170 | \$ 152,750 | \$ 22,420 | 15% |
| Grants, Subsidies, Contributions | | | | |
| School Based immunisation Program | \$42,266 | \$42,250 | \$16 | 0% |
| Child Immunisation register | \$33,068 | \$30,136 | \$2,932 | 10% |
| Total Grants, Subsidies, Contributions | \$ 75,334 | \$ 72,386 | \$ 2,948 | 4% |
| Investment Income | | | | |
| Interest on investments | \$12,043 | \$15,000 | (-\$2,957) | -20% |
| Total Investment Income | \$ 12,043 | \$ 15,000 | \$ (2,957) | (0) |
| Other Income | | | | |
| Motor Vehicle re-imbursments | \$3,075 | \$6,000 | (-\$2,925) | -49% |
| Sundry Income | \$4,022 | \$4,500 | (-\$478) | -11% |
| Total Other Income | \$ 7,097 | \$ 10,500 | \$ (3,403) | -32% |
| Total of non Constituent Council Income | \$ 345,957 | \$ 391,470 | \$ (45,513) | -12% |
| Total Income | \$ 1,955,263 | \$ 2,000,776 | \$ (45,513) | -2% |

| Eastern Health Authority - Financial Statement (Level 3) 1 July 2015 to 31 March 2016 | | | | |
|--|---------------------|---------------------|--------------------|-------------|
| Expenditure | Actual | Budgeted | \$ Variation | % Variation |
| Employee Costs | | | | |
| Salaries & Wages | \$918,723 | \$970,500 | \$ (51,777) | -5% |
| Superannuation | \$81,714 | \$88,500 | \$ (6,786) | -8% |
| Workers Compensation | \$15,000 | \$15,000 | \$ - | 0% |
| Total Employee Costs | \$ 1,015,437 | \$ 1,074,000 | \$ (58,563) | -5% |
| Prescribed Expenses | | | | |
| Auditing and Accounting | \$12,600 | \$16,000 | \$ (3,400) | -21% |
| Insurance | \$26,006 | \$26,000 | \$ 6 | 0% |
| Maintenance | \$41,822 | \$48,750 | \$ (6,928) | -14% |
| Vehicle Leasing/maintenance | \$46,870 | \$51,750 | \$ (4,880) | -9% |
| Total Prescribed Expenses | \$ 127,298 | \$ 142,500 | \$ (15,202) | -45% |
| Rent and Plant Leasing | | | | |
| Electricity | \$6,226 | \$7,500 | \$ (1,274) | -17% |
| Plant Leasing Photocopier | \$4,653 | \$4,275 | \$ 378 | 9% |
| Rent | \$74,865 | \$75,750 | \$ (885) | -1% |
| Water | \$211 | \$0 | \$ 211 | 0% |
| Gas | \$1,714 | \$1,875 | \$ (161) | -9% |
| Total Rent and Plant Leasing | \$ 87,669 | \$ 89,400 | \$ (1,731) | -2% |
| IT Licensing and Support | | | | |
| IT Licences | \$10,364 | \$11,250 | \$ (886) | -8% |
| IT Support | \$63,320 | \$67,500 | \$ (4,180) | -6% |
| Internet | \$990 | \$1,500 | \$ (510) | -34% |
| IT Other | \$1,944 | \$1,500 | \$ 444 | 30% |
| Total IT Licensing and Support | \$ 76,618 | \$ 81,750 | \$ (5,132) | -6% |
| Administration | | | | |
| Administration Sundry | \$2,472 | \$5,250 | \$ (2,778) | -53% |
| Accreditation Fees | \$2,317 | \$3,000 | \$ (683) | -23% |
| Board of Management | \$10,691 | \$13,000 | \$ (2,309) | -18% |
| Bank Charges | \$2,551 | \$2,250 | \$ 301 | 13% |
| Public Health Sundry | \$3,423 | \$3,750 | \$ (327) | -9% |
| Fringe Benefits Tax | \$11,379 | \$11,250 | \$ 129 | 1% |
| Health promotion | \$5,513 | \$5,000 | \$ 513 | 10% |
| Legal | \$11,922 | \$15,000 | \$ (3,078) | -21% |
| Printing & Stationery & Postage | \$13,439 | \$22,500 | \$ (9,061) | -40% |
| Telephone | \$10,709 | \$11,250 | \$ (541) | -5% |
| Work Health Safety & Injury Management | \$642 | \$2,000 | \$ (1,358) | -68% |
| Rodenticide | \$2,233 | \$1,500 | \$ 733 | 49% |
| Staff Amenities | \$2,153 | \$5,250 | \$ (3,097) | -59% |
| Staff Training | \$12,737 | \$16,500 | \$ (3,763) | -23% |
| Human Resource Sundry | \$5,914 | \$9,750 | \$ (3,836) | -39% |
| Doubtful Debts Expense | \$2,256 | \$0 | \$ 2,256 | 0% |
| Total Administration | \$ 100,351 | \$ 127,250 | \$ (26,899) | -21% |

| Eastern Health Authority - Financial Statement (Level 3 cont.) 1 July 2015 to 31 March 2016 | | | | |
|--|---------------------|---------------------|---------------------|-------------|
| Expenditure | Actual | Budgeted | \$ Variation | % Variation |
| Immunisation | | | | |
| Immunisation SBP Consumables | \$6,671 | \$6,000 | \$ 671 | 11% |
| Immunisation clinic vaccines | \$19,540 | \$22,500 | \$ (2,960) | -13% |
| Immunisation worksite vaccines | \$869 | \$1,000 | \$ (131) | 0% |
| Total Immunisation | \$ 27,080 | \$ 29,500 | \$ (2,420) | -8% |
| Uniforms/Income protection | | | | |
| Income Protection | \$10,953 | \$16,000 | \$ (5,047) | -32% |
| Total Uniforms/Income protection | \$ 10,953 | \$ 16,000 | \$ (5,047) | -32% |
| Sampling | | | | |
| Legionella Testing | \$4,572 | \$9,000 | \$ (4,428) | -49% |
| Food Sampling | \$0 | \$750 | \$ (750) | 0% |
| Total Sampling | \$ 4,572 | \$ 9,750 | \$ (5,178) | -49% |
| Total Materials, contracts and other expen | \$ 434,540 | \$ 496,150 | \$ (61,610) | -12% |
| Depreciation | \$ 60,639 | \$ 60,638 | \$ 1 | 0% |
| Finance Costs | \$ 22,672 | \$ 22,672 | \$ - | 0% |
| Total Operating Expenditure | \$ 1,533,288 | \$ 1,653,461 | \$ (120,172) | -7% |
| Total Operating Income | \$ 1,955,263 | \$ 2,000,776 | \$ (45,513) | -2% |
| Operating Result | \$ 421,975 | \$ 347,315 | \$ 74,660 | 21% |

| EASTERN HEALTH AUTHORITY STATEMENT OF COMPREHENSIVE INCOME | | | | | | |
|--|---|-----------------------------|---------------------|--------------------|-----------------|-----------------------------|
| FOR THE YEAR ENDING 30 JUNE 2016 | | | | | | |
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | MARCH REVIEW | REVISED BUDGET 2015/2016 |
| \$ | INCOME | \$ | | | | \$ |
| 1,576,605 | Council Contributions | 1,609,306 | - | - | - | 1,609,306 |
| 157,329 | Statutory Charges | 194,000 | - | - | (50,000) | 144,000 |
| 303,449 | User Charges | 307,000 | - | - | 20,000 | 327,000 |
| 117,983 | Grants, subsidies and contributions | 126,500 | - | - | - | 126,500 |
| 20,871 | Investment Income | 20,000 | - | - | - | 20,000 |
| 6,607 | Other Income | 14,000 | - | - | - | 14,000 |
| 2,182,844 | TOTAL INCOME | 2,270,806 | - | - | (30,000) | 2,240,806 |
| | EXPENSES | | | | | |
| 1,353,987 | Employee Costs | 1,616,000 | (30,000) | (60,000) | (70,000) | 1,456,000 |
| 608,512 | Materials, contracts and other expenses | 576,200 | 30,000 | 60,000 | 5,000 | 671,200 |
| 24,016 | Finance Charges | 22,672 | - | - | - | 22,672 |
| 83,705 | Depreciation | 80,851 | - | - | - | 80,851 |
| 2,070,220 | TOTAL EXPENSES | 2,295,723 | - | - | (65,000) | 2,230,723 |
| 112,624 | Operating Surplus/(Deficit) | (24,917) | - | - | 35,000 | 10,083 |
| - | Net gain (loss) on disposal of assets | - | | | | - |
| 112,624 | Net Surplus/(Deficit) | (24,917) | - | - | 35,000 | 10,083 |

| EASTERN HEALTH AUTHORITY STATEMENT OF CASH FLOWS FOR THE YEAR ENDING 30 JUNE 2016 | | | | | | |
|--|--|-----------------------------|---------------------|--------------------|-----------------|-----------------------------|
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | MARCH REVIEW | REVISED BUDGET 2015/2016 |
| \$ | CASHFLOWS FROM OPERATING ACTIVITIES | \$ | | | | \$ |
| | <u>Receipts</u> | | | | | |
| 2,159,499 | Operating Receipts | 2,250,806 | - | - | (30,000) | 2,220,806 |
| 25,557 | Investment Receipts | 20,000 | - | - | - | 20,000 |
| | <u>Payments</u> | | | | | |
| (2,036,294) | Operating Payments to Suppliers & Employees | (2,192,200) | - | - | 65,000 | (2,107,200) |
| (25,237) | Interest Expense | (22,672) | - | - | - | (22,672) |
| 123,525 | Net Cash Provided/(Used) by Operating Activities | 55,934 | - | - | 35,000 | 90,934 |
| | CASH FLOWS FROM FINANCING ACTIVITIES | | | | | |
| - | Loans Received | - | - | - | - | - |
| (53,369) | Loan Repayments | (55,934) | - | - | - | (55,934) |
| (53,369) | Net Cash Provided/(Used) by Financing Activities | (55,934) | - | - | - | (55,934) |
| | CASH FLOWS FROM INVESTING ACTIVITIES | | | | | |
| | <u>Receipts</u> | | | | | |
| - | Sale of Replaced Assets | - | - | - | - | - |
| | <u>Payments</u> | | | | | |
| - | Expenditure on renewal / replacements of assets | - | - | - | - | - |
| - | Expenditure on new / upgraded assets | - | - | - | - | - |
| - | Distributions paid to constituent Councils | (200,000) | - | - | - | (200,000) |
| - | Net Cash Provided/(Used) by Investing Activities | (200,000) | - | - | - | (200,000) |
| 70,156 | NET INCREASE (DECREASE) IN CASH HELD | (200,000) | - | - | 35,000 | (165,000) |
| 719,815 | CASH AND CASH EQUIVALENTS AT BEGINNING OF REPORTING PERIOD | 759,815 | 30,156 | | | 789,971 |
| 789,971 | CASH AND CASH EQUIVALENTS AT END OF REPORTING PERIOD | 559,815 | 30,156 | - | 35,000 | 624,971 |

| EASTERN HEALTH AUTHORITY STATEMENT OF FINANCIAL POSITION | | | | | | |
|--|--|-----------------------------|---------------------|--------------------|-----------------|-----------------------------|
| FOR THE YEAR ENDING 30 JUNE 2016 | | | | | | |
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | MARCH REVIEW | REVISED BUDGET 2015/2016 |
| \$ | CURRENT ASSETS | \$ | | | | \$ |
| 789,971 | Cash and Cash Equivalents | 559,815 | 30,156 | | 35,000 | 624,971 |
| 162,272 | Trade & Other Receivables | 178,512 | (16,240) | | | 162,272 |
| - | Other | - | | | | - |
| 952,243 | TOTAL CURRENT ASSETS | 738,327 | 13,916 | - | 35,000 | 787,243 |
| | CURRENT LIABILITIES | | | | | |
| 108,708 | Trade & Other Payables | 181,322 | (72,614) | | - | 108,708 |
| 236,220 | Provisions | 251,094 | (14,874) | | | 236,220 |
| 55,934 | Borrowings | 50,920 | | | - | 50,920 |
| - | Other | - | - | | | - |
| 400,862 | TOTAL CURRENT LIABILITIES | 483,336 | (87,488) | - | - | 395,848 |
| 551,381 | NET CURRENT ASSETS/(CURRENT LIABILITIES) | 254,991 | 101,404 | - | 35,000 | 391,395 |
| | NON-CURRENT ASSETS | | | | | |
| 441,095 | Equipment | 363,098 | (2,854) | | - | 360,244 |
| - | Other | - | - | | - | - |
| 441,095 | TOTAL NON-CURRENT ASSETS | 363,098 | (2,854) | - | - | 360,244 |
| | NON-CURRENT LIABILITIES | | | | | |
| 41,662 | Provisions | 43,218 | (1,556) | | - | 41,662 |
| 435,198 | Borrowings | 384,279 | | | - | 384,279 |
| 476,860 | TOTAL NON-CURRENT LIABILITIES | 427,497 | (1,556) | - | - | 425,941 |
| 515,616 | NET ASSETS | 190,592 | 100,106 | - | 35,000 | 325,698 |
| | EQUITY | | | | | |
| 515,616 | Accumulated Surplus/(Deficit) | 190,592 | 100,107 | - | 35,000 | 325,699 |
| 515,616 | TOTAL EQUITY | 190,592 | 100,107 | - | 35,000 | 325,699 |

| EASTERN HEALTH AUTHORITY STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDING 30 JUNE 2016 | | | | | | |
|---|--------------------------------------|-----------------------------|---------------------|--------------------|-----------------|-----------------------------|
| ACTUAL 2014/2015 | | ADOPTED BUDGET 2015/2016 | SEPTEMBER REVIEW | DECEMBER REVIEW | MARCH REVIEW | REVISED BUDGET 2015/2016 |
| | ACCUMULATED SURPLUS | | | | | |
| 402,992 | Balance at beginning of period | 415,509 | 100,107 | | | 515,616 |
| 112,624 | Net Surplus/(Deficit) | (24,917) | - | - | 35,000 | 10,083 |
| - | Distribution to Constituent Councils | (200,000) | - | - | - | (200,000) |
| 515,616 | Balance at end of period | 190,592 | 100,107 | - | 35,000 | 325,699 |
| 515,616 | TOTAL EQUITY | 190,592 | 100,107 | - | 35,000 | 325,699 |

| Eastern Health Authority | | | |
|---|---------------------------|-------------------|------------------|
| Bank Reconciliation as at 31 March 2016 | | | |
| Bank SA Account No. 141/0532306840 | | | |
| Balance as per Bank Statement 31 March 2016 | | | \$291,501.66 |
| Plus Outstanding cheques | \$ | - | |
| Add Outstanding deposits | \$ | - | |
| BALANCE PER General Ledger | | | \$291,501.66 |
| GST October - March 2016 | | | |
| GST Collected | \$87,093.86 | | |
| GST Paid | <u>\$8,888.24</u> | | |
| Net GST Claimable (Payable) | <u><u>\$78,205.62</u></u> | | |
| Funds Available March 2016 | | | |
| Account | 31-Mar-16 | 31-Dec-16 | Variance |
| Bank SA Cheque Account | \$ 291,502 | \$ 184,234 | \$107,268 |
| Local Government Finance Authority | \$ 785,861 | \$ 384,069 | \$401,792 |
| Net GST Claimable (Payable) | (\$78,206) | (\$2,290) | (\$75,916) |
| Long Service Leave Provision | (\$162,784) | (\$162,784) | \$ - |
| Annual Leave Provision | (\$90,283) | (\$119,200) | \$ 28,917 |
| TOTAL FUNDS | \$ 746,090 | \$ 284,029 | \$462,061 |

6.3 FIRST ATTENDANCE OF AUDITOR FOR EXTERNAL AUDIT MANAGEMENT REPORT FOR THE YEAR ENDED 30 JUNE 2016

Author: Michael Livori
Ref: AF16/1

Summary

Correspondence relating to the first audit attendance in relation to the External Audit for the financial year ending 30 June 2016 has been received from Eastern Health Authority's (EHA) external auditors Dean Newbery and Partners and a copy of the letter is attachment 1 to this report.

Report

The work undertaken by the auditor at the first attendance for the current financial year audit is detailed in the table below.

| Area | Area Specifics |
|---------------------|---|
| Accounts Payable | <ul style="list-style-type: none"> A review of transactions paid from 1 July 2015 to 31 December 2015 Internal Controls review of the accounts payable process. |
| Payroll | <p>A review of payroll transactions processed during the 2015/2016 financial year was tested for the following:</p> <ul style="list-style-type: none"> Employee PAYG tax deductions were accurate. Employee superannuation deductions were accurate. Pay rates were consistent with the employee's classification within their Enterprise Bargaining Agreement. Any leave that was provided corresponds to the appropriate signed leave application form. Employee personnel files are up-to-date and including all relevant supporting documentation. Fortnightly net pay figures were matched from the 'Bank Deposit Report' to the Bank Statements Testing a sample of processed newly inducted and terminated employees. |
| Accounts Receivable | <ul style="list-style-type: none"> Reviewed income accounts and traced amounts through to bank. Reviewed Aged Debtor Trial Balance. |

There were no matters identified during the interim audit that would have an adverse impact on the audit opinion to be issued for the current financial year.

The auditors acknowledged the quality and frequency of financial information provided in Board reports and the time taken to produce these

reports. They consider this to be a highly positive control in relation to the monitoring of EHA's financial performance and operation management.

The auditors will be in attendance after the financial year has concluded to finalise the audit for 2015/2016.

In accordance with the Audit Committee Terms of Reference the External Audit Management letter should be considered by the Audit Committee and any recommendations contained within the letter should be monitored by the committee to ensure that they are appropriately considered and managed. The correspondence will be presented to the Audit Committee at its meeting to be held on 20 May 2015.

RECOMMENDATION

That:

The report regarding the first attendance in relation to the External Audit Management Report for the year ending 30 June 2016 is received.

OUR REF: 122166_1

18 April 2016

Cr. Sue Whittington
Chairperson
Eastern Health Authority Inc
PO Box 275
STEPNEY SA 5069

Dear Councillor Whittington

RE: External Audit Management Letter - Financial Year Ending 30 June 2016

Our audit team recently attended the Eastern Health Authority Inc. (the Authority) offices to undertake the first audit attendance in relation to the 2015/16 financial year audit of the Authority.

We are pleased to note that there were no matters identified during the course of our work conducted that would have an adverse impact on our 2015/16 financial year audit opinion. Please note that further sample transaction testing and review of the eventual 2015/16 financial statements will need to be completed before we finalise our audit opinion.

The following table details the work undertaken during the recent audit visit:

| Area | Area Specifics |
|------------------|--|
| Accounts Payable | <ul style="list-style-type: none">• A review of transactions paid from 1 July 2015 to 31 December 2015• Internal Controls review of the accounts payable process. |
| Payroll | <p>A review of payroll transactions processed during the 2015/16 financial year was tested for the following:</p> <ul style="list-style-type: none">• Employee PAYG tax deductions were accurate.• Employee superannuation deductions were accurate.• Pay rates were consistent with the employee's classification within their Enterprise Bargaining Agreements.• Any leave that was provided corresponds to the appropriate signed leave application forms• Employee personnel files are up-to-date and including all relevant supporting documentation.• Fortnightly Net pay figures were matched from the 'Bank Deposit Report' to bank statements. |

| | |
|----------------------------|---|
| | <ul style="list-style-type: none"> • Testing a sample of processed newly inducted and terminated employees. |
| Accounts Receivable | <ul style="list-style-type: none"> • Reviewed Income accounts and traced amounts through to bank. • Reviewed Aged Debtor Trial Balance. |

We are pleased to note that there were no material matters that require further attention as a result of our testing completed. Further sample transaction testing will be undertaken during future audit attendances.

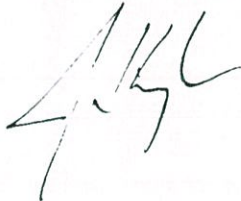
We also wish to acknowledge the quality and frequency of financial information produced in the Board Reports, notwithstanding that it does involve considerable time to be produced by the Administration. We consider this to be a highly positive control over the close monitoring of the Authority's financial performance and operational management.

At the conclusion of future audit attendances, we will again provide a summary of the work undertaken and any findings for your consideration and attention.

Please do not hesitate to contact us on 8267 4777 or jim@deannewbery.com.au if you have any queries with regard to the above.

Yours sincerely

DEAN NEWBERY & PARTNERS



JIM KEOGH

Partner

C. Chief Executive Officer

C. Audit Committee

6.4 EASTERN HEALTH AUTHORITY WORK HEALTH & SAFETY AND RETURN TO WORK POLICY

Author: Michael Livori
Ref: AF11/68

Summary

The current Eastern Health Authority Occupational Health Safety & Welfare and Injury Management Policy was adopted on 30 October 2013 and is due for review.

Report

The past year has witnessed continuing legislative changes with the commencement on 1 July 2015 of the Return to Work (RTW) Act. This new piece of legislation introduces most significant changes to workers compensation arrangements in South Australia in nearly 30 years.

Given this, the Local Government Association Workers Compensation Scheme (LGAWCS) has instigated a review of the following core documents which it provides as model documents to members.

- LGAWCS Work Health Safety and Return to Work Policy ('the Peak Policy')
- LGAWCS Workplace Return to Work Procedure

An agreement has been reached between WorkCover and the LGAWCS which results in members of the scheme not being required to formally adopt the peak policy. Each member is party to the commitments within the policy by their membership of the LGAWCS. It is now possible to simply reference the peak policy within Council (EHA) documentation.

Accordingly, the Peak Policy released in July 2015 will now replace the current EHA Work Health & Safety and Injury Management Policy adopted in August 2013.

The new document updates all references to the Return to Work Act and is provided as attachment 1.

It is recommended that EHA acknowledges that the LGAWCS Work Health Safety and Return to Work Policy (the 'peak' policy) will serve as its own Work Health Safety and Return to Work 'peak policy' from this point forward.

RECOMMENDATION

That:

1. EHA acknowledges that the LGAWCS Work Health Safety and Return to Work Policy (the 'peak' policy) will serve as its own Work Health Safety and Return to Work 'peak policy'.

Work Health Safety and Return to Work Policy

Overview

The Local Government Association of South Australia (LGA) is, for the purposes of the Return to Work Act 2014, the nominated Employer for a group of Self Insured Employers which includes all Local Government entities (Councils and Prescribed Bodies (Members)).

In conjunction with the LGA and its Members, the Local Government Association Workers Compensation Scheme (LGAWCS) administers the principles and commitments outlined within this policy. The above parties are committed to, within the appropriate scope of involvement and level of remit, to work towards the LGAWCS strategic plan purpose of:

"To proactively protect and manage Local Governments' employee injury risks today and into the future"

This Policy is designed to provide direction on the system structure that will be applied by Local Government to achieve the commitments as documented below.

1. Purpose

To ensure, so far as is reasonably practicable, the health and safety of workers* and others via a Management Systems approach to Work Health and Safety (WHS) and Return to Work (RTW), in line with the organisational vision of Local Government Workplaces. This will be established by:

1. Management commitment to WHS and RTW in accordance with organisational objectives.
2. Development of a WHS and RTW System and Action Plans which support identified policy objectives and procedural requirements.
3. Implementation of individual elements as outlined in the WHS and RTW System and Action Plans.
4. Measurement and evaluation of the WHS and RTW System against defined objectives, targets and performance indicators.
5. Reviewing the WHS and RTW System and Action Plans to identify scope for continuous improvement.

** NB: Definition of a worker is different for the purposes of the Return to Work Act 2014 and the Work Health and Safety Act 2012 (see definitions section below).*

2. Scope

This policy applies to Local Government workers whilst at work.

This policy should be read in conjunction with any provisions of Enterprise Bargaining Agreements and any other Federal or State Legislation directly or indirectly which affects employees of Local Government entities, relating to work in WHS and RTW.

3. References

1. Work Health and Safety Act 2012
2. Work Health and Safety Regulations 2012
3. Return to Work Act 2014
4. Return to Work Regulations 2015
5. Code for the Conduct of Self Insured Employers under the Return to Work Scheme which includes the Performance Standards.
6. AS/NZS 4801:2001: Occupational Health and Safety Management Systems

4. Definitions

| | |
|--|--|
| Certified safety management system | <p>A safety management system that complies with AS 4801:2001 (<i>Occupational health and safety management systems</i>), or an equivalent system determined by the regulator.</p> <p>[as defined by the <i>Work Health and Safety Regulations 2012: Regulation 6</i>]</p> |
| Work Health and Safety Management System (WHSMS) | <p>Part of the overall management system which includes organisational structure, planning activities, responsibilities, practices, procedures, processes and resources for developing, implementing, achieving, reviewing and maintaining the WHS policy, and so managing the WHS risks associated with the business of the organisation. In Local Government the WHS Management System must also comply with the Code of Conduct for Self-Insured Employers under the Return to Work Scheme which includes Performance Standards.</p> <p>[as defined by the <i>Australian Standard, AS 4801</i>]</p> |
| Worker (for the purposes of the WHS Act 2012 - Section 7) | <p>A person is a <i>worker</i> if the person carries out work in any capacity for a person conducting a business or undertaking, including work as—</p> <ul style="list-style-type: none"> (a) an employee; or (b) a contractor or subcontractor; or (c) an employee of a contractor or subcontractor; or (d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking; or (e) an outworker; or (f) an apprentice or trainee; or (g) a student gaining work experience; or (h) a volunteer*; or (i) a person of a prescribed class. <p><i>*NB: An Elected Member in Local Government is a worker (as a volunteer)</i></p> |
| Worker (for the purposes of the RTW Act 2014 - Section 4) | <p>A <i>worker</i> means—</p> <ul style="list-style-type: none"> (a) a person by whom work is done under a contract of service (whether or not as an employee); (b) a person who is a worker by virtue of Schedule 1; (c) a self-employed worker, <p>and includes a former worker and the legal personal representative of a deceased worker.</p> |
| Return to Work (RTW) | <p>For the purposes of this policy RTW includes both Claims Management activities and Return to Work activities.</p> |

5. Policy Objectives

Local Government is committed to and able to demonstrate application of the following objectives:

1. Providing and undertaking measures to eliminate risks to health and safety, so far as is reasonably practicable. If it is not reasonably practicable to eliminate risks to health and safety, then to minimise those risks so far as is reasonably practicable and to demonstrate a systematic approach to the planning and implementation of Work Health and Safety processes that is compliant with the WHS Act 2012 and Regulations;
2. Implementation of effective and early Return to Work procedures in accordance with the Return to Work Act 2014, and associated Regulations, to assist work injured employees to return to work and achieve the best practicable levels of physical and mental recovery;
3. Implementation of equitable Claims Management, in accordance with the Return to Work Act 2014 and associated Regulations, for employees who suffer an injury in the course of their employment;
4. Maintaining effective processes and procedures for consultation, coordination and cooperation in WHS and RTW matters;
5. Monitoring and reviewing WHS and RTW System Performance and Action Plans, objectives and measures, annually;
6. Further, as well as the above Objectives, Local Government recognises and is able to demonstrate (at the pertinent system level within the Local Government structure as appropriate), application of the following within the WHSMS:
 - (a) The requirement to meet legislative compliance;
 - (b) The importance of ongoing review and continuous improvement;
 - (c) The requirement for ongoing review of this WHS and RTW Policy and supporting Policies;
 - (d) The commitment that adequate resources and appropriate internal / external expertise will be used so far as is reasonably practicable, when required;
 - (e) Other relevant supporting policies and procedures that support the WHS and RTW systems;
 - (f) A commitment to communicating relevant information to relevant workers in an appropriate manner;
 - (g) Its obligations to workers and others while workers are at work and whilst other persons may be at risk from work carried out, so far as is reasonably practicable;
 - (h) The requirement for an effective hazard management approach to WHS, which encompasses the identification, assessment and elimination or control of hazards;
7. This policy will be reviewed regularly and updated as required for continued suitability and effectiveness.

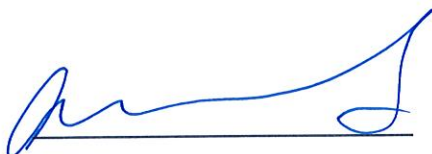
6. Responsibilities

1. The LGAWCS is accountable for conducting planning, monitoring and review activities and confirming that organisational and policy objectives are being met.
2. The senior management teams at the various levels within the Local Government structure, are accountable for checking that the organisation at that level has available for use, and uses, appropriate resources and processes to enact this policy and supporting policies and procedures effectively.
3. Supervisors/Managers are accountable for bringing this policy and supporting policies and procedures to the attention of relevant workers and confirming, through supervisory activities, that this policy and supporting policies and procedures are adhered to.
4. Supervisors/Managers are accountable for checking that workers have had appropriate training to undertake the activities identified within this policy and supporting policy and procedures.
5. Workers are accountable for complying and co-operating with the requirements of this policy and supporting policies and procedures, and for reporting any inability to do so to management at the earliest opportunity.
6. Further specific responsibilities and accountabilities are detailed within the supporting "One System" policies and procedures.


Review

This Work Health Safety & Return to Work Policy shall be reviewed by Local Government at a minimum within Two (2) years of issued date, (or on significant change to legislation or aspects included in this policy that could affect health and safety and/or return to work practices).

SIGNED:


A/CEO – LGA

Date: 4 / 6 / 2015


Chairperson – LGAWCS Board

Date: 4 / 6 / 2015

Non-English translations of this policy can be made available if required.

| Document History: | Version No: | Issue Date: | Description of Change: |
|-------------------|-------------|-------------|--|
| | 1.0 | 1/9/2013 | Original WHS & Injury Management Policy. |
| | 2.0 | 4/6/2015 | Updated Policy to include introduction of RTW Act 2014 requirements & renamed to WHS & RTW Policy. |

6.5 DRAFT ANNUAL BUSINESS PLAN AND BUDGETED FINANCIAL STATEMENTS FOR 2016/2017

Author: Michael Livori
Ref: AF16/14

Summary

In accordance with the Local Government Act 1999, Schedule 2, Part 2 Section 25:

- (1) *a regional subsidiary must have a budget for each financial year*
- (2) *each budget of a regional subsidiary*
 - (a) *must deal with each principal activity of the subsidiary on a separate basis; and*
 - (b) *must be consistent with its business plan; and*
 - (c) *must comply with standards and principles prescribed by the regulations; and*
 - (d) *must be adopted after 31 May for the ensuing financial year, and before a date fixed by the constituent councils; and*
 - (e) *must be provided to the constituent councils in accordance with the regulations.*

The Eastern Health Authority (EHA) Charter requires pursuant to clause 3.5 Business Plan and Budget that;

3.5.1 *EHA must, have a Business Plan which supports and informs its annual budget.*

3.5.2 *EHA shall:*

- 3.5.2.1 *prepare the Business Plan linking the core activities of EHA to the Public Health Plan and to strategic, operational and organisational requirements with supporting financial projections setting out the estimates of revenue and expenditure as necessary for the period; and*
- 3.5.2.2 *the Board shall compare the Business Plan against performance targets at least once every financial year;*
- 3.5.2.3 *in consultation with the Constituent Councils review the contents of the Business Plan on an annual basis; and*
- 3.5.2.4 *consult with the Constituent Councils prior to amending the Business Plan.*

(See Clause 24, Part 2, Schedule 2 to the Act for the contents of the Business Plan)

- 3.5.3 *The proposed budget detailing the estimated costs and contributions for the next financial year must be referred to the Board at its April meeting and to the Chief Executive Officers of the Constituent Councils by 30 April in each year.*
- 3.5.4 *A Constituent Council may comment in writing to the EHA on the proposed budget by 31 May in each year.*
- 3.5.5 *EHA shall, after 31 May but before the end of June in each financial year, prepare and adopt an annual budget for the ensuing financial year in accordance with the Local Government Act 1999 and which is consistent with the Business Plan for that financial year.*
- 3.5.6 *The Board must provide a copy of the adopted annual business plan and budget to the Chief Executive Officers of each Constituent Council within five business days of adoption.*

(See Clause 25, Part 2, Schedule 2 to the Act for the contents of the budget).

Report

The Local Government Act 1999 requires councils to develop an Annual Business Plan although this requirement does not extend to a regional subsidiary. To ensure EHA's budget is developed in line with best practice standards an Annual Business Plan has been produced.

Development of the 2016/2017 Annual Business Plan to date

- On 24 February 2016, Board Members endorsed the Annual Business Plan development process and were requested to provide comments and suggestions in relation to the content of the Annual Business Plan and Budget.
- On 2 March 2016 Constituent Councils were requested via their nominated contact to provide comments and suggestions in relation to the development of the Annual Business Plan (email provided as attachment 1).
- Responses received from council contacts are provided as attachment 2.
- An Annual Business Plan and Budget workshop was held on 16 March 2016. At the workshop a presentation was provided which outlined budget influences and assumptions, changes to income and expenditure and council contributions required to fund the budget.
- On 23 March 2016 a copy of the Draft Annual Business Plan and Budget was provided to all Constituent Council Chief Executive Officers requesting their feedback by 27 April 2016 (attachment 3).

Content of the Draft Annual Business Plan 2016/2017

The Draft 2016/2017 Eastern Health Authority Annual Business Plan includes the following:

- EHA's objectives for the financial year
- the activities that the EHA intends to undertake to achieve those objectives
- the measures (financial and non-financial) which EHA intends to use to assess its performance against its objectives over the financial year

The draft plan is provided to members as attachment 4.

Budget Documents

A set of Budgeted Financial Statements contained within the Annual Business Plan are required to be adopted by the Board of Management at the June meeting as the EHA budget for 2016/2017.

An additional document entitled "Eastern Health Authority Funding Statement 2016/2017" which provides a greater level of detail in respect to budgeted income and expenditure has been provided as attachment 5.

The Funding Statement does not form part of the Annual Business Plan.

Influences and Assumptions for 2016/2017

Significant factors which have influenced the preparation of the 2016/2017 Annual Business Plan are:

- enterprise bargaining and increment level increases for staff employment arrangements
- the continuation of the contract service to undertake immunisations and monitor Supported Residential Facilities on behalf of The City of Unley
- the continuation of the worksite immunisation program
- continuation of the service agreement with SA Health to deliver the School Immunisation Program (SIP)
- implementation and monitoring of the Regional Public Health and Wellbeing Plan in conjunction with Constituent Councils
- support for Eastern Regional Public Health Plan Advisory Committee
- transition to cloud based computing environment.

EHA has set the following priorities as part of the 2016/2017 Annual Business Plan:

- to continue to provide a professional and cost effective environmental health service to its Constituent Councils and their respective communities
- support the Eastern Regional Public Health Plan Advisory Committee
- implement and monitor the Regional Public Health Plan in conjunction with Constituent Councils
- transition ICT environment from on premise to cloud based
- refine Health Manager system to provide improved reporting and gain efficiencies in on site applications
- evaluate implementation of tablets using Health Manager software for field based data capture
- finalise and introduce the new food safety training program
- review EHA WHS and IM Plan 2012 – 2015
- ongoing evolvement of performance development framework
- refine process for inducting staff
- retender for current service contracts
- use immunisation coverage data from a range of sources to better identify and remind residents of overdue vaccinations
- investigate available vaccine reminder services and apps
- explore further opportunities for presentations to residents through community centres and libraries to existing parent groups
- promotion and communication of changes to the National Immunisation Schedule affecting older residents.

Funding the Business Plan and the Budget

EHA bases its expenditure on the services required to ensure its Constituent Councils are meeting their wide range of legislative responsibilities which are mandated in a range of legislation including the South Australian *Public Health Act 2011*; *Food Act 2001*; *Supported Residential Facilities Act 1992* and the *Local Government Act 1999*.

The forecast for the 2016/2017 financial year is that EHA's expenditure to carry out its operational activities detailed in the annual business plan will equal its operating income resulting in a balanced operating budget.

To achieve this operating budget result, a total of \$1,641,055 will be raised through contributions from our Constituent Councils for operational expenditure in 2016/2017.

The global increase in contributions for EHA operations requested from Constituent Councils for 2016/2017 based on the preliminary draft budget is 1.97% as detailed in Table 1 below.

Table 1: Global increase in contributions requested from Constituent Councils

| Total Council Contributions required | | Change \$ | Change % |
|--------------------------------------|--------------|--------------|----------|
| 2015/2016 | \$ 1,609,306 | | |
| 2016/2017 | \$ 1,641,055 | \$ 31,749.00 | 1.97% |

Table 2 details the average annual increase (1.34%) in total Constituent Council contributions over the past 3 financial years.

Table 2: Average annual increase in total Constituent Council Contributions over last 3 financial years

| Total Council Contributions required | | Change \$ | Change % |
|---|--------------|--------------|----------|
| 2013/2014 | \$ 1,576,207 | | |
| 2014/2015 | \$ 1,576,605 | \$ 398.00 | 0.03% |
| 2015/2016 | \$ 1,609,306 | \$ 32,701.00 | 2.03% |
| 2016/2017 | \$ 1,641,055 | \$ 31,749.00 | 1.97% |
| 4 Year Total | | \$ 64,848.00 | 4.03% |
| Average Annual Increase Over Last 3 Years | | | 1.34% |

EHA's Charter requires Constituent Councils to contribute to its operations in accordance with a formula that calculates the estimated proportion of overall activities it requires. The calculations are based on the previous year's activities.

The change in contributions required from each individual council determined by this formula will differ from the global change (1.34%).

Table 3 details the contribution required from each Constituent Council year using the formula contained in the current (2009) Charter. It also details the change from the previous year.

Table 3: Constituent Council Contributions for 2016/2017 – 2009 Formula

| Eastern Health Authority Constituent Council Contribution Calculations 2016-2017 - 2009 Formula | | | | | | | |
|---|--------------|------------|--------------|------------|------------|-------------|--------------|
| | | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
| Total Required Operating contributions 2016-2017 | \$ 1,641,055 | | | | | | |
| Constituent Council Contribution proportion | | 26.39% | 23.47% | 30.39% | 13.65% | 6.10% | 100.00% |
| Actual Contribution | | \$ 433,140 | \$ 385,131 | \$ 498,646 | \$ 223,979 | \$ 100,159 | \$ 1,641,055 |
| Change in Contribution from previous year | | | | | | | |
| Contribution proportion | | 25.79% | 24.22% | 30.49% | 13.65% | 5.85% | 100.00% |
| Actual Contribution | | \$ 415,037 | \$ 389,840 | \$ 490,646 | \$ 219,621 | \$ 94,162 | \$ 1,609,306 |
| Change in Contribution Proportion from previous FY | | 0.60% | -0.76% | -0.10% | 0.00% | 0.25% | 0.00% |
| Change in Contribution (\$) | | \$ 18,103 | \$ (4,708) | \$ 8,000 | \$ 4,358 | \$ 5,996 | \$ 31,749 |
| Change in contributions (%) | 1.97% | 4.36% | -1.21% | 1.63% | 1.98% | 6.37% | 1.97% |

The revised Charter being considered has an amended council contribution formula when compared to the one contained within the 2009 Charter.

Table 4 details the required contributions and year on year changes when the new formula is applied.

Table 4: Constituent Council Contributions for 2016/2017 – 2016 Formula

| Eastern Health Authority Constituent Council Contribution Calculations 2016-2017 - 2016 Formula | | | | | | | |
|---|--------------|------------|--------------|------------|------------|-------------|--------------|
| | | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
| Total Required Operating contributions 2016-2017 | \$ 1,641,055 | | | | | | |
| Constituent Council Contribution proportion | | 25.54% | 23.10% | 31.40% | 13.46% | 6.50% | 100.00% |
| Actual Contribution | | \$ 419,128 | \$ 379,026 | \$ 515,322 | \$ 220,952 | \$ 106,627 | \$ 1,641,055 |
| Change in Contribution from previous year | | | | | | | |
| Contribution proportion | | 25.79% | 24.22% | 30.49% | 13.65% | 5.85% | 100.00% |
| Actual Contribution | | \$ 415,037 | \$ 389,840 | \$ 490,646 | \$ 219,621 | \$ 94,162 | \$ 1,609,306 |
| Change in Contribution Proportion from previous FY | | -0.25% | -1.13% | 0.91% | -0.18% | 0.65% | 0.00% |
| Change in Contribution (\$) | | \$ 4,091 | \$ (10,814) | \$ 24,676 | \$ 1,331 | \$ 12,465 | \$ 31,749 |
| Change in contributions (%) | 1.97% | 0.99% | -2.77% | 5.03% | 0.61% | 13.24% | 1.97% |

At this point in time the formula contained within the 2009 Charter (see table 3) will be used to determine council contribution for 2016/2017. If however the Charter review is finalised prior to the adoption of the budget on 22 June 2016 the formula contained within the revised Charter will be used to determine contributions (see table 4).

Due to the effect of the charter formula, single year changes to individual council contributions can vary significantly from the average percentage change value. The tables below detail the average annual change to each constituent council's contributions over the last 3 years. This compares to the annual average increase of 1.34% per annum over the same period (previously detailed in table 2).

Table 5: Last 3 years average annual change to your council's contributions - Table individualised for each council

| | NPSP | \$ change previous year | % Change previous year |
|-----------|---------------------|--------------------------------|-------------------------------|
| 2013/2014 | \$ 485,199 | | |
| 2014/2015 | \$ 487,613 | \$ 2,414 | 0.50% |
| 2015/2016 | \$ 490,646 | \$ 3,033 | 0.62% |
| 2016/2017 | \$ 515,322 | \$ 24,676 | 5.03% |
| Average | | \$ 10,041 | 2.05% |
| | Walkerville | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 91,631 | | |
| 2014/2015 | \$ 88,809 | \$ (2,822) | -3.08% |
| 2015/2016 | \$ 94,162 | \$ 5,353 | 6.03% |
| 2016/2017 | \$ 106,627 | \$ 12,465 | 13.24% |
| Average | | \$ 4,999 | 5.40% |
| | Burnside | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 400,742 | | |
| 2014/2015 | \$ 400,896 | \$ 154 | 0.04% |
| 2015/2016 | \$ 415,038 | \$ 14,142 | 3.53% |
| 2016/2017 | \$ 419,128 | \$ 4,090 | 0.99% |
| Average | | \$ 6,129 | 1.52% |
| | Campbelltown | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 381,319 | | |
| 2014/2015 | \$ 376,996 | \$ (4,323) | -1.13% |
| 2015/2016 | \$ 389,840 | \$ 12,844 | 3.41% |
| 2016/2017 | \$ 379,026 | \$ (10,814) | -2.77% |
| Average | | \$ (764) | -0.17% |
| | Prospect | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 217,316 | | |
| 2014/2015 | \$ 222,291 | \$ 4,975 | 2.29% |
| 2015/2016 | \$ 219,622 | \$ (2,669) | -1.20% |
| 2016/2017 | \$ 220,952 | \$ 1,330 | 0.61% |
| Average | | \$ 1,212 | 0.56% |

Process from here

- The Draft Annual Business Plan and Financial Statements will be provided to Constituent Councils requesting any further comment by 6 June 2016.
- Final budget to be considered for adoption at the Board of Management to be held on 22 June 2016.
- A copy of the budget will be provided to the Chief Executive Officer of each Constituent Council within 5 days of its adoption.

RECOMMENDATION

That:

1. The Draft Annual Business Plan and Budgeted Financial Statements for 2016/2017 Report is received.
2. The Draft Annual Business Plan and Budgeted Financial Statements for 2016/2017 as provided as attachment 5 to this report is endorsed and provided to Constituent Councils for any further comment.
3. The Draft Annual Business Plan and Budgeted Financial Statements for 2016/2017 are considered further for adoption at the June 2016 meeting.

From: [Michael Livori](#)
To: [Constituent Council Contacts](#)
Cc: [Natajsha Bevitt](#); [Nadia Conci](#)
Subject: Eastern Health Authority Annual Business Plan and Budget 2016/2017
Date: Wednesday, 2 March 2016 4:36:36 PM
Attachments: [Board of Management meeting 24.02.2016 Report - 6.03 - Attachment - Deve....pdf](#)

Hi all,

Further to yesterday's meeting re the ABP and Budget development process please see relevant information below:

The Board of Management met for the first time this year on 24 February 2016.

One of the items considered and endorsed was the process for the development of our Annual Business Plan (ABP) and Budget for 2016/2017 (attached).

The process includes requests to constituent councils to provide feedback at three stages of the ABP and Budget development process.

This email is provided to assist you when receiving requests for feedback.

First Request Now (due 14 March 2016)

The first request for feedback (this email) is in relation to the content of the ABP.

It would be appreciated if the feedback is received by 14 **March 2016**.

At this stage the feedback would generally come from council administration.

As you are aware the work we undertake on behalf of councils is detailed in the ABP.

At this stage the request is in relation to any suggestions or comments you may have relating to our current service delivery.

I have attached our 2015/2016 Annual Business plan which details our current work.

There are no major changes expected to be required to be made to the 2016/2017 ABP from our perspective.

Staff have commenced revising the plan and you will have the opportunity to comment on any proposed changes in due course.

Second Request (due 17 March 2016)

A budget workshop will be held with EHA Board Members on 16 March 2016.

Following the workshop I will be in the position to provide you with a **preliminary** draft EHA budget and **preliminary** figures for constituent council contributions for your own budgeting. At this point in time I expect the contribution to be an increase in the 2.0% to 2.5% range when compared to the current contributions.

The actual effect on each council's contribution may be different when the funding formula is applied.

Your council will be invited to provide feedback in relation to the **preliminary** Draft Annual Business Plan and Budget at this point in time.

The feedback will be due on **11 April 2016**.

Third Request (30 April 2016)

A draft ABP and Budget will be considered and endorsed by the Board on 27 April 2016.
The draft ABP and Budget will then be provided to constituent councils for any further comment
(due 29 May 2016).

EHA is required to adopt a budget prior to 30 June and the Board will consider and adopt the budget at its **22 June 2016** meeting.

If you have any queries or would like to discuss this further please give me a call.

Thanks

Michael Livori
Chief Executive Officer
T / 8132 3611



F 8132 3623
101 Payneham Road, St Peters SA 5069
PO Box 275 Stepney SA 5069
www.eha.sa.gov.au

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From: [Carlos Buzzetti](#)
To: [Michael Livori](#); [Constituent Council Contacts](#)
Cc: [Natajsha Bevitt](#); [Nadia Conci](#)
Subject: RE: Eastern Health Authority Annual Business Plan and Budget 2016/2017
Date: Wednesday, 9 March 2016 10:26:42 AM

Hi All

Thanks for sending through the draft ABP. I have no feedback to offer at this stage in the process. However, I have forwarded it to Sharon Perkins for her consideration and she may provide you with separate feedback from NPSP in relation to financial aspect of the draft Plan.

With kind regards

Carlos Buzzetti
GENERAL MANAGER, URBAN PLANNING & ENVIRONMENT



City of Norwood Payneham & St Peters
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Think before you print.

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From: [Magnus Heinrich](#)
To: [Michael Livori](#)
Subject: FW: Eastern Health Authority Annual Business Plan and Budget 2016/2017
Date: Tuesday, 15 March 2016 5:26:24 PM
Attachments: [Board of Management meeting 24.02.2016 Report - 6.03 - Attachment - Deve....pdf](#)

Hi Michael

Apologies for the lateness in replying to this.

It is anticipated that the service delivery model would not change appreciably from the last year. The only thing that would ramp up more positively moving forward is planning for the implementation of the Public Health Plan.

Kind regards



Magnus Heinrich | Manager City Development and Safety
City of Burnside | 401 Greenhill Road Tasmore SA 5065
P: 08 8366 4136 | F: 08 8366 4299 | M: 0407149418
MHeinrich@burnside.sa.gov.au
www.burnside.sa.gov.au



Our Ref: AF16/14

23 March 2016

To all Constituent Council CEO's with Tables individualised

Dear CEO

RE: Eastern Health Authority (EHA) Annual Business Plan and Budget for 2016/2017

EHA's Board of Management held a budget workshop on 16 March 2016 to consider the 2016/2017 Annual Business Plan and Budget.

The Board endorsed a preliminary draft Annual Business Plan and Budget, which is now provided to Constituent Councils for review and comment (enclosed). Also enclosed is a document summarising the changes to the Annual Business Plan.

The global increase in contributions for EHA operations requested from Constituent Councils for 2016/2017 based on the preliminary draft budget is 1.97% as detailed in the table below.

Table 1: Global increase in contributions requested from Constituent Councils

| Total Council Contributions required | | Change \$ | Change % |
|--------------------------------------|--------------|--------------|----------|
| 2015/2016 | \$ 1,609,306 | | |
| 2016/2017 | \$ 1,641,055 | \$ 31,749.00 | 1.97% |

The table below details the average annual increase (1.34%) in total Constituent Council contributions over the past 3 financial years.

Table 2: Average annual increase in total Constituent Council Contributions over last 3 financial years

| Total Council Contributions required | | Change \$ | Change % |
|---|--------------|--------------|----------|
| 2013/2014 | \$ 1,576,207 | | |
| 2014/2015 | \$ 1,576,605 | \$ 398.00 | 0.03% |
| 2015/2016 | \$ 1,609,306 | \$ 32,701.00 | 2.03% |
| 2016/2017 | \$ 1,641,055 | \$ 31,749.00 | 1.97% |
| 4 Year Total | | \$ 64,848.00 | 4.03% |
| Average Annual Increase Over Last 3 Years | | | 1.34% |

As you are aware the change in contributions required from each individual council will differ from the global change (1.34%) when the charter funding formula is applied.

The table below details the change for each council using the formula contained in the current (2009) Charter.

Table 3: Constituent Council Contributions for 2016/2017 – 2009 Formula

| Eastern Health Authority Constituent Council Contribution Calculations 2016-2017 - 2009 Formula | | | | | | | |
|---|--------------|------------|--------------|------------|------------|-------------|--------------|
| | | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
| Total Required Operating contributions 2016-2017 | \$ 1,641,055 | | | | | | |
| Constituent Council Contribution proportion | | 26.39% | 23.47% | 30.39% | 13.65% | 6.10% | 100.00% |
| Actual Contribution | | \$ 433,140 | \$ 385,131 | \$ 498,646 | \$ 223,979 | \$ 100,159 | \$ 1,641,055 |
| Change In Contribution from previous year | | | | | | | |
| Contribution proportion | | 25.79% | 24.22% | 30.49% | 13.65% | 5.85% | 100.00% |
| Actual Contribution | | \$ 415,037 | \$ 389,840 | \$ 490,646 | \$ 219,621 | \$ 94,162 | \$ 1,609,306 |
| Change in Contribution Proportion from previous FY | | 0.60% | -0.76% | -0.10% | 0.00% | 0.25% | 0.00% |
| Change in Contribution (\$) | | \$ 18,103 | \$ (4,708) | \$ 8,000 | \$ 4,358 | \$ 5,996 | \$ 31,749 |
| Change in contributions (%) | 1.97% | 4.36% | -1.21% | 1.63% | 1.98% | 6.37% | 1.97% |

The current revised Charter being considered has an amended council contribution formula when compared to the one contained within the 2009 Charter. The table below details the change in required contributions when the new formula is applied.

Table 4: Constituent Council Contributions for 2016/2017 – 2016 Formula

| Eastern Health Authority Constituent Council Contribution Calculations 2016-2017 - 2016 Formula | | | | | | | |
|---|--------------|------------|--------------|------------|------------|-------------|--------------|
| | | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
| Total Required Operating contributions 2016-2017 | \$ 1,641,055 | | | | | | |
| Constituent Council Contribution proportion | | 25.54% | 23.10% | 31.40% | 13.46% | 6.50% | 100.00% |
| Actual Contribution | | \$ 419,128 | \$ 379,026 | \$ 515,322 | \$ 220,952 | \$ 106,627 | \$ 1,641,055 |
| Change In Contribution from previous year | | | | | | | |
| Contribution proportion | | 25.79% | 24.22% | 30.49% | 13.65% | 5.85% | 100.00% |
| Actual Contribution | | \$ 415,037 | \$ 389,840 | \$ 490,646 | \$ 219,621 | \$ 94,162 | \$ 1,609,306 |
| Change in Contribution Proportion from previous FY | | -0.25% | -1.13% | 0.91% | -0.18% | 0.65% | 0.00% |
| Change in Contribution (\$) | | \$ 4,091 | \$ (10,814) | \$ 24,676 | \$ 1,331 | \$ 12,465 | \$ 31,749 |
| Change in contributions (%) | 1.97% | 0.99% | -2.77% | 5.03% | 0.61% | 13.24% | 1.97% |

At this point in time the formula contained within the 2009 Charter (see table 3) will be used to determine council contribution for 2016/2017. If however the Charter review is finalised prior to the adoption of the budget on 22 June 2016 the formula contained within the revised Charter will be used to determine contributions (see table 4).

Due to the effect of the charter formula, single year changes to individual council contributions can vary significantly from the average percentage value. The table below details the average annual change to your council's contributions over the last 3 years. This compares to the annual average increase of 1.34% per annum over the period detailed previously in table 2.

Table 5: Last 3 years average annual change to your council's contributions - Table individualised for each council

| | NPSP | \$ change previous year | % Change previous year |
|-----------|---------------------|--------------------------------|-------------------------------|
| 2013/2014 | \$ 485,199 | | |
| 2014/2015 | \$ 487,613 | \$ 2,414 | 0.50% |
| 2015/2016 | \$ 490,646 | \$ 3,033 | 0.62% |
| 2016/2017 | \$ 515,322 | \$ 24,676 | 5.03% |
| Average | | \$ 10,041 | 2.05% |
| | Walkerville | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 91,631 | | |
| 2014/2015 | \$ 88,809 | \$ (2,822) | -3.08% |
| 2015/2016 | \$ 94,162 | \$ 5,353 | 6.03% |
| 2016/2017 | \$ 106,627 | \$ 12,465 | 13.24% |
| Average | | \$ 4,999 | 5.40% |
| | Burnside | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 400,742 | | |
| 2014/2015 | \$ 400,896 | \$ 154 | 0.04% |
| 2015/2016 | \$ 415,038 | \$ 14,142 | 3.53% |
| 2016/2017 | \$ 419,128 | \$ 4,090 | 0.99% |
| Average | | \$ 6,129 | 1.52% |
| | Campbelltown | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 381,319 | | |
| 2014/2015 | \$ 376,996 | \$ (4,323) | -1.13% |
| 2015/2016 | \$ 389,840 | \$ 12,844 | 3.41% |
| 2016/2017 | \$ 379,026 | \$ (10,814) | -2.77% |
| Average | | \$ (764) | -0.17% |
| | Prospect | \$ change previous year | % Change previous year |
| 2013/2014 | \$ 217,316 | | |
| 2014/2015 | \$ 222,291 | \$ 4,975 | 2.29% |
| 2015/2016 | \$ 219,622 | \$ (2,669) | -1.20% |
| 2016/2017 | \$ 220,952 | \$ 1,330 | 0.61% |
| Average | | \$ 1,212 | 0.56% |

If possible it would be appreciated if feedback is received by 26 April 2016 so that it can be considered by the Board of Management at its meeting to be held on 27 April 2016.

Please note councils will be again provided with an opportunity to provide feedback on the Annual Business Plan and Budget following the April Board of Management meeting when the official draft will be considered.

If you need any more information or would like to discuss this further, please contact me on telephone 8132 3611.

Yours sincerely

Michael Livori
Chief Executive Officer

Annual Business Plan 2016 - 2017

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INTRODUCTION

The Eastern Health Authority (EHA) Charter requires an Annual Business Plan to support and inform the Annual Budget. To meet its legislative and governance requirements EHA's Budget and therefore its Annual Business Plan for the ensuing financial year must be adopted prior to June 30.

EHA's Annual Business Plan:

- includes an outline of:
 - (i) EHA's objectives for the financial year
 - (ii) the activities that EHA intends to undertake to achieve those objectives
 - (iii) the measures (financial and non-financial) which EHA intends to use to assess its performance against its objectives over the financial year
- assesses the financial requirements of EHA for the financial year and taking those requirements into account, sets out a summary of its proposed operating expenditure, capital expenditure and sources of revenue
- sets out the structure for determining Constituent Council contributions for the financial year

This document presents the Annual Business Plan for EHA for the 2016-2017 financial year. The Plan, together with the Annual Budget for the 2016-2017 financial year will be presented to EHA's Board of Management for adoption on 22 June 2016.

ABOUT EASTERN HEALTH AUTHORITY

EHA is a regional subsidiary established pursuant to the *Local Government Act 1999*.

Section 43 of the *Local Government Act 1999* enables two or more councils (known as Constituent Councils) to establish a regional subsidiary to perform a function of the councils in a joint service delivery arrangement. The function performed may be prescribed by the *Local Government Act 1999* or another Act.

EHA's Constituent Councils are:

- City of Burnside (Burnside)
- Campbelltown City Council (Campbelltown)
- City of Norwood Payneham and St Peters (NPSP)
- City of Prospect (Prospect)
- The Corporation of the Town of Walkerville (Walkerville)

The region that the five councils encompass is predominantly residential with retail / commercial land use and limited industrial activity. Development dates from the mid 1800s and many heritage-listed buildings remain. Major features of the area include popular dining and shopping precincts, numerous public and private schools, large sporting complexes, public swimming centres, hospitals, two national parks and a university. The River Torrens and five major creeks traverse the area.

The area covered by EHA is located in Adelaide's eastern and inner northern suburbs. EHA discharges its Constituent Councils' environmental health responsibilities that are mandated in the following legislation:

South Australian Public Health Act 2011

Food Act 2001

Supported Residential Facilities Act 1992

A wide range of functions are performed to protect the health and wellbeing of approximately 160,000 residents plus those people who visit the region. Functions include the provision of immunisation services, hygiene and sanitation control, licensing and monitoring of Supported Residential Facilities (SRFs) and surveillance of food premises.

The diversity and increasing complexity of environmental health makes it difficult for small organisations to have staff who are experienced and fully competent across all spheres of the profession. EHA is structured to proficiently deliver all required services on behalf of its Constituent Councils.

With the demand for local government to adopt a more cooperative focus in the structure of their organisations and the delivery of their services EHA serves as an outstanding example of shared service delivery. It is local councils working together to protect the health of their communities.

The table below provides a snapshot of the environmental health services provided for each Constituent Council.

Table 1: Snapshot of the environmental health services provided for each Constituent Council

| Activity Data | Burnside | C/Town | NPSP | Prospect | Walkerville | Total |
|--|----------|--------|------|----------|-------------|-------|
| No. of Food Premises | 273 | 277 | 462 | 186 | 47 | 1245 |
| Swimming Pools | 16 | 3 | 15 | 2 | 3 | 39 |
| High Risk Manufactured Systems | 11 | 7 | 17 | 7 | 7 | 49 |
| Supported Residential Facilities | 3 | 2 | 1 | 2 | 0 | 8 |
| Environmental Health Complaints | 64 | 70 | 80 | 39 | 15 | 268 |
| Hairdresser/Beauty Treatment | 71 | 59 | 109 | 27 | 9 | 275 |
| No. of Yr 8 Enrolments | 700 | 534 | 664 | 141 | 64 | 2103 |
| Average clients receiving vaccines at public clinics | 1058 | 1196 | 1387 | 276 | 200 | 4117 |

OVERVIEW OF THE BUSINESS PLAN

EHA develops an Annual Business Plan for the purposes of translating strategic directions into actions, outputs and outcomes for the relevant financial year.

In preparing the Annual Business plan there are a number of key influences that are taken into consideration to ensure that EHA can continue to provide services and programs to its Constituent Councils and the community.

Significant Influences

Significant factors which have influenced the preparation of the 2016-2017 Annual Business Plan are:

- enterprise bargaining and increment level increases for staff employment arrangements
- the continuation of the contract service to undertake immunisations and monitor Supported Residential Facilities on behalf of The City of Unley
- the continuation of the worksite immunisation program
- continuation of the service agreement with SA Health to deliver the School Immunisation Program (SIP)
- implementation and monitoring of the Regional Public Health Plan in conjunction with Constituent Councils
- support for Eastern Regional Public Health Plan Advisory Committee
- transition to cloud based computing environment.

Priorities

EHA has set the following priorities as part of the 2016-2017 Annual Business Plan:

- to continue to provide a professional and cost effective environmental health service to its Constituent Councils and their respective communities
- support the Eastern Regional Public Health Plan Advisory Committee
- implement and monitor the Regional Public Health Plan in conjunction with Constituent Councils
- transition ICT environment from on premise to cloud based
- refine Health Manager system to provide improved reporting and gain efficiencies in on site applications
- evaluate implementation of tablets using Health Manager software for field based data capture
- finalise and introduce the new food safety training program
- review EHA WHS and IM Plan 2012 – 2015
- ongoing evolvement of performance development framework
- refine process for inducting staff
- retender for current service contracts
- use immunisation coverage data from a range of sources to better identify and remind residents of overdue vaccinations
- investigate available vaccine reminder services and apps
- explore further opportunities for presentations to residents through community centres and libraries to existing parent groups
- promotion and communication of changes to the National Immunisation Schedule affecting older residents .

FUNDING THE BUSINESS PLAN AND THE BUDGET

EHA bases its expenditure on the services required to ensure its Constituent Councils are meeting their wide range of legislative responsibilities which are mandated in a range of legislation including the South Australian *Public Health Act 2011*; *Food Act 2001*; *Supported Residential Facilities Act 1992* and the *Local Government Act 1999*.

The forecast for the 2016-2017 financial year is that EHA's expenditure to carry out its operational activities detailed in the annual business plan will equal its operating income resulting in a balanced operating budget.

To achieve this operating budget result, a total of \$1,641,055 will be raised through contributions from our Constituent Councils for operational expenditure in 2016-2017.

EHA's Charter requires Constituent Councils to contribute to its operations in accordance with a formula that calculates the estimated proportion of overall activities it requires. The calculations are based on the previous year's activities.

The Budgeted Financial Statements (found on pages 37 to 38) put the annual budget required to implement the annual business plan into a format which provides a complete picture of EHA's financial position to its member councils. They consist of a Budgeted Income Statement, Budgeted Balance Sheet, Budgeted Statement of Changes in Equity and Budgeted Statement of Cash Flows.

Sources of revenue other than Constituent Council contributions which are utilised to fund the activities of EHA are listed on the following page.

Statutory Charges

Statutory Charges relate mainly to fees and fines levied in accordance with legislation and include food inspection fees, supported residential facility licences, and environmental health related fines.

User Charges

User charges relate mainly to the recovery of service delivery costs through the charging of fees to users of EHA's services. These include the provision of food safety audit services, worksite immunisation programs, fee vaccines at community immunisation clinics, service delivery fee (\$40.00) for non-residents, immunisation contract services to The City of Unley and the licensing of SRFs on behalf of The City of Unley.

Grants

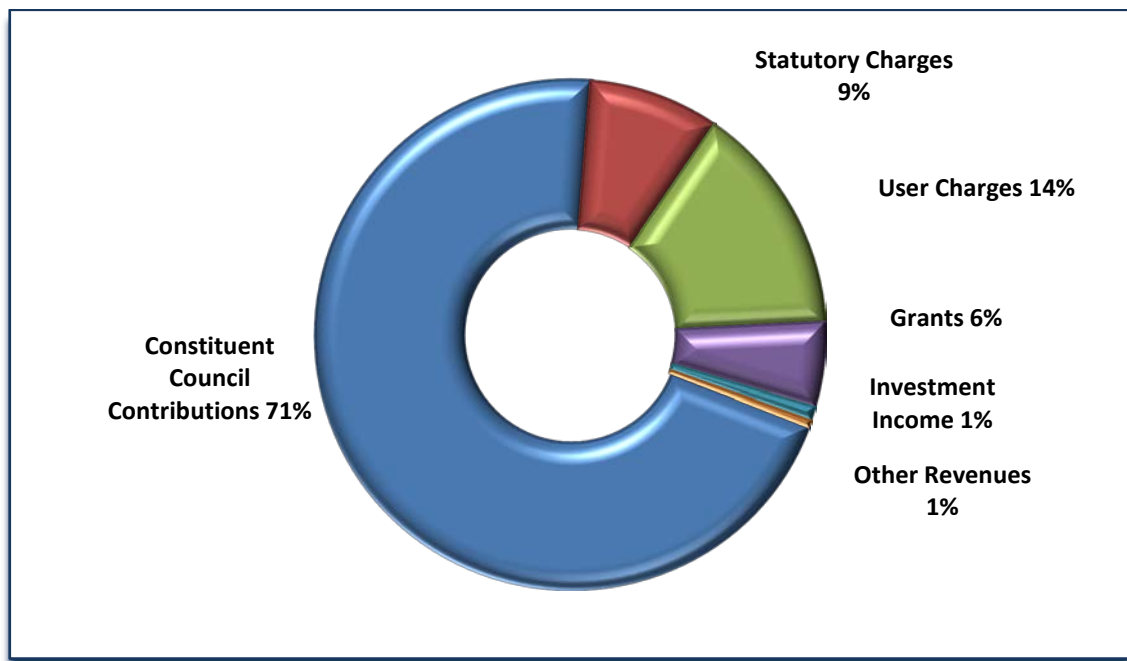
Grants include monies received from State and Federal Governments for the purposes of funding the delivery of the programs such as immunisation services.

Investment Income

Investment income includes interest on operating cash held with the Local Government Finance Authority.

Other Revenues

Other revenues relates to a range of unclassified items which do not fit within the main income categories.

Graph 1: Funding Sources 2016-2017

As a guide, the table below details each Constituent Council's expenditure on Public Health services provided by EHA as a percentage of their total expenditure based on 2015/2016 budget figures.

Table 2: Each Constituent Council's expenditure on Public Health services provided by EHA

| | Contribution 2015/2016 | Total Budgeted Expenditure 2015/2016 | Public Health Spend % |
|--|---------------------------|---|--------------------------|
| Burnside | \$415,037 | \$40,851,000 | 1.02% |
| Campbelltown | \$389,840 | \$38,544,600 | 1.01% |
| NPSP | \$490,646 | \$38,060,000 | 1.29% |
| Prospect | \$219,621 | \$21,383,715 | 1.03% |
| Walkerville | \$94,162 | \$9,179,000 | 1.03% |
| Total Constituent Council Expenditure | \$1,609,306 | \$148,465,600 | 1.09% |

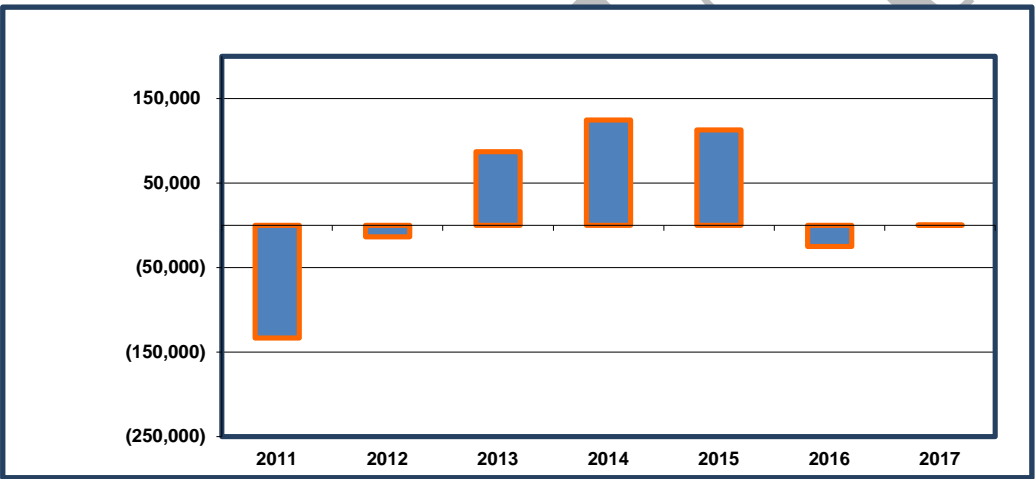
FINANCIAL INDICATORS

A series of financial indicators have been developed by local government to assist in determining whether a local government organisation is financially sustainable or moving to a position of financial sustainability. These indicators are set out below.

Operating Surplus (Deficit)

This graph indicates the difference between day-to-day income and expenses for the particular financial year. It shows the extent to which operating revenue is sufficient to meet all operating expenses including depreciation and consequently the quantum of expenses which is being met by Constituent Councils.

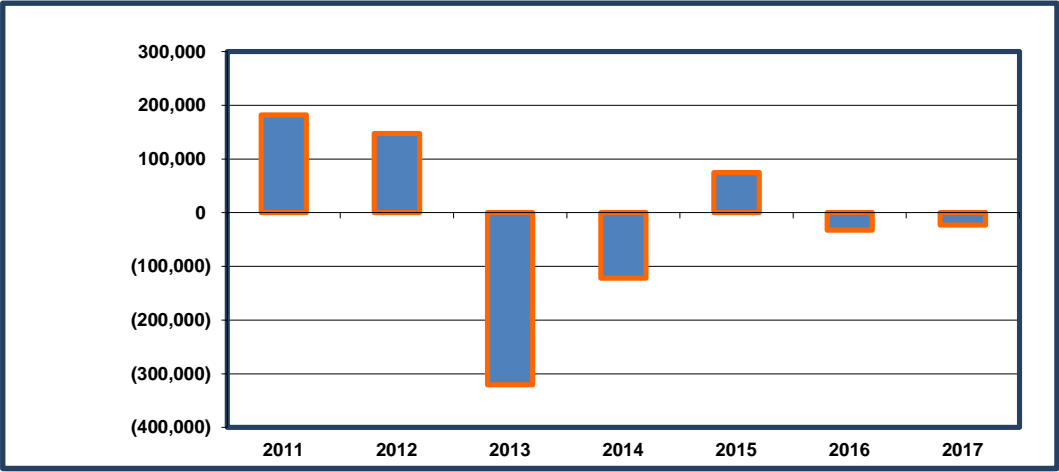
Graph 2: Operating Surplus / (Deficit)



Net Financial Assets

This graph below indicates the money held, invested or owed to EHA less money owed to others (including provisions for employee entitlements).

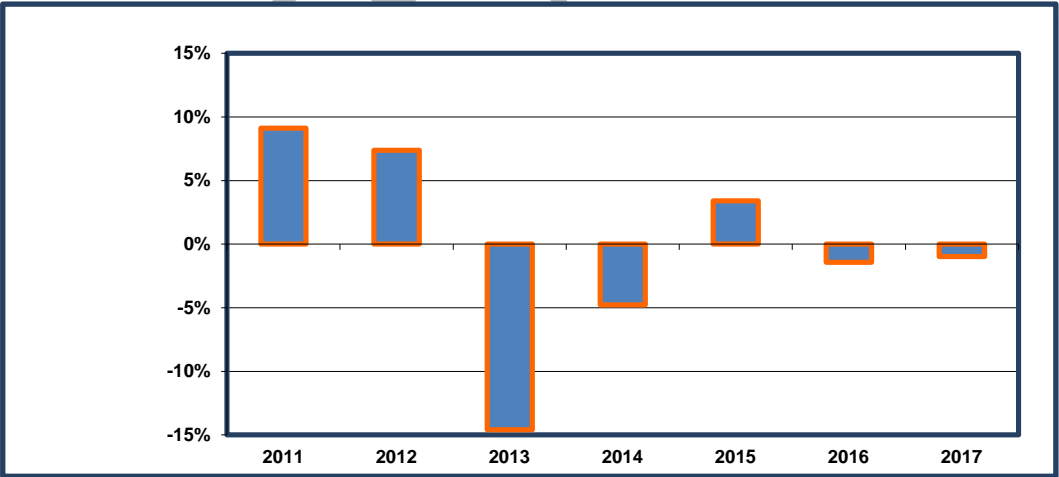
Graph 3: Net Financial Assets



Net Financial Assets Ratio

This ratio indicates the extent to which net financial assets of a subsidiary can meet its operating revenue. Where the ratio is decreasing, it indicates a greater amount of a subsidiary's operating revenues is required to service its financial obligations.

Graph 4: Net Financial Assets Ratio



ACTIVITIES FOR 2015-2016

The following information reflects the actions which will be performed to achieve the objectives of the seven core activities of EHA over the next 12 months.

1.0 – Governance and Organisational Development

Background

EHA is governed by its Charter and the application of good governance and administration practices which ensure its requirements are met is essential.

Practices which ensure EHA conducts its business in an effective manner include the provision of appropriate support to the Board of Management and sound financial and human resource management.

The staff who are employed by EHA are its most valuable asset. It is essential that the working environment is one which nurtures and supports effective collaboration, and where knowledge and value are continually created. Professional peer support allows for the potential to build organisational capacity through the transfer and pooling of knowledge and assists in workforce retention and stability. An appropriate work environment helps to promote a dynamic and committed workforce.

Objective 1 Administration of legislative and corporate governance requirements

| Actions | Performance Measures |
|---|---|
| 1.1 Monitor the compliance of statutory requirements identified in the Charter. | Statutory requirements complied with as per Charter. |
| 1.2 Properly convene Board meetings providing agendas and minutes. Minimum of 5 ordinary meetings conducted. Notice of meeting given 3 clear days prior to meeting. Minutes provided within 5 days of meeting. | 5 meetings conducted. Appropriate notice given. Timeframe met. |
| 1.3 Conduct election for Chair and Deputy Chair of Board of Management in February. | Election conducted at February meeting. |
| 1.4 Annual business plan to be developed with detailed objectives for the year in consultation with Constituent Councils. | Draft considered at May meeting and adopted at June meeting. |
| 1.5 Develop budgeted financial statements to implement the Annual Business Plan of EHA. Draft Budgeted Financial Statements considered at May meeting. Budgeted Financial Statements adopted at June meeting. | Budget and Financial Statements adopted. Copy of budget provided to CEO of Constituent Councils within 5 days of adoption. |
| 1.6 Keep proper books of account, regularly report on the financial position of EHA, and apply prudent financial management as required by the Charter. | Financial reports provided at each Board Meeting. Budget reviews presented at October, February and May meetings. |
| 1.7 Conduct Audit Committee meetings as required by Charter. | Audit committee meet minimum of two times per annum. |
| 1.8 Ensure the financial statements are audited annually as per the requirements of the Charter. | Audited financial statements adopted at August meeting and provided to Constituent Councils within 5 days. |
| 1.9 Monitor Long Term Financial Plan. | Plan reviewed annually as part of budget process. |
| 1.10 Provide regular statistical reports to Board Members and Constituent Council. | Reports provided at scheduled Board meetings. |

| Actions (continued) | Performance Measures |
|--|--|
| 1.11 Conduct annual review of delegations. Lead Constituent Councils in process. Resolutions and Instruments of delegation provided to Constituent Councils. | Documents provided to Constituent Councils. Delegations from EHA to CEO reviewed. |
| 1.12 Compile annual report in relation to the operations of EHA as required by the charter. | Annual report adopted at August meeting and provided to Constituent Councils and other stakeholders. |
| 1.13 Compile report pursuant to the <i>South Australian Public Health Act 2011</i> in relation to the operations of EHA as required by legislation. | Report adopted at relevant Board meeting and provided to Public Health Council. |
| 1.14 Compile annual report pursuant to the <i>Food Act 2001</i> in relation to the operations of EHA as required by legislation. | Report adopted at August meeting and provided to SA Health. |
| 1.15 Compare Annual Business Plan against performance measures. | Report presented to August meeting. |
| 1.16 Provide delegates report to CEO of each Constituent Council following Board meetings for tabling at subsequent council meeting. | Reports provided following Board meetings. |
| 1.17 Properly convene meetings of Constituent Council nominated contacts including providing agendas and minutes. | 4 meetings conducted per year. |
| 1.18 Maintenance of electronic records management system to properly maintain records and reference documents of EHA. | System developed to ensure appropriate standards are being met. |
| 1.19 Explore the potential for the expansion of service provision to areas outside of its current Constituent Council areas. | Report to Board on expansion opportunities. |
| 1.20 Complete implementation of a computer "disaster recovery system" to assist with continuity of service in the event of loss of access to computer infrastructure. | Disaster Recovery system implemented. |
| 1.21 Maintenance of Health Manager (HM) (electronic database). Continue to expand HM's internal and external functionality, to improve inspection, complaint and administrative efficiency and reporting capabilities. | Introduce new applications and reporting capabilities where required. Continue to liaise with Open Office to discuss new applications. |

| Actions (continued) | Performance Measures |
|---|--|
| 1.22 EHO's to continue to utilise the hand held electronic tablets with access to Health Manager during routine food inspections and complaint investigations. Expand the use of the electronic tablets in other EHO onsite field work. | Implementation of electronic tablets during routine food inspections, complaint investigations and other EHO onsite field work to improve inspection, complaint and administrative efficiency. |
| 1.23 Provide administrative assistance to the Public Health Plan Advisory Committee and coordinate reports to the Board of Management. | Reports provided to Board Meetings as required. |
| 1.24 Participate in the Environmental Managers Forum to address environmental health issues and promote uniformity and professional consistency. | Management to attend and participate in the Environmental Managers Forum meetings. |
| 1.25 Continue membership and actively participate in the Eastern Adelaide Zone Emergency Management Committee to develop and finalise the Eastern Zone Emergency Management Plan. | Attend the Eastern Adelaide Zone Emergency Management Committee and actively contribute towards the development of the Eastern Zone Emergency Management Plan. |

Objective 1.1 Professional, skilled and committed staff providing valued services to the community

| Actions | Performance Measures |
|---|---|
| 1.1.1 Ensure that EHA is properly staffed and resourced in order to carry out its responsibilities. | Continually review staff resources and report to Board if required. |
| 1.1.2 Performance development framework used to support staff and link day-to-day and long term activities of staff to the Annual Business Plan and when applicable the Public Health Plan. | Performance development framework review as required. |
| 1.1.3 Provide continuing professional development opportunities through ongoing education and training which is relevant to roles within EHA. | Training and education opportunities provided to staff. |
| 1.1.4 Continue to foster team cohesiveness and support effective teamwork. | Training and team building activity provided to staff. |
| 1.1.5 Encourage staff to be members of their relevant professional organisation. Support participation and EHA representation at professional Special Interest Groups. | Encourage membership and active participation. |

| Actions (continued) | Performance Measures |
|---|---|
| 1.1.6 Maintain a multi-disciplinary approach to the distribution of tasks within teams work review process to promote experience in a range of activities and increase expertise in specialist areas. | Annual work plan reviews for all staff. |
| 1.1.7 Provide systems for a safe working environment with appropriate Work Health and Safety (WHS) practices in place. | WHS to be discussed at all team and general staff meetings. Provide appropriate training and equipment to new staff. |
| 1.1.8 Review the Work Health Safety action plan outlining program of improvements required in EHA's WHS 3 Year Plan. | Action plan reviewed with input from staff. |
| 1.1.9 Further improve EHA's induction program to ensure EHA staff are and familiar with EHA's methods of operation upon commencement of employment. | Induction program updated. |

2.0 - Health Education and Promotion

Background

Health education and promotion is a vital component in creating healthier living environments and communities. Traditionally local government health education and promotion activities have centred on regulatory function and infectious disease control.

The *South Australian Public Health Act 2011* (the Act) is part of a range of public health legislation designed to protect and promote the health of South Australians. The objective of Act is to 'promote and provide for the protection of the health of the public of South Australia and to reduce the incidence of illness, injury and disability'. The Act requires councils to develop a public health plan consistent with the State Public Health Plan which responds to public health challenges in the area.

A regional approach for public health planning by EHA and its Constituent Councils builds on the existing, successful collaboration for shared environmental health services through EHA as well as the initiatives of the Eastern Region Alliance (ERA). This approach improves EHA's and Council's capacity to engage with potential partner organisations and to recognise opportunities for joint advocacy.

The first Public Health and Wellbeing Plan for EHA and Constituent Councils, 'Better Living Better Health' (the Plan) was endorsed in 2015. The Plan provides a starting point for documenting the regional state of health and strategic directions for improving community wellbeing. The Plan does not address all public health issues, rather it is a 'place to start' having regard to local priorities and the State Public Health Plan.

EHA and its Constituent Councils are committed to the implementation and the continual review of the strategic directions of the Plan within each five year planning cycle.

Objective 2 An innovative approach to public and environmental health through community education and interaction to increase awareness and understanding

| Actions | Performance Measures |
|--|---|
| 2.1 Develop and maintain a comprehensive range of health education and promotion material targeting local health issues incorporating the resources of other health related agencies. | Information resources maintained. |
| 2.2 In conjunction with health stakeholders support the promotion and delivery of a range of public health information to raise community health awareness and address priority health conditions. | Target issue to be addressed as required by stakeholders. |
| 2.3 Provide targeted educational material in relation to recommended practices, standards and legislative requirements relevant to those responsible for public health related premises (premises with public swimming pools and spas, cooling tower systems and warm water systems, hairdressers and beauty premises, skin penetration premises, tattoo, body piercing, acupuncture). | Information distributed to be provided as required to improve compliance with legislative requirements. |
| 2.4 Promote EHA services and educate the community on matters of public health in conjunction with Constituent Councils. | Provide information updates and articles to Constituent Councils as required. |
| 2.5 Liaise with Constituent Councils to explore the possibilities of co-ordinating and or contributing to public health forums, to raise awareness of current public health matters. | Discuss the possibilities of public health forums with Constituent Councils. |
| 2.6 Promote the benefits of immunisation through a variety of mediums such as council customer service centres and council publications, information kits, council and EHA websites. | Number of articles published and amount of information accessed. |
| 2.7 Provide targeted educational material to food proprietors, food handlers and the community on food safety matters. | Educational material provided as required. |
| 2.8 Finalise and introduce the new food safety training program. | Finalise and introduce a new food safety training program. |
| 2.9 Participate in Food Safety week and other proactive educational initiatives that raise awareness of food safety amongst the community and improve food handler's understanding of food hygiene. | Number of proactive educational activities conducted each year (at least one per year). |

| Actions (continued) | Performance Measures |
|---|--|
| 2.10 Participate in Public Health Week and other proactive educational initiatives that raise awareness of public health related issues amongst the community. | Number of proactive educational activities conducted each year (at least one per year). |
| 2.11 Educate proprietors of SRFs in relation to relevant legislative requirements to ensure that adequate standards of assisted care, living standards, safety, hygiene and nutrition are maintained. | Information provided during visits to facility or as needed. |
| 2.12 Review and update EHA's health promotion and information material to ensure information is relevant. | Review and update as required. |
| 2.13 Monitor funding opportunities for pro-active health education and prevention programs. | Report opportunities to Board of Management. |
| 2.14 Actively promote EHA's functions to the public, key stakeholders and the Constituent Council staff. | Quarterly Council Contact Meetings and presentations to Constituent Council staff. Explore promotional initiatives. |
| 2.15 Investigate and implement improvements to upgrade EHA's website to facilitate the exchange of information and feedback and improve awareness of EHA services. | Improved website functionality. |

3.0 – Public and Environmental Health

Background

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

World Health Organisation (WHO), 2012

The *South Australian Public Health Act 2011* (the Act) and Regulations are mechanisms employed by EHA to fulfil its duty of care on behalf of the Constituent Councils with the following public health issues:

- prevention and management of domestic squalor and hoarding
- surveillance of swimming pool, spa pool, cooling tower and warm water system operations
- assessment of hairdressing salons, beauty salons, acupuncture clinics and tattoo parlours
- approval and inspection of waste control systems
- discharge of waste to the environment
- prevention and control of notifiable diseases

The Act contains a general duty on all persons in the community who undertake activities to ensure that they take reasonable steps to ‘prevent or minimise any harm to public health’ that they have or might cause as a result of their actions or their failure to act: section 56(1) of the Act provides that:

‘A person must take all reasonable steps to prevent or minimise any harm to public health caused by, or likely to be caused by, anything done or omitted to be done by the person’.

The Act establishes principles or values that guide everyone involved in administering the Act or making decisions under it, which includes orders, the exercise of other powers or general planning or policy decisions.

These principles are as follows:

- precautionary principle
- proportionate regulation principle
- sustainability principle
- principle of prevention
- population focus principle
- participation principle
- partnership principle
- equity principle

Environmental protection originated from the traditional approach of public health when the *Commonwealth Environment Protection (Impact of Proposals) Act* was introduced in 1974. Since its introduction, the definition of environment has developed from merely being 'all aspects of the surroundings of human beings, whether affecting human being as individuals or in social groupings' to 'land, air, water, organisms and ecosystems, and includes the amenity value of an area.'

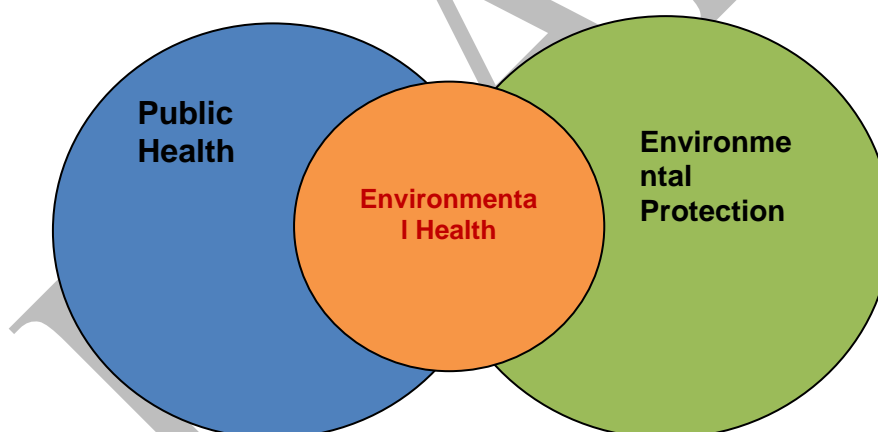


Figure 1.1 – the relationship between public health, environmental health and environmental protection

The point at which Public Health and Environmental Protection overlap is Environmental Health (Fig 1.1).

Where harm or potential harm to others cannot be shown, other statutes may offer alternative and more appropriate ways of proceeding. For example issues relating to unsightly conditions, nuisances and hazards to health or safety associated with the keeping of animals are better dealt with section 254 of the *Local Government Act 1999*.

The Environment Protection Act and Policies provide the framework to resolve issues that have a detrimental effect on our environment and subsequently our health. As the definitions of public health and environment protection overlap, it should only be expected that the legislation protecting these two areas also overlap.

Environmental health often requires a multidisciplinary approach. In the course of investigating complex issues, Environmental Health Officers work together and co-operate with other local government professionals and State government departments.

Objective 3 **Promote healthy communities by managing the risk from communicable and infectious disease and environmental impacts**

| Actions | Performance Measures |
|--|---|
| <p>3.1 Compile and maintain a register of all public health related premises.</p> <p>Public Health related premises are:</p> <ol style="list-style-type: none"> 1. premises with public swimming pools and spas 2. premises with cooling tower systems and warm water systems 3. hairdressers and beauty premises 4. skin penetration premises (tattoo, body piercing, acupuncture) 5. waste control systems | <p>Register maintained at all times.</p> |
| <p>3.2 Using the SA Health assessment forms determine appropriate standards of public swimming pools and spas are maintained in accordance with the <i>South Australian Public Health (General) Regulations 2013</i>.</p> | <p>Assessments performed according to risk based schedule.</p> |
| <p>3.3 Using the SA Health assessment forms determine appropriate standards of cooling towers and warm water systems for the management of <i>Legionella</i> in accordance with <i>South Australian Public Health (Legionella) Regulations 2013</i>.</p> | <p>Assessments performed at least annually.</p> |
| <p>3.4 Collect water samples from cooling towers and warm water systems for analysis based on requirements <i>South Australian Public Health (Legionella) Regulations 2013</i>.</p> | <p>Water samples collected and sent for analysis at least annually.</p> |
| <p>3.5 Investigate notifiable <i>Legionella</i> incidences and high <i>Legionella</i> counts in a systematic manner in accordance with SA Health guidance and internal procedures.</p> | <p>Prompt investigation commenced in accordance with service standards.</p> |

| Actions (continued) | Performance Measures |
|---|--|
| 3.6 Respond to complaints to ensure appropriate infection control standards at hairdressing salons are maintained in accordance with Guidelines on the Public Health standards of practice for hairdressing and other relevant legislation using Environmental Health Australia assessment form. | Investigate and respond to complaints in accordance with the customer service standards. |
| 3.7 Respond to complaints to ensure appropriate infection control standards at beauty and skin penetration premises are maintained in accordance with Guidelines on the safe and hygienic practice of skin penetration and other and other relevant legislation using the Environmental Health Australia assessment form. | Investigate and respond to complaints in accordance with the customer service standards. |
| 3.8 Using the SA Health assessment forms determine appropriate standards at beauty premises are maintained in accordance with Guidelines on the safe and hygienic practice of skin penetration and other and other relevant legislation. | Assessments performed according to risk based schedule. |
| 3.9 Identify new personal appearance practices (ie. laser hair removal, tattoo removal and permanent make-up) within beauty premises. Liaise closely with SA Health to determine if these practices are required to be assessed in accordance with Guidelines on the safe and hygienic practice of skin penetration and other relevant legislation. Where required update the register and undertake assessments. | Continue to update the register when new businesses are identified. |
| 3.10 Using the SA Health assessment forms determine appropriate standards at skin penetration premises (tattoo, body piercing, acupuncture) are maintained in accordance with Guidelines on the safe and hygienic practice of skin penetration and other relevant legislation. | Assessments performed according to risk based schedule. |
| 3.11 Assess applications for the installation of waste control systems in accordance with <i>South Australian Public (Wastewater) Regulations 2013</i> , the <i>On-site Wastewater System Code, 2013</i> , internal procedures, and service standards. | Application managed in accordance with service standards. Compliance with legislative requirements. |
| 3.12 Apply the <i>Public Health Act, 2011</i> to respond to complaints or concerns about standards of sanitation and hygiene of boarding and lodging houses. | Respond to complaints as required in accordance with customer service standards. |

| Actions (Continued) | Performance Measures |
|---|---|
| <p>3.13 Respond to public health enquiries/complaints within the built environment that give rise to a risk to health in relation to:</p> <ul style="list-style-type: none"> - hoarding and squalor - sanitation - animal keeping - vector control - air quality - hazardous and infectious substances (asbestos and clandestine drug labs) - waste control - notifiable diseases - refuse storage <p>Enquiries/complaints are investigated in accordance with the customer service standards. Seek to accomplish a long term solution. Co-ordinate a multi-agency response where necessary.</p> | <p>Respond to complaints as required in accordance with customer service standards.</p> |
| <p>3.14 Distribute advisory information via mail to households informing them of localised vermin and pest problems and how they can be minimised, e.g. rodents, mosquitoes.</p> | <p>Respond to complaints as required in accordance with customer service standards.</p> |
| <p>3.15 Provide advice and information materials to residents about air quality concerns including the installation, operation and standards of solid fuel burning appliances.</p> | <p>Information available to community and via website and as required. Improved management of burning appliances as required.</p> |
| <p>3.16 Provide rodent bait to residents upon request.</p> | <p>Rodent bait provision maintained.</p> |
| <p>3.17 Undertake relevant notifiable disease investigations in collaboration with SA Health.</p> | <p>Respond to disease notifications in accordance with customer service standards.</p> |
| <p>3.18 Assist members of the community who have a managed health condition (e.g. Diabetes) by offering approved sharps containers at cost price and free disposal of full and approved sharps containers delivered to EHA.</p> | <p>Community sharps disposal service maintained.</p> |
| <p>3.19 Collect syringes that have been unsafely discarded on private property.</p> | <p>Safe and timely collection of discarded syringes within customer service standards and following internal procedures.</p> |
| <p>3.20 Assessments and investigations are updated in Health Manager (electronic database) to ensure effective reporting to the Board of Management, Constituent Councils and SA Health.</p> | <p>Update within 5 days of assessment or action.</p> |

| Actions (continued) | Performance Measures |
|--|---|
| 3.21 Co-ordinate the Eastern Hoarding and Squalor Committee meetings. | Coordinate the Eastern Hoarding and Squalor meetings. |
| 3.22 Participate with Environmental Health Australia and state and local government authorities to review best practice standards and promote uniformity and professional consistency. | Attend and actively participate. |
| 3.23 Participate in the Environmental Health Australia 'Public Health' and 'Waste Control' Special Interest Groups (SIG) to promote uniformity, professional consistency and to discuss the latest information in relation to public health and waste control issues affecting local government. | Attend and actively participate at SIG meetings. |
| 3.24 Ensure activities and outcomes are communicated to the Board of Management, Constituent Councils and state government bodies as required via: Reports to the Board of Management, Delegates Reports and Annual Report. | Board Reports and Annual Reports compiled and distributed. |
| 3.25 Respond to development application referrals from councils about public health related premises and activities. | Respond to all referrals in accordance with the customer service standards. |
| 3.26 Liaise with Constituent Councils to address issues of environment and sustainability where there is a connection to human health. | Comment and input made where applicable. |
| 3.27 Ensure providers who supply water to the public under the <i>Safe Drinking Water Act 2012</i> , meet the requirements set out by the act and <i>Safe Drinking Water Regulations 2012</i> . | Continue to monitor potential water providers to ensure compliance with the Act and associated regulations. |

4.0 - Immunisation

Background

Immunisation is a simple, safe and effective way of protecting people against harmful diseases that can cause serious health problems in the community. Immunisation not only protects individuals from life-threatening diseases, but also dramatically reduces transmission in the community. The more people who are vaccinated, the fewer opportunities a disease has to spread.

The Australian Government's Immunise Australia Program implements the National Immunisation Program (NIP) Schedule, which currently includes vaccines against a total of 16 diseases. These include routine childhood vaccinations against diseases that were once widely fatal, such as measles, diphtheria and whooping cough (pertussis), as well as more recently developed vaccines, such as Human Papillomavirus (HPV) and the meningococcal C vaccine. Local Government plays a significant role in the delivery of immunisation in South Australia contributing to the Immunise Australia Program.

EHA offers all vaccines on the National Immunisation Program Schedule at its public clinics as well as the Annual Influenza Vaccine. Around 200 community immunisation clinics are provided each year at 6 different locations at a variety of accessible times. Currently EHA offers catch-up vaccination history assessments to not only new residents to Australia but also to Australian children who are overdue. These clients are then able to attend an EHA Immunisation clinic for the vaccines recommended as per the National Immunisation Schedule. Each year dedicated clinics for influenza vaccination are provided promoting greater coverage against seasonal influenza disease.

As part of the Immunise Australia Program vaccines are provided to adolescents through the School Immunisation Program (SIP). Year 8 students will be vaccinated with HPV (human papillomavirus), Varicella (chicken pox) and dTpa (diphtheria, tetanus, whooping cough). EHA will undertake 57 visits to 19 high schools offering vaccinations to approximately 2100 Year 8 students.

Worksite Immunisation programs are conducted on a fee for service basis. A total of 4900 vaccinations were provided to EHA clients in 2015. EHA is working to increase the number of vaccinations provided by updating of marketing materials and active follow up of previous clients.

Objective 4 The provision of a comprehensive, accessible and efficient immunisation service valued by the community

| Actions | Performance Measures |
|--|--|
| <p>4.1 Ensure effective governance and delivery of a public clinic immunisation program in accordance with;</p> <ul style="list-style-type: none"> the current National Health and Medical Research Council (NHMRC) "Australian Immunisation Handbook" National Vaccine Storage Guidelines 'Strive for 5' 2nd Edition the <i>Controlled Substances Act 1984</i> and the <i>Controlled Substances (Poisons) Regulations 2011</i> the Vaccine Administration Code August 2015 v. 1.2 EHA's Work Health and Safety protocols South Australia's Child Protection Legislation – Child Safe Environment Guidelines. | <p>Client feedback and attendance.</p> <p>Number of clinics and vaccinations provided.</p> <p>Annual Cold Chain audit and pharmaceutical refrigerator maintenance.</p> <p>Clinical performance and evaluation.</p> <p>Liaison with EHA's Consultant Medical Officer of Health.</p> <p>Completed review of Child Safe Environment Guidelines.</p> |
| <p>4.2 Promote EHA's public immunisation clinic program through a variety of mediums such as council customer service centres and publications, council and EHA websites.</p> <p>Mail out of the Immunisation Timetable to community organisations. Explore further opportunities for the provision of immunisation promotion presentations to existing parent groups at Constituent Council community centres and libraries.</p> | <p>Increased presentations at Constituent Councils.</p> <p>Increased number of clinic timetables required and distributed.</p> <p>Website - reports of access.</p> |
| <p>4.3 Conduct an annual review of EHA's public clinic venues and timetable. Implement necessary changes, including identified hazards.</p> <p>Produce and publish annual immunisation program timetable to reflect the review of the public clinics.</p> <p>Promotion and communication of changes to the National Immunisation Program Schedule affecting older residents..</p> | <p>Annual review undertaken at each venue and documented. Identified hazards actioned. Immunisation Clinic Timetable reviewed and published in November.</p> <p>Investigate communication strategies to provide information to older residents.</p> |

| Actions (continued) | Performance Measures |
|---|--|
| <p>4.4 Deliver SIP to students at schools within EHA's area in accordance with the SA Health Service Agreement contract with local government.</p> | <p>All students offered vaccinations. Absent consenting students offered vaccination at EHA's public clinics. Coverage rates and statistics to SA Health.</p> |
| <p>4.5 Liaise with school coordinators and Immunisation Section of SA Health regarding SIP implementation and evaluation of program.</p> | <p>Successful SIP implementation. Ongoing collaboration and evaluation of coverage. Representation on the SIP Working Party for review of Protocols for the program.</p> |
| <p>4.6 Provide a specialised Worksite Immunisation Program both within and external to the Constituent Council boundaries on a fee for service basis within the private sector (i.e. flu, Heb B, dTpa).</p> <p>Recommend vaccinations for employees at risk of occupationally acquired vaccine preventable diseases.</p> <p>Review program annually – update documents. Aim to provide a professional service and stay competitive.</p> | <p>Feedback from clients. Increase of new clients and regular annual clients. Income generated.</p> |
| <p>4.7 Maintain client immunisation records on EHA's Immunisation database (ImPS program).</p> | <p>Database updated within 3 days of each clinic/school/worksite sessions.</p> |
| <p>4.8 Use immunisation coverage data from a range of sources to better identify residents of overdue vaccinations. Investigate available vaccine reminder services</p> | <p>Review of reports available from Australian Childhood Immunisation Register, the HPV register and other sources to identify residents that are overdue.</p> <p>Investigation and review of communication and reminder services available.</p> |
| <p>4.9 Report immunisation statistics to SA Health and the Australian Childhood Immunisation Register (ACIR), in accordance with contractual arrangements.</p> <p>SIP statistics completed one month after the last school visit for each vaccine dose.</p> <p>Report HPV immunisation statistics to HPV Register monthly.</p> | <p>Statistics reported to ACIR within 5 days of clinics. HPV statistics reported monthly to HPV Register.</p> <p>Submit completed data to Immunisation Section SA Health via their Online Database.</p> |

| Actions (continued) | Performance Measures |
|--|---|
| <p>4.10 The CEO/Team Leader Immunisation lobby through LGA for appropriate funding for sustainability of local government delivery of immunisation services. Development of the Immunisation Service Provision MOU for Local Government within the new <i>SA Public Health Act 2011</i> by the State Government</p> | <p>Meet with LGA/IPN (SA) group to discuss funding and support from governments. Attend meetings in regard to the SA Public Immunisation Services between SA Health and LGA SA. MOU endorsed.</p> |
| <p>4.11 <u>Clinical Governance</u> Registered immunisation Nurses will participate in:</p> <ul style="list-style-type: none"> • Immunisation Providers Network (SA) (IPN SA). • promoting best practice standards, uniformity and professional consistency. • a recognised SA Health authorised immunisation course. • maintain authorised immunisation provider status by completing 3 yearly recognised updates. • other professional updates – rotate participation of biannual PHAA Immunisation conference. • in-house education sessions and team meetings. • annual CPR and Mandated Notification updates. • complete 20 hours of valid documented Continuing Professional Development annually. • random audits by APHRA of RN's completed CPD hours. | <p>Immunisation Nurses attend the IPN SA meetings when possible. Attend in-house education sessions and mandatory updates. Attend other professional updates. Complete and document annual CPD requirements. Completion by RN staff of the 3 yearly 'Understanding Vaccines and the National Immunisation Program' Certificate..</p> |
| <p>4.12 Ensure activities and outcomes are communicated to the Board of Management, councils and state government bodies as required. Statistical and written reports to the Board of Management as per meetings. Annual Reports as required by the Board of Management and the <i>South Australian Public Health Act 2011</i>.</p> | <p>Statistical reports, Board Reports and Annual Reports compiled and distributed as required.</p> |

5.0 - Food Safety

Background

As consumers, we all have the right to expect that the food we eat is protected from microbiological contamination, foreign matter, poor hygiene and handling practices. While Australia has one of the safest food supplies in the world, the incidences of our two most prevalent foodborne diseases *Salmonella* and *Campylobacter* is on the increase. Illness caused by food is a significant public health problem and has major social and economic impacts.

A 2014 report, '*Foodborne Illness in Australia*' annual incidence circa 2010 provided the most comprehensive assessment of Australia's annual incidence of food borne illness to date. That report showed that:

- every Australian has an episode of foodborne gastroenteritis every five years. Annually this works out to:
 - 4.1 million cases of foodborne gastroenteritis
 - 5,140 cases of non-gastroenteritis
 - 35,840 cases of more serious long-term effects
- the actual cause of most (80%) foodborne illness is unknown
- of the known causes most are due to norovirus, pathogenic *E coli*, *Campylobacter* and *Salmonella* species.
- illnesses from *Salmonella* and *Campylobacter* have increased.
- poultry is the primary source of *Campylobacter* infections
- the use of raw or minimally cooked eggs is likely to be a significant source of the national increase in *Salmonella*

The *Food Act 2001* in conjunction with the Food Safety Standards (Chapter 3 of the Australia New Zealand Food Standards Code) aims to:

- ensure food for sale is both safe and suitable for human consumption
- prevent misleading conduct in connection with the sale of food
- provide for the application of the Food Standards Code

EHA is an enforcement agency under the *Food Act 2001* and is responsible for ensuring that appropriate food hygiene standards are maintained within its area.

Objective 5 Minimise food borne illness by ensuring that safe and suitable food is available to the community

| Actions | Performance Measures |
|---|--|
| 5.1 Food businesses are assigned a 'Risk Rating' in accordance with the SA Health Food Business Risk Classification system. Frequency of routine assessments is adjusted based on their performance and within the range of the risk classification. | Apply relevant risk rating to new businesses and undertake assessments in accordance with SA Health Food Business Risk Classification system. |
| 5.2 Routine food business assessments conducted using an appropriate food safety rating tool to ensure compliance with the <i>Food Act 2001</i> and <i>Food Safety Standards</i> . | Assessments performed using the appropriate food safety rating tool. Assessments conducted in accordance with the assigned risk rating and frequency. |
| 5.3 Conduct assessments using the SA Health 'Heightened Inspections forms' for food processing activities that fall under the Primary Production Standards. | SA Health 'Heightened Inspections forms' used when food processing activities fall under the Primary Production Standards. |
| 5.4 Monitor and identify new food processing practices during routine assessments. Update the risk rating to reflect the changes. | Update risk ratings where required. |
| 5.5 Ensure appropriate enforcement action is taken in relation to breaches of the <i>Food Act 2001</i> and associated standards in accordance with EHA's enforcement policy. | Number of enforcement actions taken. |
| 5.6 Investigate food related complaints in a systematic and timely manner in relation to: <ul style="list-style-type: none"> - alleged food poisoning - microbiological and chemical contamination - foreign matter found in food - poor personal hygiene and handling practices - unclean premises - vermin, insects and pest activity - refuse storage Liaise with SA Health and other councils to ensure a co-ordinated approach where necessary. | Respond to complaints in accordance with customer service standards. |
| 5.7 Respond to food recalls in accordance with SA Health recommendations. | Number of recalls actioned. |

| Actions (continued) | Performance Measures |
|---|---|
| 5.8 Ensure that all businesses servicing vulnerable populations (within the boundaries of the Constituent Councils) have their food safety plan audited in accordance with Food Safety Standard 3.2.1 and the <i>Food Act 2001</i> . | Number of audits conducted. |
| 5.9 Provide a professional auditing service to businesses external to Constituent Council boundaries which require their food safety plans to be audited. | Number of audits conducted. |
| 5.10 Ensure businesses provide notification of their business details. Maintain a register of all food businesses operating within EHA's jurisdiction. | Update within 5 days of receipt of new information. |
| 5.11 Assessments, investigations and actions are updated in Health Manager to ensure effective reporting to the Board of Management, Constituent Councils and SA Health. | Update within 5 days of assessment or action. |
| 5.12 Provide information to the Board of Management in relation to food safety reforms, such as the Parliamentary Enquiry into Food Safety Schemes, and provide written responses on behalf of EHA and Constituent Councils to State Government. | Information reports provided to Board and distributed to Constituent Councils as required. |
| 5.13 Implement the agreed EHA and Constituent Council Development Assessment information sharing process, to receive notifications of new business or changes to an existing business. EHA to review plans, liaise with the applicant regarding structural fit out with relevant legislation, and provide feedback to Constituent Council's when requested. | Respond to notifications in accordance with the agreed Development Assessment information sharing process and customer service standards. |
| 5.14 Provide new food businesses with information that introduces EHA and informs the business about the inspection fee policy and safe food practices. | Information provided following receipt of notification form. |
| 5.15 Conduct food safety assessments of fairs and festivals, temporary events and school fetes in collaboration with the Constituent Councils and relevant event co-ordinators. | Undertake assessments where required. |
| 5.16 Liaise with Constituent Council and relevant event coordinators to ensure all stall holders at fairs and festivals, temporary events and school fetes are well informed of the legislative requirements and have the necessary equipment. Conduct stall holder meetings for stall holders upon request by the Constituent Councils and relevant event coordinators. | Liaise with Constituent Council and relevant event coordinators prior to the event. Provide stall holder presentations where required. |

| Actions (continued) | Performance Measures |
|---|---|
| <p>5.17 Twice a year distribute advisory information to schools and kindergartens to provide a reminder of the requirements to notify EHA of an upcoming school fete.</p> <p>EHA to liaise with the school or kindergarten to ensure all stall holders at fairs and festivals, temporary events and school fetes are well informed of the legislative requirements and have the necessary equipment to produce and sell safety and suitable food.</p> | <p>Distribute advisory information twice a year. Liaise with schools or kindergartens where required.</p> |
| <p>5.18 Participate in the Environmental Health Australia “Food Safety” Special Interest Group (SIG) to promote uniformity, professional consistency and to discuss the latest information in relation to food safety issues affecting local government.</p> | <p>Attend and actively participate at SIG meetings.</p> |
| <p>5.19 Actively communicate updates from SA Health and FZSANZ to food premises.</p> | <p>Provide updated information to food businesses as required.</p> |

6.0 - Health Care and Community Services

Background

Supported Residential Facilities (SRF's) provide accommodation to people in the community who require personal care and support.

SRF's are regulated under the *Supported Residential Facilities Act 1992* (the Act) to ensure adequate standards of care and amenity to protect the rights of residents.

A low level of care is provided to residents such as assistance with medication management, personal care, and financial management, as well as supplying meals and accommodation.

Personal care services are defined under the Act as bathing, showering or personal hygiene, toileting or continence maintenance, dressing or undressing, consuming food, medication management, management of personal finances and direct physical assistance to aid mobility issues.

Residents living in SRFs are vulnerable due to the disability or impairment that is often associated with these clients, including physical, intellectual or psychiatric.

The Minister for Communities and Social Inclusion is responsible for promoting the objectives of the Act, and local councils administer and enforce the Act. EHA is the licensing authority for all SRFs within the Constituent Councils, and continues to act as the licensing authority for SRFs within The City of Unley, under delegated authority.

Objective 6 **Promote a safe and home-like environment for residents by ensuring quality of care in supported residential facilities**

| Actions | Performance Measures |
|--|---|
| 6.1 Assess applications for new licences, licence renewals and transfer of licence with regard to SRF legislation and guidelines within legislative timeframes. | Applications processed within legislative timeframes. |
| 6.2 Assess applications for manager and acting manager with regard to SRF legislation and guidelines | Applications processed within legislative timeframes. |
| 6.3 Conduct relicensing audits of facilities against SRF legislation and include conditions where necessary based on the findings of the audits conducted during the year and fire safety advice. . Take advice of the appropriate Fire Safety requirements from the Constituent Councils Building Fire and Safety Officers. | Unannounced audits conducted at all facilities. Fire safety advice obtained annually. Issue licences annually with conditions where required. |
| 6.4 Conduct ongoing inspections to ensure facilities continue to operate at satisfactory standards in in accordance with the legislation. Conduct inspections of facilities to ascertain compliance with licence conditions throughout the year. | Unannounced inspections and follow-ups conducted at SRFs. |
| 6.5 Respond to enquiries/complaints in relation to SRFs | Respond to all enquiries and complaints in accordance with the customer service standards. |
| 6.6 Liaise with service providers to ensure residents receive appropriate levels of care. | Liaise where required. |
| 6.7 Participate in the Environmental Health Australia 'SRF' Special Interest Group to promote uniformity, professional consistency and to discuss the latest information in relation to SRF issues affecting local government. | Attend and actively participate at SRF SIG meetings. |
| 6.8 Liaise with Department of Communities and Social Inclusion and Constituent Councils on the potential for SRF closures in the area, strategic management options and appropriate alternative accommodation options. | Issues investigated and reported to Board of Management and relevant council as necessary. |
| 6.9 Lobby State Government to ensure legislation applicable to SRFs is appropriate and that local government receives appropriate support for its licensing role. | Initiate discussion with LGA regarding these issues. |
| 6.10 Act as the Licensing Authority pursuant to the <i>Supported Residential Facilities Act 1992</i> for the City of Unley on a fee for service basis. | Maintain contract. |

| Actions (continued) | Performance Measures |
|---|---|
| 6.11 Provide written reports and attend meetings with The City of Unley in accordance with SRF licensing contract requirements. | Reports provided twice per year (as per agreement) and as required. |
| 6.12 Ensure activities and outcomes are communicated to the Board of Management, Constituent Councils and state government bodies as required via: Reports to the Board of Management, Delegates Reports and Annual Report. | Board Reports and Annual Reports compiled and distributed. |
| 6.13 Liaise with Constituent Councils to explore health promotion opportunities within SRF's. | Liaise with Constituent Councils. |

7.0 - Emergency Management

Background

The South Australian Sampson Flat bushfires and the Nepal earthquake during 2015 have vividly exposed us to the devastating consequences of disaster events.

In any emergency situation, the ability to respond effectively is vital and the effectiveness of the response will be determined by appropriate preparation and planning. Environmental Health professionals play a critical role in the response and recovery phases of emergency situations.

An emergency management plan has been developed to define and address the unique issues that confront environmental health professionals in an emergency situation and prepare them for the enhanced role that they will have. It ensures appropriate linkages are in place with emergency service agencies and the councils EHA serves should an emergency situation occur and is designed to integrate with the Eastern Region Disaster Management Plan.

A risk analysis of hazards that may affect the region was completed during 2007 by the Eastern Regional Emergency Risk Management project. EHA's Emergency Management Plan identifies five hazards that are likely to have significant environmental health implications: Pandemic Disease, Disease (arising within the EHA's area), Flooding (1 in 100 year event), Earthquake and Bushfire.

An emergency may impact upon EHA itself, potentially disrupting operations and affecting critical assets. This will pose a unique challenge when environmental health service delivery is likely to alter in response to the circumstances of the situation. A Business Continuity Plan identifies a range of actions required to ensure critical functions are restored within the timeframes specified.

Objective 7 **Minimise the public health consequences of emergencies through a planned and prepared response**

| Actions | Performance Measures |
|---|---|
| 7.1 Liaise with the Constituent Councils and Eastern Adelaide Zone Emergency Management Committee to ensure integration of emergency management arrangements. | Attend and participate in committee meetings. |
| 7.2 Conduct exercises with staff to test the Emergency Management Plan and Business Continuity Plan. Participate in any relevant exercises conducted within the region by other organisations. | Conduct or participate in one exercise a year. |
| 7.3 Review and update emergency management information on the website. | Review and update as required. |
| 7.4 Review and update the Emergency Management Plan and note any alternations on the amendments register. Review the status of actions arising from the Emergency Management Plan and Business Continuity Plan. | Review the plan and update where required. |
| 7.5 Participate with Environmental Health Australia and state and local government authorities to review best practice standards and promote uniformity and professional consistency. | Staff to participate in the Disease Control SIG and other relevant committees. |
| 7.6 Ensure activities and outcomes are communicated to the Board of Management, Constituent Councils and state government bodies as required via: Monthly statistical reports; Reports to the Board of Management and Annual Report under the <i>South Australian Public Health Act 2011</i> . | Statistical reports, Board Reports and Annual Reports where required. |
| 7.7 Emergency Management Plan strategies to be reflected in the Public Health Plan and Risk and Opportunity Management Policy and Framework to ensure consistency over the three strategic plans. | Emergency Management Plan incorporated in the Risk and Opportunity Management Policy and Framework. The Emergency Management Plan to be recognised during the public health planning process. |

| EASTERN HEALTH AUTHORITY STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDING 30 JUNE 2017 | | |
|--|---|---------------------------|
| REVISED BUDGET 2015/2016 | | DRAFT BUDGET 2016/2017 |
| \$ | INCOME | \$ |
| 1,609,306 | Council Contributions | 1,641,055 |
| 194,000 | Statutory Charges | 193,000 |
| 307,000 | User Charges | 341,000 |
| 126,500 | Grants, subsidies and contributions | 124,500 |
| 20,000 | Investment Income | 20,000 |
| 14,000 | Other Income | 10,000 |
| 2,270,806 | TOTAL INCOME | 2,329,555 |
| | EXPENSES | |
| 1,526,000 | Employee Costs | 1,543,000 |
| 666,200 | Materials, contracts and other expenses | 738,200 |
| 22,672 | Finance Charges | 19,984 |
| 80,851 | Depreciation | 28,371 |
| 2,295,723 | TOTAL EXPENSES | 2,329,555 |
| (24,917) | Operating Surplus/(Deficit) | - |
| - | Net gain (loss) on disposal of assets | - |
| (24,917) | Net Surplus/(Deficit) | - |

| EASTERN HEALTH AUTHORITY STATEMENT OF CASH FLOWS FOR THE YEAR ENDING 30 JUNE 2017 | | |
|--|--|---------------------------|
| REVISED BUDGET 2015/2016 | | DRAFT BUDGET 2016/2017 |
| \$ | CASHFLOWS FROM OPERATING ACTIVITIES | \$ |
| | <u>Receipts</u> | |
| 2,250,806 | Operating Receipts | 2,309,555 |
| 20,000 | Investment Receipts | 20,000 |
| | <u>Payments</u> | |
| (2,192,200) | Operating Payments to Suppliers & Employees | (2,281,200) |
| (22,672) | Interest Expense | (19,984) |
| 55,934 | Net Cash Provided/(Used) by Operating Activities | 28,371 |
| | CASH FLOWS FROM FINANCING ACTIVITIES | |
| - | Loans Received | - |
| (55,934) | Loan Repayments | (58,623) |
| (55,934) | Net Cash Provided/(Used) by Financing Activities | (58,623) |
| | CASH FLOWS FROM INVESTING ACTIVITIES | |
| | <u>Receipts</u> | |
| - | Sale of Replaced Assets | - |
| | <u>Payments</u> | |
| - | Expenditure on renewal / replacements of assets | - |
| - | Expenditure on new / upgraded assets | - |
| (200,000) | Distributions paid to constituent Councils | - |
| (200,000) | Net Cash Provided/(Used) by Investing Activities | - |
| (200,000) | NET INCREASE (DECREASE) IN CASH HELD | (30,252) |
| 789,971 | CASH AND CASH EQUIVALENTS AT BEGINNING OF REPORTING PERIOD | 589,971 |
| 589,971 | CASH AND CASH EQUIVALENTS AT END OF REPORTING PERIOD | 559,719 |

| EASTERN HEALTH AUTHORITY STATEMENT OF FINANCIAL POSITION FOR THE YEAR ENDING 30 JUNE 2017 | | |
|--|--|---------------------------|
| REVISED BUDGET 2015/2016 | | DRAFT BUDGET 2016/2017 |
| \$ | CURRENT ASSETS | \$ |
| 589,971 | Cash and Cash Equivalents | 559,719 |
| 162,272 | Trade & Other Receivables | 162,272 |
| - | Other | - |
| 752,243 | TOTAL CURRENT ASSETS | 721,991 |
| | CURRENT LIABILITIES | |
| 108,708 | Trade & Other Payables | 108,708 |
| 236,220 | Provisions | 236,220 |
| 50,920 | Borrowings | 58,623 |
| - | Other | - |
| 395,848 | TOTAL CURRENT LIABILITIES | 403,551 |
| 356,395 | NET CURRENT ASSETS/(CURRENT LIABILITIES) | 318,440 |
| | NON-CURRENT ASSETS | |
| 360,244 | Equipment | 331,873 |
| - | Other | - |
| 360,244 | TOTAL NON-CURRENT ASSETS | 331,873 |
| | NON-CURRENT LIABILITIES | |
| 41,662 | Provisions | 41,662 |
| 384,279 | Borrowings | 317,953 |
| 425,941 | TOTAL NON-CURRENT LIABILITIES | 359,615 |
| 290,698 | NET ASSETS | 290,698 |
| | EQUITY | |
| 290,699 | Accumulated Surplus/(Deficit) | 290,699 |
| 290,699 | TOTAL EQUITY | 290,699 |

| EASTERN HEALTH AUTHORITY STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDING 30 JUNE 2017 | | |
|---|--------------------------------------|---------------------------|
| REVISED BUDGET 2015/2016 | | DRAFT BUDGET 2016/2017 |
| | ACCUMULATED SURPLUS | |
| 515,616 | Balance at beginning of period | 290,699 |
| (24,917) | Net Surplus/(Deficit) | - |
| (200,000) | Distribution to Constituent Councils | - |
| 290,699 | Balance at end of period | 290,699 |
| 290,699 | TOTAL EQUITY | 290,699 |

| Eastern Health Authority - Funding Statement 2016- 2017 | | |
|--|-----------------------|---------------------|
| Income | Adopted Budget | Draft Budget |
| Constituent Council Income | 2015-2016 | 2016-2017 |
| City of Burnside | \$ 415,037 | \$ 419,128 |
| City of Campbelltown | \$ 389,840 | \$ 379,026 |
| City of NPS | \$ 490,646 | \$ 515,322 |
| City of Prospect | \$ 219,621 | \$ 220,952 |
| Town of Walkerville | \$ 94,162 | \$ 106,627 |
| Total Constituent Council Contributions | \$ 1,609,306 | \$ 1,641,055 |
| Statutory Charges | | |
| Food Inspection fees | \$ 80,000 | \$ 80,000 |
| Legionella registration and Inspection | \$ 20,000 | \$ 19,000 |
| SRF Licenses | \$ 4,000 | \$ 4,000 |
| Fines | \$ 90,000 | \$ 90,000 |
| Total Statutory Charges | \$ 194,000 | \$ 193,000 |
| User Charges | | |
| Immunisation - non funded vaccines | \$ 45,000 | \$ 55,000 |
| Immunisation - Worksites | \$ 100,000 | \$ 120,000 |
| Food Auditing | \$ 54,000 | \$ 58,000 |
| City of Unley | \$ 106,000 | \$ 106,000 |
| Food Safety Training | \$ 2,000 | \$ 2,000 |
| Total User Charges | \$ 307,000 | \$ 341,000 |
| Grants, Subsidies, Contributions | | |
| School Based immunisation Program | \$ 84,500 | \$ 84,500 |
| Child Immunisation register | \$ 42,000 | \$ 40,000 |
| Total Grants, Subsidies, Contributions | \$ 126,500 | \$ 124,500 |
| Investment Income | | |
| Interest on investments | \$ 20,000 | \$ 20,000 |
| Total Investment Income | \$ 20,000 | \$ 20,000 |
| Other Income | | |
| Motor Vehicle re-imbursements | \$ 8,000 | \$ 4,000 |
| Sundry Income | \$ 6,000 | \$ 6,000 |
| Profit on sale of Assets | \$ - | \$ - |
| Total Other Income | \$ 14,000 | \$ 10,000 |
| Total of non Constituent Council Income | \$ 661,500 | \$ 688,500 |
| Total Income | \$ 2,270,806 | \$ 2,329,555 |

| Eastern Health Authority - Funding Statement 2016-2017 | | |
|--|---------------------|---------------------|
| Expenditure | Adopted Budget | Draft Budget |
| Employee Costs | 2015-2016 | 2016-2017 |
| Salaries & Wages | \$ 1,450,000 | \$ 1,380,000 |
| Superannuation | \$ 118,000 | \$ 116,000 |
| Workers Compensation | \$ 15,000 | \$ 14,000 |
| Employee Leave Expenses | \$ 30,000 | \$ 30,000 |
| Medical Officer Retainer | \$ 3,000 | \$ 3,000 |
| Agency Staff | \$ - | \$ - |
| Total Employee Costs | \$ 1,616,000 | \$ 1,543,000 |
| Prescribed Expenses | | |
| Auditing and Accounting | \$ 17,000 | \$ 17,000 |
| Insurance | \$ 26,000 | \$ 27,000 |
| Maintenance | \$ 45,000 | \$ 45,000 |
| Vehicle Leasing/maintenance | \$ 69,000 | \$ 62,000 |
| Total Prescribed Expenses | \$ 157,000 | \$ 151,000 |
| Rent and Plant Leasing | | |
| Electricity | \$ 10,000 | \$ 10,000 |
| Plant Leasing Photocopier | \$ 5,700 | \$ 3,200 |
| Rent | \$ 101,000 | \$ 102,000 |
| Water | \$ - | \$ 500 |
| Gas | \$ 2,500 | \$ 2,500 |
| Total Rent and Plant Leasing | \$ 119,200 | \$ 118,200 |
| IT Licensing and Support | | |
| IT Licences & Subscriptions | \$ 15,000 | \$ 80,000 |
| IT Support | \$ 30,000 | \$ 90,000 |
| Internet | \$ 2,000 | \$ 12,000 |
| IT Other | \$ 2,000 | \$ 2,000 |
| Total IT Licensing and Support | \$ 49,000 | \$ 184,000 |
| Administration | | |
| Administration Sundry | \$ 7,000 | \$ 7,000 |
| Accreditation Fees | \$ 4,000 | \$ 4,000 |
| Board of Management | \$ 16,000 | \$ 16,000 |
| Bank Charges | \$ 3,000 | \$ 3,000 |
| Public Health Sundry | \$ 5,000 | \$ 5,000 |
| Fringe Benefits Tax | \$ 15,000 | \$ 15,000 |
| Health promotion | \$ 5,000 | \$ 5,000 |
| Legal | \$ 20,000 | \$ 20,000 |
| Printing & Stationery & Postage | \$ 30,000 | \$ 30,000 |
| Telephone | \$ 15,000 | \$ 15,000 |
| Work Health and Safety | \$ 2,000 | \$ 12,000 |
| Rodenticide | \$ 2,000 | \$ 2,000 |
| Staff Amenities | \$ 7,000 | \$ 7,000 |
| Staff Training | \$ 22,000 | \$ 22,000 |
| Human Resource / Organisational Development | \$ 16,000 | \$ 16,000 |
| Total Administration | \$ 169,000 | \$ 179,000 |

| Eastern Health Authority - Funding Statement 2016-2017 (cont.) | | |
|---|-----------------------|---------------------|
| Expenditure | Adopted Budget | Draft Budget |
| Immunisation | | |
| Immunisation SBP Consumables | \$ 8,000 | \$ 8,000 |
| Immunisation clinic vaccines | \$ 30,000 | \$ 38,000 |
| Immunisation worksite vaccines | \$ 15,000 | \$ 36,000 |
| Total Immunisation | \$ 53,000 | \$ 82,000 |
| | | |
| Income protection | | |
| Income Protection | \$ 16,000 | \$ 15,000 |
| Total Uniforms/Income protection | \$ 16,000 | \$ 15,000 |
| | | |
| Sampling | | |
| Legionella Testing | \$ 12,000 | \$ 8,000 |
| Food Sampling | \$ 1,000 | \$ 1,000 |
| Total Sampling | \$ 13,000 | \$ 9,000 |
| | | |
| New Initiatives | | |
| Regional Public Health Plan | \$ - | \$ - |
| Total New Initiatives | \$ - | \$ - |
| | | |
| Total Materials, contracts and other expenses | \$ 576,200 | \$ 738,200 |
| | | |
| Total Operating Expenditure | \$ 2,192,200 | \$ 2,281,200 |
| | | |
| Finance Charges | \$ 22,672 | \$ 19,984 |
| | | |
| Depreciation, amortisation and impairment | \$ 80,851 | \$ 28,371 |
| | | |
| Total Expenditure | \$ 2,295,723 | \$ 2,329,555 |
| | | |
| Total Income | \$ 2,270,806 | \$ 2,329,555 |
| | | |
| Net Surplus/Defecit | \$ (24,917) | \$ - |
| | | |
| Depreciation Add Back | \$ 80,851 | \$ 28,371 |
| Loans Received | \$ - | \$ - |
| Capital Expenditure - plant and Equipment | \$ - | \$ - |
| Capital Expenditure - Office Fit-out | \$ - | \$ - |
| Loan Repayments | \$ (55,934) | \$ (58,623) |
| | | |
| Cash Result | \$ - | \$ (30,252) |

7.1 PUBLIC AND ENVIRONMENTAL HEALTH

Complaints

For the reporting period 1 January 2016 to 31 March 2016, Eastern Health Authority received 72 public and environmental health related complaints. The complaints for the reporting period are shown by category in Graph 1 and by respective council area in Table 1.

Graph 1

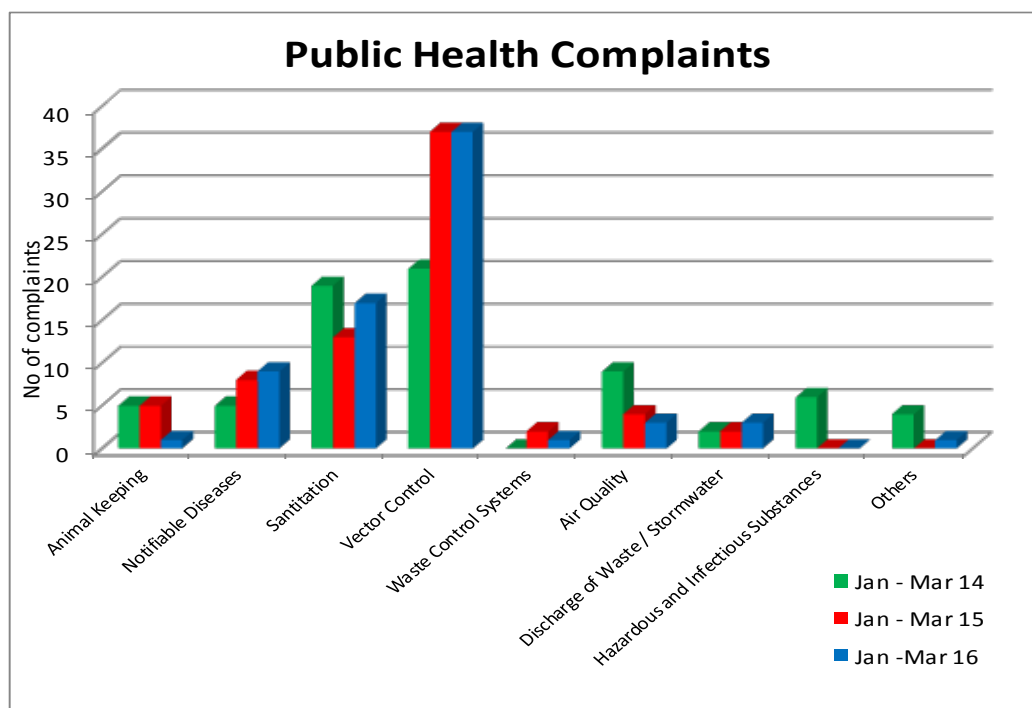


Table 1: Public and Environmental Health complaints received 1 January 2016 to 31 March 2016 by council area

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|----------------------|----------|--------------|------|----------|-------------|-------|
| Air Quality | 2 | 0 | 0 | 1 | 0 | 3 |
| Animal Keeping | 0 | 0 | 1 | 0 | 0 | 1 |
| Notifiable Disease | 6 | 1 | 1 | 1 | 0 | 9 |
| Other | 1 | 0 | 0 | 0 | 0 | 1 |
| Sanitation | 4 | 4 | 7 | 1 | 2 | 18 |
| Stormwater discharge | 0 | 0 | 3 | 0 | 0 | 3 |
| Vector Control | 12 | 14 | 10 | 0 | 1 | 37 |
| Hazardous Substances | 0 | 0 | 0 | 0 | 0 | 0 |
| Wastewater | 0 | 0 | 0 | 0 | 0 | 0 |
| | 25 | 19 | 22 | 3 | 3 | 72 |

Cumulative totals of complaints for the financial year-to-date are shown in Graph 2 and cumulative complaints by council area and reporting category are detailed in Table 2.

Graph 2

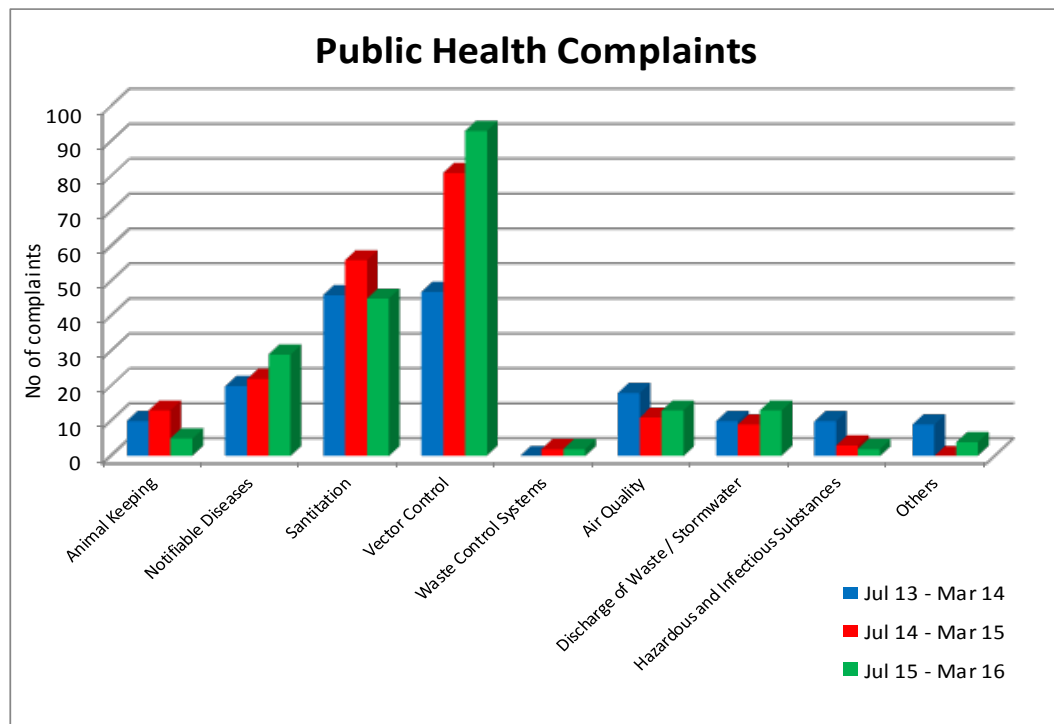


Table 2: Cumulative Public and Environmental Health complaints received 1 July 2015 to 31 March 2016 by council area

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|----------------------|-----------|--------------|-----------|-----------|-------------|------------|
| Air Quality | 4 | 3 | 3 | 2 | 1 | 13 |
| Animal Keeping | 0 | 2 | 2 | 1 | 0 | 5 |
| Hazardous Substances | 0 | 0 | 2 | 0 | 0 | 2 |
| Notifiable Disease | 9 | 3 | 10 | 5 | 2 | 29 |
| Other | 1 | 0 | 3 | 0 | 0 | 4 |
| Sanitation | 19 | 9 | 10 | 5 | 3 | 46 |
| Stormwater discharge | 2 | 4 | 6 | 1 | 0 | 13 |
| Vector Control | 24 | 32 | 24 | 7 | 6 | 93 |
| Wastewater | 0 | 0 | 1 | 0 | 0 | 1 |
| | 59 | 53 | 61 | 21 | 12 | 206 |

Notifiable Disease

The Communicable Disease Control Branch (CDCB) notified EHA of three confirmed cases of Salmonella STM9 implicating food consumed from a café. An investigation conducted by an Authorised Officer identified serious non-compliances with the Food Safety Standards including potentially hazardous raw egg based hollandaise sauce stored out of temperature control for a significant period of time, poor food hygiene practices and inadequate cleaning and sanitising of food preparation equipment.

During the inspection, the food handlers advised the Officer that a particular batch of eggs they were supplied were cracked and unclean however admitted that a number of the eggs were still used. The Officer obtained the egg supplier's details, which was provided to SA Health and Biosecurity for investigation.

During the investigation the food business was sold and a handover to the new owner was being undertaken. A letter was issued to the current owner outlining the non-compliances requiring immediate action. Concerns were also raised regarding the inadequate storage and preparation space available to process food in a safe and suitable manner.

A follow up inspection was conducted after the business had completed the transfer. The Officer observed that the new proprietor had implemented a number of the requirements outlined in the correspondence to the previous owner. This included storing all raw egg products in the refrigerator during service, to minimise the time that these potentially hazardous foods are stored out of temperature control. However, a number non-conformances relating to maintenance and cleanliness were not addressed. The new owner was sent written correspondence providing further information on the safe practices for processing raw egg products. The letter also addressed the requirement for the safe storage of food, the premises is maintained to an appropriate standard of cleanliness and for structural improvements within the premises to allow for adequate space for safe and suitable processing of food.

The test results from SA Health were received and revealed the samples tested were negative for Salmonella STM9. The inspection frequency was increased to 3 monthly following the investigation.

During the reporting period SA Health notified EHA of three cases of confirmed *Cryptosporidiosis*. It was reported that each case had swum in public pools within EHA's Constituent Councils. The first case was reported to have swum at one public pool and the second and third cases both swum at two public pools. In accordance with SA Health advice, Officers contacted relevant pool operators and recommended precautionary decontamination of the pools in which the cases had swum. Officers provided guidance and information to the pool operators to assist in achieving a free chlorine level over a period of time that ensures effective inactivation of *Cryptosporidium* oocysts. All three pool operators carried out the recommended precautionary decontamination. Pool operators completed an SA Health concentration time template, which once completed, was provided to EHA and SA Health to ensure required

concentration time levels were achieved. Prior to re-opening the pools to the public, chlorine levels were reduced to safe levels and water parameters tested were within the range specified in the *Public Health (General) Regulations 2013*.

Sanitation

A complaint was received regarding raw sewage being discharged on a residential property. An Authorised Officer undertook an investigation and found that the discharge was a result of a blocked sewer pipe within an easement which was adjacent to the affected property. The owner of the adjacent property arranged for a plumber to repair the blocked sewer pipe. This resolved the issue and no further complaints were received.

The Australian Red Cross has developed an 'Intensive Case Coordination Pilot' which will involve four cases of complex hoarding and squalor environments. The aim of the program is to help build knowledge and capacity for in-home interventions and intensive case coordination when responding to individuals and families affected by complex hoarding and squalor environments. Red Cross has invited submissions of cases of hoarding, or hoarding with squalor, for consideration as part of the pilot through a range of hoarding and squalor networks, Intensive Tenancy Support providers, local Councils and other organisations. Officers have reviewed current cases involving hoarding and squalor environments and upon consent submitted detailed reports for Red Cross to consider as part of the program.

The Metropolitan Fire Service (MFS) contacted EHA to report a potential case of hoarding which may involve squalor. The MFS became aware of the conditions of the dwelling following a call out to assist SA Ambulance with gaining internal access.

An Officer contacted the occupant at the dwelling, explained the concerns reported to EHA and discussed options and services available to improve the condition of the inside of the dwelling. In accordance with SA Health 'A Foot in the Door' guideline, Officers completed a Severe Domestic Squalor Assessment Scale that revealed a total score that indicates moderate to severe squalor. With support from a friend the occupiers arranged for a skip bin to be delivered to dispose of items and clear areas in the dwelling to improve accessibility.

In line with 'A Foot in the Door' guideline, Officers have attempted to develop an interagency approach and have met regularly with the owners to gain trust, identify needs, and inform of relevant support services and assistance available. Following discussions with the occupants consent was provided to submit an expression of interest to participate in the Red Cross Intensive Case Coordination Pilot Program.

Vector Control

During the reporting period 37 vector control complaints were received which included 32 vermin, two mosquito and three cockroach complaints.

EHA received a complaint from a resident alleging that their neighbouring property had been left unattended for a number of months resulting in mosquitos breeding in the pool. An inspection of the pool was undertaken

and the Officer observed that the pool was uncovered, the water was stagnant and green in colour. The property manager was contacted and informed of the issue. The property manager confirmed that the property was unoccupied and agreed to contact the owner to arrange the pool to be cleaned and the pool pump to be turned on to allow for the filtration and circulation of the pool water. No further action was required.

A complaint was received from a resident living in a community housing unit. The complainant alleged to have a severe cockroach infestation in the unit. In conjunction with Housing SA, Community Housing and the resident's social worker, Officers inspected the unit to find no evidence of cockroaches within the unit. The resident was also concerned about the neighbouring unit being a contributing factor to the attraction of cockroaches. A general inspection of the unit block conducted by the Officers confirmed that there were units that may be contributing to the alleged cockroach infestation. Officers contacted Housing SA and briefed them on the investigation. The housing manager informed EHA that there was cockroach activity and a pest management programme had been implemented. All implicated units were fumigated and no further action was required by EHA.

Discharge of Waste / Stormwater

An Officer from a Constituent Council inspected a complaint involving wastewater discharge from a sediment pit into the stormwater drain. The Constituent Council contacted EHA for further assistance and consideration of further legal action due to a history of stormwater discharge from this premises. A joint inspection by the Constituent Council and an Authorised Officer was conducted. During the inspection Officers observed a cloudy liquid substance in the stormwater drain next to a sediment pit. The ground surrounding the sediment pit was found to have a white stain. Management of the premises have been notified and requested to undertake permanent repairs to the sediment pit to prevent further contamination to the stormwater system. The Constituent Council has also arranged for an inspection of the neighbouring stormwater system to determine if there are any additional sources of pollutants. Further action will be determined and dependent on the results of the inspection of the stormwater system during the next reporting period.

EHA received a complaint from a Constituent Council regarding an offensive odour resulting from an accumulation of stagnant water in a creek. Officers conducted an immediate inspection of the creek and confirmed that there was accumulation of stagnant water with a 'reddish appearance' and an odour similar to the odour present during the wine fermentation process. As a result of the findings a nearby winery was inspected to investigate any possible breaches of the Environmental Protection Act. The winery was found to be compliant and no further action was taken. The source of contamination was unable to be identified.

Cooling Towers & Warm Water Systems

Routine cooling tower inspections were conducted at five sites during the reporting period, representing a total of ten systems. One follow up inspection was undertaken on-site with the cooling tower water treatment contractor to obtain access to the drift eliminator; and to ensure compliance with the *South Australian Public Health (Legionella) Regulations 2013*.

Non-compliances identified during routine inspections mostly related to inadequate documentation, including microbiological test results, site specific drift eliminator certification and providing operating and maintenance manuals. In each instance the responsible person was required to take action to address non-compliances within specified timeframes.

Table 3 Totals of Cooling Tower and Warm Water System Inspections conducted 1 January 2016 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|------|----------|-------------|-------|
| Complaint inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Routine inspections | 6 | 0 | 4 | 0 | 0 | 10 |
| Follow-up inspections | 1 | 0 | 0 | 0 | 0 | 1 |
| Total | 7 | 0 | 4 | 0 | 0 | 11 |

Table 4: Cumulative totals of cooling tower and warm water systems inspections conducted for the financial year-to-date

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|------|----------|-------------|-------|
| Complaint inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Routine inspections | 10 | 7 | 15 | 7 | 7 | 46 |
| Follow-up inspections | 1 | 0 | 0 | 0 | 0 | 1 |
| Total | 11 | 7 | 15 | 7 | 7 | 47 |

Public Swimming Pools and Spas

During the reporting period seven public swimming pool and spa sites were assessed in accordance with the *South Australian Public Health (General) Regulations 2013*. The sites included a total of nine outdoor swimming pools, one indoor swimming pool and one spa pool. Follow up inspections were undertaken at five sites where water parameter tests were found not to be within the requirements detailed in the Regulations. This included insufficient free chlorine and cyanuric acid, as well as inadequate pool testing equipment and record keeping.

During an inspection one pool was found to have low free chlorine and cyanuric acid levels and manual test records were not readily available to Officers upon request. The pool was subsequently closed to the public and a compliance notice was issued under Section 92 of the *South Australian Public Health Act 2011*. The Notice required the pool owner to take action to remedy the non-compliances observed during the inspection. A reinspection was undertaken and the pool water parameters were within the requirements of the *South Australian Public Health (General) Regulations 2013*. The pool was re-opened to the public. Due to the serious nature of the non-compliance and history of free chlorine being below the requirement levels stated in the *South Australian Public Health (General) Regulations 2013* further legal action is being considered.

A routine inspection of an outdoor spa found free chlorine below the required levels stated in the *Public Health (General) Regulations 2013*. Staff immediately closed the spa to the public. Whilst the spa was still closed to the public, the operator was able to demonstrate an ability to maintain the required chlorine levels. An Officer carried out a follow up inspection in which the spa was found to be compliant with the *Public Health (General) Regulations 2013* and the spa was re-opened to the public.

Table 5: Swimming and spa pool inspections conducted between 1 January 2016 to 31 March 2016 by council area

| | Burnside | Campbelltown | NPS | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|-----|----------|-------------|-------|
| Complaint inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Routine inspections | 8 | 0 | 3 | 2 | 1 | 14 |
| Follow-up inspections | 0 | 0 | 2 | 2 | 3 | 7 |
| Total | 8 | 0 | 5 | 4 | 4 | 21 |

Table 6: Cumulative totals of swimming and spa pool inspections conducted for the financial year-to-date

| | Burnside | Campbelltown | NPS | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|-----|----------|-------------|-------|
| Complaint inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Routine inspections | 23 | 3 | 15 | 6 | 4 | 51 |
| Follow-up inspections | 4 | 1 | 2 | 2 | 4 | 13 |
| Total | 27 | 4 | 17 | 8 | 8 | 64 |

Hairdressers/ Beauty Salons/ Acupuncturists/Skin Penetration

One tattoo premises was inspected during the reporting period. The tattooist demonstrated sound procedural knowledge in hygiene practices and cleanliness was consistently at a satisfactory standard.

Table 7: Hairdressers / Beauty Therapists / Acupuncturists inspections conducted between 1 January 2016 to 31 March 2016 by council area

| | Burnside | Campbelltown | NPS | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|-----|----------|-------------|-------|
| Complaint inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Routine inspections | 1 | 0 | 0 | 0 | 0 | 1 |
| Follow-up inspections | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 1 | 0 | 0 | 0 | 0 | 1 |

Table 8: Cumulative totals of Hairdressers / Beauty Therapists / Acupuncturists inspected for the financial year-to-date

| | Burnside | Campbelltown | NPS | Prospect | Walkerville | Total |
|-----------------------|----------|--------------|-----|----------|-------------|-------|
| Complaint inspections | 1 | 1 | 0 | 0 | 0 | 2 |
| Routine inspections | 3 | 3 | 2 | 1 | 0 | 9 |
| Follow-up inspections | 0 | 1 | 0 | 1 | 0 | 2 |
| Total | 4 | 5 | 2 | 2 | 0 | 13 |

Waste Control

There were no applications received for on-site wastewater works approval during the reporting period.

RECOMMENDATION

That:

The Public and Environmental Health Report is received.

7.2 IMMUNISATION

School Based Immunisation Program (SBIP) 2016

EHA commenced the 2016 SBIP providing immunisations to year 8 male and female students at 19 high schools including two in the City of Unley area. A total of 57 visits are scheduled for 2016 which is the same number of visits completed in 2015.

The Year 8 National Immunisation Program Schedule (the schedule) for 2016 includes HPV (Human Papillomavirus), Varicella (chicken pox) and dTpa (diphtheria, tetanus, whooping cough). No changes were made to the schedule when compared to the previous year.

During the reporting period EHA staff prepared for the visits including finalising details with the schools, distributing information packs for the students, processing consent forms and data entry of student details.

A total of 17 school visits are scheduled during Term 1 2016. A total of 1360 vaccines were administered from January to March 2016 as detailed in Table 1. The first school visits commenced in March 2016 due to the late start of the school year.

Table 1: Total SBIP Vaccines Administered between January to March 2016

| Council | Varicella (Chickenpox) | Human Papillomavirus (HPV) | Jan-March Total |
|--------------|---------------------------|----------------------------------|--------------------|
| Burnside | 143 | 291 | 434 |
| Campbelltown | 59 | 128 | 187 |
| NPSP | 73 | 144 | 217 |
| Prospect | 66 | 96 | 162 |
| Walkerville | 38 | 180 | 248 |
| Unley | 68 | 74 | 112 |
| Total | 447 | 913 | 1360 |

Worksite Program

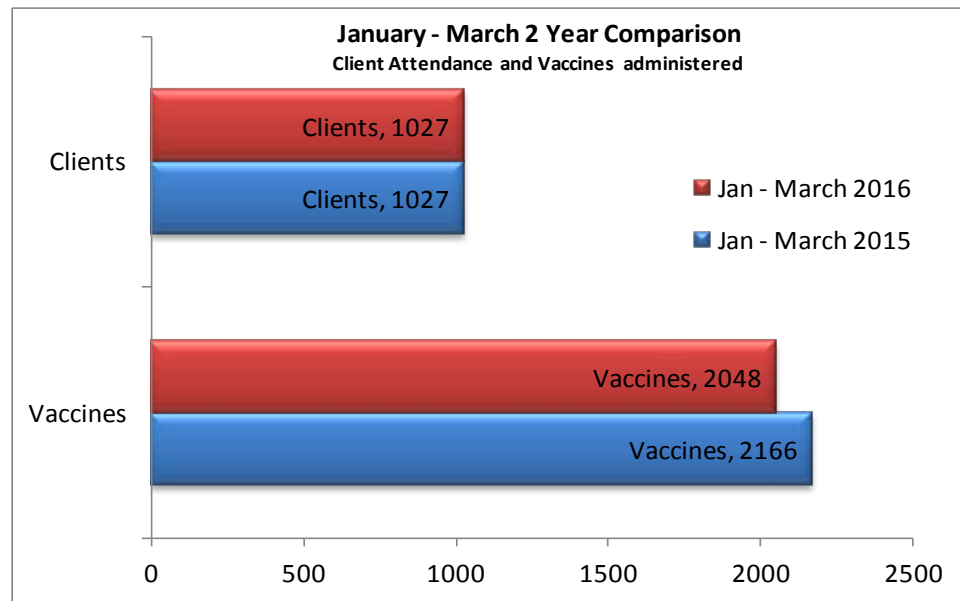
During the reporting period flu worksites were booked for schools, childcare centres, for local businesses and government departments. At the end of March 2016 a total of 88 worksites were booked for the Influenza vaccination program. These flu worksites visits are due to commence in the first week of April 2016 and will continue through to the end of May 2016.

An information session was held with all casual nursing staff delivering the Worksite Programs to update them on changes to procedures and documentation in 2016 and information relating to the Quadrivalent vaccine. A presentation was also included by Dr R Pearce, EHA's Consultant Medical Officer of Health who provided information on the vaccines, the changes to the Annual Funded Influenza Program and the eligible groups.

Public Clinics

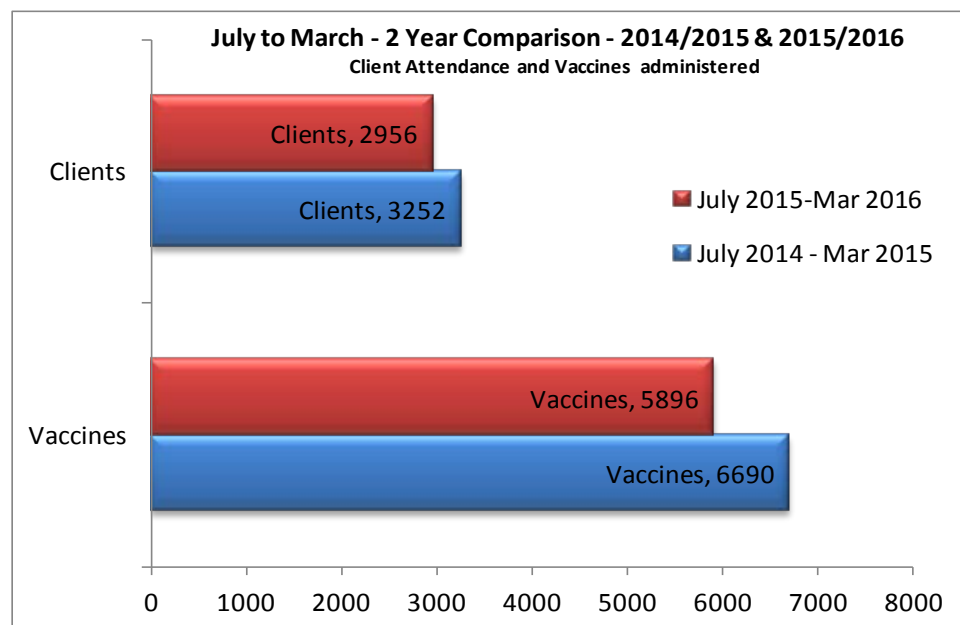
During the reporting period 1027 clients received 2048 vaccines at EHA's public immunisation clinics. This is the same number of clients seen but a decrease of 118 vaccines (5%) when compared to the same period for 2015 (see graph 2).

Graph 1: Number of Clients – Two year comparison



From July 2015 to March 2016 a total of 2956 clients attended EHA's public clinics and received a total of 5896 vaccines. This is a decrease of 296 (9.1%) in the number of clients compared to the same period for 2015 (see graph 2).

Graph 2:
July to March - two year comparison of Client attendance and Vaccines administered at clinics



There are a number of factors that have contributed to the decrease in the number of vaccines administered at public clinics. Recent changes to the National Immunisation Program Schedule now provide Adacel (dTpa) as a funded vaccine to pregnant women over 28 weeks of pregnancy. A majority of pregnant women now receive this vaccine as part of their pre-natal care through their Obstetrician. Measles, Mumps and Rubella (MMR) previously administered at four years of age are now administered with the 18 month Varicella (chicken pox) vaccination. There has been a slight reduction in the number of 2, 4 and 6 month vaccines administered to babies. The rationale behind this reduction cannot currently be confirmed and is being reviewed.

One flu clinic scheduled for March 2016 was cancelled due to the delay in receiving the Quadrivalent Influenza vaccine until the first week of April. Two nurses have been allocated to the flu clinics in April due to the high number of bookings rescheduled.

On the 21 March 2016 the Team Leader, Administration and Immunisation with a Registered Nurse from EHA attended the 'Medical March Information Session' at the Town of Walkerville's Baby Bounce session. A short presentation was made to provide information on immunisation and the upcoming flu season. Promotional bags were provided for parents and children to promote EHA's services. Feedback was sought after the session to ascertain the value of the program and gain further ideas. This information will allow EHA to determine if these sessions are valuable and if future programs will be offered at the Constituent Councils.

'No Jab No Pay' legislation

EHA continues to respond to increased phone calls and requests from parents who have received letters from Centrelink to review and update (if necessary) their children's immunisation records on the Australian Childhood Immunisation Register (ACIR).

45 families residing within our Constituent Council areas contacted EHA requiring a catch-up immunisation history assessment for their children during the reporting period. This is an increase of 15 families when compared to the same period in 2015 with 62 children commencing a vaccination program at EHA's public clinics.

These catch-ups were for children vaccinated overseas and has been expanded to capture the number of children whose immunisations are not up to date whose parents have received notification as part of the 'No Jab No Pay' program.

Table 3 on the following page details the numbers of clients attending each clinic venue and their council of origin.

Table 3: Combined Clinic breakdown for January – March 2016

| EASTERN HEALTH AUTHORITY PUBLIC IMMUNISATION CLINICS | | | | | | | | | | | | | | | | |
|---|----------|----------|---------|----------|---------|----------|----------|----------|---------|----------|---------|----------|--------------------|----------|------------|----------|
| CLIENT ATTENDANCE BY COUNCIL AREA | | | | | | | | | | | | | | | | |
| BURNSIDE CLINIC held at Burnside Council every 2nd and 4th Monday of the month 2.00 pm to 4.00 pm | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 78 | 147 | 17 | 26 | 7 | 17 | 1 | 3 | 1 | 1 | 8 | 14 | 2 | 4 | 114 | 212 |
| Year to Date | 232 | 449 | 38 | 71 | 35 | 72 | 5 | 13 | 3 | 3 | 31 | 68 | 7 | 13 | 351 | 689 |
| CAMPBELLTOWN CLINIC HELD AT Campbelltown Library every 3rd Wednesday of the month 10 am to 12 noon and 6.00 pm to 7.30 pm | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 14 | 32 | 85 | 166 | 6 | 13 | 0 | 0 | 1 | 2 | 0 | 0 | 7 | 9 | 113 | 222 |
| Year to Date | 24 | 50 | 231 | 428 | 16 | 33 | 4 | 7 | 1 | 2 | 1 | 2 | 10 | 15 | 287 | 537 |
| NORWOOD, PAYNEHAM & ST PETERS COUNCIL CLINICS - held at EHA Office ST PETERS CLINIC is held every 2nd Tuesday of the month 10 am to 12. 30 pm and St Peters Evening Clinic is held every 2nd and 4th Tuesday of the month 5.30 pm to 7.00 pm | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 106 | 234 | 184 | 365 | 201 | 398 | 32 | 63 | 29 | 59 | 33 | 69 | 14 | 21 | 599 | 1209 |
| Year to Date | 285 | 606 | 487 | 1005 | 608 | 1196 | 96 | 180 | 93 | 191 | 104 | 221 | 55 | 95 | 1728 | 3494 |
| PROSPECT CLINIC held every 1st Wednesday of the month New time from 11st January 2016 - 10.00am to 12.00pm | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Jan-16 | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 5 | 11 | 6 | 15 | 2 | 2 | 16 | 30 | 2 | 4 | 7 | 15 | 1 | 1 | 39 | 78 |
| Year to Date | 8 | 15 | 11 | 25 | 4 | 4 | 41 | 76 | 6 | 13 | 8 | 16 | 3 | 5 | 81 | 154 |
| WALKERVILLE CLINIC held every 4th Monday of the month New time from 1st January 2016 - 4.00-6.00pm | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 2 | 5 | 2 | 4 | 5 | 8 | 6 | 14 | 13 | 24 | 3 | 5 | 1 | 3 | 32 | 63 |
| Year to Date | 8 | 13 | 6 | 12 | 14 | 28 | 10 | 21 | 19 | 34 | 5 | 8 | 3 | 9 | 65 | 125 |
| UNLEY CLINIC held at Unley Civic Centre | | | | | | | | | | | | | | | | |
| Client Council of origin | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | Site Total | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 23 | 43 | 3 | 7 | 10 | 19 | 0 | 0 | 1 | 3 | 72 | 148 | 21 | 44 | 130 | 264 |
| Year to Date | 64 | 125 | 27 | 41 | 24 | 49 | 3 | 6 | 11 | 22 | 254 | 532 | 61 | 122 | 444 | 897 |
| | | | | | | | | | | | | | Grand Total | | | |
| | | | | | | | | | | | | | Clients | | Vaccines | |
| Grand Total of all Clinic Sites | | | | | | | | | | | | | Jan-Mar | | 1027 | 2048 |
| | | | | | | | | | | | | | Year to date | | 2956 | 5896 |
| The following Table provides details on the numbers of clients in attendance and the vaccines administered at all of the public clinics based on the clients council of origin | | | | | | | | | | | | | | | | |
| | BURNSIDE | | CAMP | | NPS | | PROSPECT | | WALK | | UNLEY | | OTHER | | TOTALS | |
| | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines | Clients | Vaccines |
| Jan-Mar | 228 | 472 | 297 | 583 | 231 | 457 | 55 | 110 | 47 | 93 | 123 | 251 | 46 | 82 | 1027 | 2048 |
| Year to date | 621 | 1258 | 800 | 1582 | 701 | 1382 | 159 | 303 | 133 | 265 | 403 | 847 | 139 | 259 | 2956 | 5896 |

RECOMMENDATION

That:

The Immunisation Services Report is received.

7.3 FOOD SAFETY REPORT

Complaints

For the reporting period 1 January 2016 to 31 March 2016 the Eastern Health Authority received 33 complaints that were investigated under the *Food Act 2001*. The complaints are shown by category in Graph 1 and by respective council area in Table 1.

Graph 1

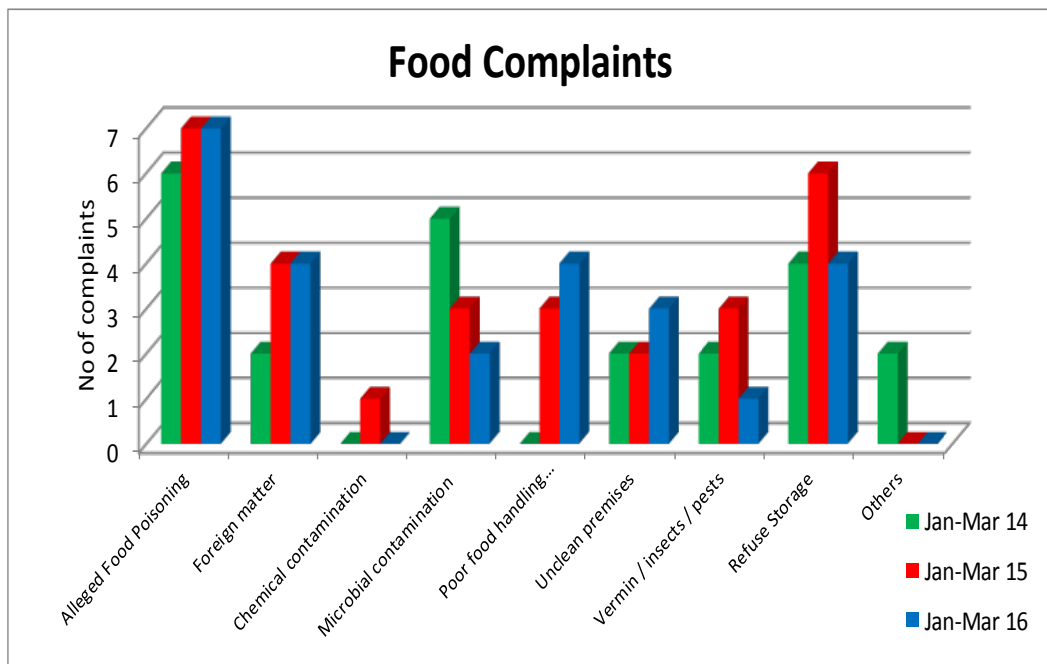


Table 1: Food complaints by council area from 1 January 2016 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|--|----------|--------------|------|----------|-------------|-------|
| Alleged food poisoning | 1 | 0 | 4 | 2 | 0 | 7 |
| Confirmed food poisoning | 1 | 0 | 0 | 0 | 0 | 1 |
| Other | 1 | 2 | 1 | 1 | 1 | 6 |
| Poor personal hygiene or food handling practices | 0 | 1 | 2 | 0 | 1 | 4 |
| Refuse storage | 2 | 0 | 3 | 0 | 0 | 5 |
| Unclean premises | 0 | 0 | 2 | 0 | 0 | 2 |
| Unsuitable/unsafe food | 2 | 1 | 2 | 1 | 0 | 6 |
| Vermin/pests observed on premises | 0 | 0 | 2 | 0 | 0 | 2 |
| Total | 7 | 4 | 16 | 4 | 2 | 33 |

Cumulative totals of complaints for the financial year to date are shown in Graph 2. Table 2 shows complaints by council area and reporting category.

Graph 2

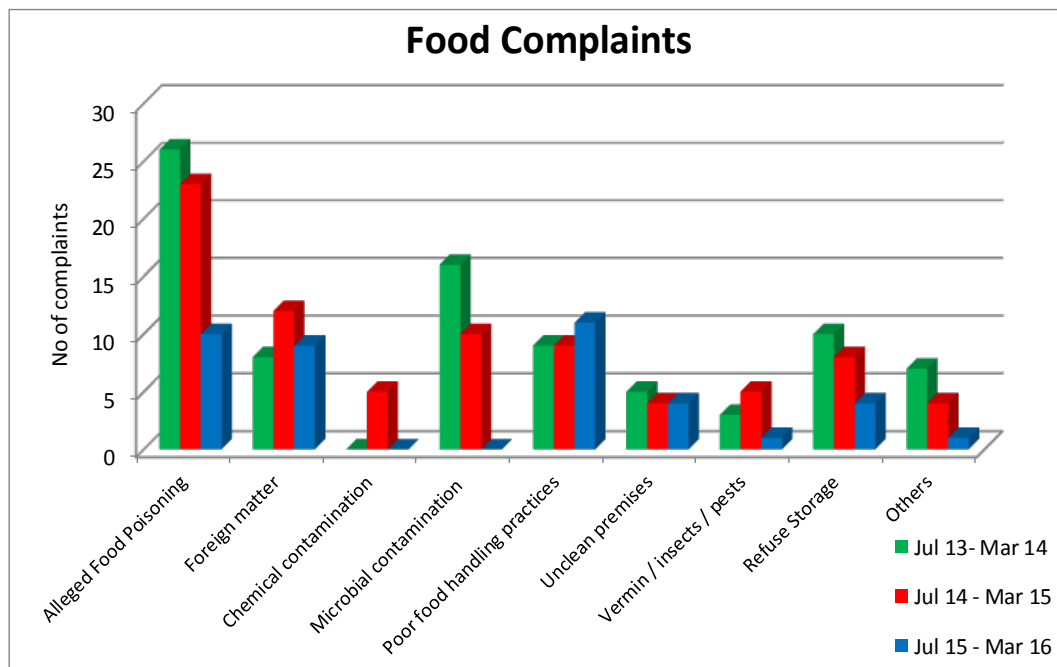


Table 2: Food complaint cumulative totals by council area and reporting category for period 1 July 2015 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|--|-----------|--------------|-----------|-----------|-------------|-----------|
| Alleged food poisoning | 7 | 0 | 5 | 4 | 1 | 17 |
| Confirmed food poisoning | 1 | 0 | 2 | 0 | 0 | 3 |
| Other | 1 | 2 | 1 | 2 | 1 | 7 |
| Poor personal hygiene or food handling practices | 4 | 2 | 6 | 1 | 2 | 15 |
| Refuse storage | 3 | 0 | 6 | 0 | 0 | 9 |
| Unclean premises | 1 | 0 | 4 | 1 | 0 | 6 |
| Unsuitable/unsafe | 3 | 4 | 4 | 3 | 1 | 15 |
| Vermin/pests observed on premises | 0 | 0 | 3 | 0 | 0 | 3 |
| Total | 20 | 8 | 31 | 11 | 5 | 75 |

Alleged Food Poisoning

Investigation 1

A complaint was received concerning a group of four people who showed symptoms of gastrointestinal illness, including diarrhoea and vomiting between 14-17 hours after consuming food from a take-away food premises. The Officer recommended that all individuals displaying these symptoms provide stool samples for analysis.

The Officer inspected the premises which identified poor food hygiene practices including unsafe storage of food, potentially hazardous foods (PHF) stored out of temperature control, inadequate hand washing facilities and food handlers failing to wash their hands when contaminated. The ingredients and processes used by the food business to produce high risk raw egg based foods was explained to the Officer. The procedures for making these high-risk products were satisfactory and the business demonstrated a broad understanding of the risks involved in producing products containing raw egg.

The proprietor was instructed to immediately rectify the serious non-conformances relating to inadequate hand washing and unsafe food storage practices during the inspection. A follow up inspection was conducted and all non-compliances were rectified.

After the initial investigation, an additional complaint was received alleging similar gastrointestinal symptoms from the first complaint received. The Officer confirmed the second complainant consumed food at the takeaway food premises three days after the first group. The Officer advised the complainant to submit a stool sample for analysis.

No stool samples were taken and submitted for analysis by any of the individuals experiencing gastrointestinal illness symptoms. The Officer was unable to confirm the source of contamination. The food hygiene standards at the food business improved after subsequent inspections. The inspection frequency of the premises was increased to six monthly to enable Officers to monitor the hygiene practices at the food business on a more a regular basis.

Investigation 2

EHA received an alleged food poisoning complaint from an individual after eating at a take-away food business. An inspection of the premises revealed a number of non-compliances with the Food Safety Standards which had previously been outlined in an Improvement Notice. Non-conformances included inadequate sanitising, cleanliness, and unsafe storage temperatures of potentially hazardous foods. The food handler's ability to communicate during the investigation was limited as English was their second spoken language. An appointment was made with the manager to discuss the identified issues and action required to be compliant and avoid further enforcement action. Translated food safety information sheets were also provided to the food handlers that spoke limited English.

Follow-up inspections were conducted to ensure the non-compliances were addressed. The business was able to provide adequate temperature control records for all potentially hazardous foods on display and the refrigerator had been adjusted to ensure foods were stored and displayed under temperature control. The cleanliness of the business also significantly improved, however the food handlers could not demonstrate the correct dilution for the food grade sanitiser or its appropriate use. Further enforcement action is being considered.

Food Unfit / Unsuitable / Unsafe

A complaint was received alleging that a flat bread sandwich purchased from a café contained a dead mouse amongst the contents of the flatbread. The Authorised Officer obtained the evidence from the complainant. An examination confirmed that there was a dead mouse in the flat bread sandwich.

A statement was taken from the complainant who advised that the flat bread sandwich was purchased pre-prepared from the café earlier that day for lunch and was placed in a fridge at the complainant's work place. It was claimed that the flat bread sandwich was wrapped completely from the time it was purchased to when it was unwrapped to be toasted. The complainant noticed the mouse after it had been toasted.

A thorough investigation was conducted at the café, which was in the midst of renovation, and consequently food preparation areas were inadequately sealed to exclude pests and vermin. A review of the business' history and previous inspections indicated that on numerous occasions the premises was undertaking renovations without proper measures in place to seal the food preparation areas. Due to the ongoing nature of this non-compliance the business was served with an Improvement Notice to take immediate action to seal the areas of the premises being renovated from the existing food preparation areas.

The flat bread sandwich and the mouse were taken to South Australian Health and Medical Research Institute for a forensic examination. The research institute concluded that the mouse was dead for up to three days prior to being found in the flat bread sandwich. Due the nature of the decomposition of the mouse they were unable to conduct further tests to identify if it was poisoned.

The premise was reinspected and all necessary action was taken to comply with the Improvement Notice. With all the information considered, EHA was unable to definitively determine how the mouse entered the flat bread sandwich and where and when the offence occurred.

A complaint was received concerning poor hygiene standards and practices at a food premise including food displayed out of temperature control, undercooked seafood and poor rotation of the salads.

An investigation was conducted during a routine food safety assessment which revealed a number of non-compliances with the Food Safety Standards including inadequate sanitising of food contact surfaces, high risk foods out of temperature control and poor standards of cleanliness throughout the premises.

There has been an ongoing history of poor food hygiene and safety practices and non-conformance with the Food Safety Standards. An Improvement Notice was served to the food business to address the issues highlighted during the routine inspection. A follow up inspection was conducted and the requirements of the Improvement Notice were rectified. The inspection frequency of the premises has been increased to six monthly to monitor the business more frequently.

Refuse Storage

A resident located next to a food premises expressed concerns relating to the premises' bins being regularly overfilled and the associated issues with flies and odour.

An Officer inspected the bins, at which time they were overfilled and there were flies around the bins. There was an offensive odour also noted. The Officer discussed the Food Safety Standards requirement to contain waste and enclose garbage or recyclable matter to prevent the attraction of pests and vermin with the owner. The food business owner obtained additional waste bins, re-trained staff around disposal practices, serviced and sealed the grease arrestor which appeared to be contributing to the odour issues. Follow up inspections were conducted and there were improved waste storage practices and a significant reduction in odour around the bins and grease arrestor.

Food Premises Inspections

Officers conducted 181 routine food inspections this reporting period. An additional 123 follow-up inspections were carried out to ensure non-conformances with the Food Safety Standards were appropriately rectified.

Table 3: Food Premises Inspections 1 January 2016 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|----------------------------------|-----------|--------------|------------|-----------|-------------|------------|
| Complaint Inspection | 10 | 5 | 15 | 1 | 2 | 33 |
| Follow Up Inspection | 25 | 19 | 57 | 15 | 7 | 123 |
| Routine Inspection | 39 | 35 | 65 | 34 | 8 | 181 |
| Special Event Inspection | 0 | 0 | 0 | 0 | 0 | 0 |
| Fit-out / Pre-opening Inspection | 1 | 0 | 1 | 0 | 0 | 2 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 75 | 59 | 138 | 50 | 17 | 339 |

Table 4: Cumulative Totals for Food Premises Inspections 1 July 2015 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|----------------------------------|------------|--------------|------------|------------|-------------|-------------|
| Complaint Inspection | 27 | 7 | 31 | 11 | 4 | 80 |
| Follow Up Inspection | 75 | 91 | 197 | 38 | 18 | 419 |
| Routine Inspection | 107 | 125 | 207 | 80 | 20 | 539 |
| Special Event Inspection | 0 | 0 | 0 | 0 | 0 | 0 |
| Fit-out / Pre-opening Inspection | 3 | 3 | 5 | 1 | 0 | 12 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 212 | 226 | 440 | 130 | 42 | 1050 |

Non-Compliance with Food Safety Standards

During the reporting period, 24 improvement notices, two final warnings, and an expiation was issued. Table 5 lists the number of each non-compliance with the Food Safety Standards encountered by officers during routine inspections.

As highlighted in blue in the table below, poor food storage and processing, poor standard of cleanliness, inadequate cleaning, sanitising and damaged fixtures and fittings requiring replacement or repair were common non-compliances.

| Reason for enforcement activity | Written warnings | Improvement notices | Prohibition Orders |
|---------------------------------|------------------|---------------------|--------------------|
| Standard 3.2.2 | | | |
| Skills and Knowledge | | 3 | |
| Notification | | 1 | |
| Food Receipt | | 2 | |
| Food Storage | 1 | 17 | |
| Food Processing | 1 | 5 | |
| Food Display | | 6 | |
| Food Packaging | | 1 | |
| Food Transportation | | | |
| Food Disposal | | 3 | |
| Food Recall | | 3 | |
| General Req of Food | | 3 | |
| Health & Hygiene of Food | 1 | 8 | |
| General Duties of a Food | 1 | 6 | |
| Skills and Knowledge | 1 | | |
| Cleanliness | 1 | 20 | |
| Cleaning and Sanitising | 2 | 13 | |
| Maintenance | | 11 | |
| Temperature measuring | | 4 | |
| Single use items | | 2 | |
| Animals and Pests | | 13 | |
| Standard 3.2.3 | | | |
| General Requirements | | 13 | |
| Water supply | | 1 | |
| Sewerage & waste water | | | |
| Storage of garbage & | | 3 | |
| Ventilation | | 1 | |
| Lighting | | | |
| Floors | | 3 | |
| Walls and ceilings | | 5 | |
| Fixtures, fittings and | | 5 | |
| Hand washing facilities | | 7 | |
| Storage facilities | | | |
| Toilet Facilities | | | |
| Food Transport vehicles | | | |

Table 5: Legal Action 1 January 2016 to 31 March 2016

| | Burnside | Campbelltown | NPS | Prospect | Walkerville | Total |
|---------------------|----------|--------------|-----------|----------|-------------|-----------|
| Warning Letters | 0 | 0 | 1 | 0 | 1 | 2 |
| Improvement Notices | 2 | 2 | 11 | 7 | 2 | 24 |
| Expiation Notices | 0 | 1 | 0 | 0 | 0 | 1 |
| Prohibition Order | 0 | 0 | 0 | 0 | 0 | 0 |
| Prosecution | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 2 | 3 | 12 | 7 | 3 | 27 |

Table 6: Cumulative Totals for Legal Action 1 July 2015 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Total |
|---------------------|-----------|--------------|-----------|-----------|-------------|-----------|
| Warning Letters | 3 | 3 | 7 | 1 | 1 | 15 |
| Improvement Notices | 9 | 12 | 31 | 10 | 6 | 68 |
| Expiation Notices | 0 | 1 | 3 | 0 | 0 | 4 |
| Prohibition Order | 0 | 0 | 3 | 0 | 0 | 3 |
| Prosecution | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 12 | 16 | 44 | 11 | 7 | 90 |

Improvement Notices

Notification was received from SA health that a salad product was sampled from a retail supermarket made by a manufacturer within one of EHA's Constituent Council. The sample revealed high counts of *Bacillus cereus* and total bacteria count. An Officer inspected the manufacturer on several occasions and served Improvement Notices. The Notices addressed the cooling methods; cleaning and sanitising process of food contact surfaces; upgrade to the hand washing facility to supply warm running water, installation of a larger hand washing bowl; and the replacement of the inappropriate food preparation bench.

SA Health attended one of the inspections and collected further samples after the Improvement Notices had been served. Results indicated the required actions taken as outlined in the Improvement Notice contributed to lower bacterial counts. The samples demonstrated that the raw ingredients added to the salad required more thorough washing, food contact surfaces required sanitising and food handling practices required attention. There have been significant improvements noted at the manufacturer at subsequent follow up inspections.

A routine inspection was conducted of a new manufacturer producing unpasteurised cold pressed fruit and vegetable juices which were bottled and wholesaled. During the inspection serious non-compliances with the Food Safety Standards were observed concerning inadequate cleaning and sanitising of food contact surfaces of the juicer, lack of washing fruit and vegetables and pest activity. As a result the premise was issued with an Improvement Notice to remedy these non-compliances.

Following the inspection, food sampling was conducted in conjunction with SA Health to ascertain the microbiological quality of the juices. Of the five juices sampled, three juices returned unsatisfactory which included two juices with 4,000 and 5,200 organisms per mL of *Bacillus cereus* respectively and one juice which detected *Listeria seeligeri* in 25mL (This particular strain of *Listeria* is considered non-pathogenic). The '*Guidelines for microbiological examination of ready-to-eat foods*' by Food Standards Australia New Zealand categorises the microbiological quality of these results 'unsatisfactory'.

Authorised Officers from SA Health and EHA conducted a joint inspection at the premises to collect samples of individual ingredients used to make the juices. During the inspection food contact surfaces of the juicer, food storage containers and work benches were also swabbed.

During the final follow up inspection, it was established that since the first inspection the business had undertaken steps to wash and sanitise all fruit and vegetable items adequately; the cleaning and sanitising process of the equipment was also found to be satisfactory; the Improvement Notice was complied with; and the sampling and swabbing results were satisfactory.

Prohibitions and Expiation

In the previous reporting period, a food premises had a Prohibition Order and an Improvement Notice issued for non-conformances relating to; pest control, cleaning, food storage, food processing, food handler hygiene, sanitising and maintenance of equipment.

A follow up inspection was conducted to assess compliance with the Improvement Notice, a number of issues regarding cleaning were still outstanding and the Improvement Notice was extended. A subsequent follow up inspection was conducted and all issues had been rectified to an acceptable standard. The inspection frequency for the premises has been increased to allow Officers to monitor the condition of the premises. Expiations will be issued within the next reporting period.

A routine inspection of a food business identified numerous items of food on display past the use by date. A review of the premise's history indicated that the food business had ongoing issues with stock rotation. The proprietor was issued final warnings for this in the past. As a result of this ongoing non-compliance, the business was issued with an Expiation Notice for display of food past the use by date.

During the reporting period a 'pre-event' inspection was conducted at a food business prior to their participation in a special event street party. During the inspection a number of serious non-compliances with the Food Safety Standards were identified relating to the obstruction of the hand washing facilities and the use of tobacco products in a food preparation area. A follow up inspection was conducted the following day and there was still evidence that tobacco products were being used in the food preparation area. It was also noted that a handwashing basin had been removed and was not in use. These non-conformances were actioned immediately, and non-conformances were rectified. The handwashing facility was rendered compliant with the Food Safety Standards and the use of tobacco products in the premises ceased. These issues had previously been identified in three separate Improvement Notices over the past two years. Due to the history of these offences, an Expiation Notice will be issued in the next reporting period.

Fairs, Festivals and Markets

Authorised Officers attended four major events during the reporting period. Officers liaised closely with event coordinators leading up to the events. All stall holders were provided with a temporary event booklet outlining the necessary information to ensure food is handled safely during the temporary events.

Table 8 outlines the list of temporary events inspected during the reporting period. The table outlines the number of stalls inspected and common non-conformances.

Table 8: List of temporary events inspected during the reporting period

| Event | Number of Stalls Inspected | Common non-conformances |
|--|-----------------------------------|---|
| Tourrific Prospect Street Party | 20 | <ul style="list-style-type: none"> • Inadequate hand washing facilities • Unsafe cooling of foods at home prior to the event. |
| St Helens Park Prospect Fair | 14 | <ul style="list-style-type: none"> • Inadequate hand washing facilities |
| Little Rundle Street Art Project | 8 | <ul style="list-style-type: none"> • Inadequate hand washing facilities |
| Campbelltown Festival of Cycling – Tour Down Under | 12 | <ul style="list-style-type: none"> • Unsafe storage of raw meats • Inadequate hand washing facilities • Inadequate facilities for washing fruit and veg |
| Norwood on Tour | 16 | <ul style="list-style-type: none"> • Inadequate hand washing facilities • Unsafe storage • No sanitiser onsite • Poor knowledge and organisation leading up to the event. |

Audits of Businesses that Serve Vulnerable Populations

During the reporting period, two business within the constituent council boundaries and five businesses in other council areas were audited under Standard 3.3.1 of the *Australia New Zealand Food Standards Code*. 2 follow-up audits were performed.

Table 8: Food Audits for the Period 1 January 2016 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Other | Total |
|------------------|----------|--------------|------|----------|-------------|-------|-------|
| Audits | 1 | 1 | 1 | 1 | 0 | 5 | 9 |
| Follow-up audits | 1 | 0 | 1 | 0 | 0 | 0 | 2 |
| Total | 2 | 1 | 2 | 1 | 0 | 5 | 11 |

Table 9: Cumulative Totals for Food Audits from 1 July 2015 to 31 March 2016

| | Burnside | Campbelltown | NPSP | Prospect | Walkerville | Other | Total |
|------------------|----------|--------------|------|----------|-------------|-------|-------|
| Audits | 8 | 5 | 9 | 2 | 3 | 35 | 62 |
| Follow-up audits | 6 | 0 | 2 | 1 | 1 | 2 | 12 |
| Total | 14 | 5 | 11 | 3 | 4 | 37 | 74 |

RECOMMENDATION

That:

The Food Safety Report is received.

7.4 HEALTH CARE AND COMMUNITY SERVICES

SUPPORTED RESIDENTIAL FACILITY REPORT

Audits / Inspections

During the reporting period six audits and one inspection were conducted. Three of the audits were conducted at dual licensed facilities where documentation including prospectus, resident contracts, service plans, medication and financial management, menus and nutritional value of foods served to residents and staffing adequacy were reviewed.

Two of the dual licensed facilities audited do not provide financial management services to residents. Meals provided at the three audited dual licenced facilities are optional to residents. Therefore, the menu's were not assessed. It was noted at one facility that accurate medication records were not being kept for all residents receiving medication. The non-conformance was raised with the manager and rectified.

Three audits were conducted at one dual licenced facility and the other two at pension only facilities. These audits included the assessment of standards of care at the facilities including privacy, dignity and respect for residents; the facilities hygiene, maintenance and safety of bedrooms, bathrooms and common areas; activities available to residents; outdoor shade and comfort for residents; communication systems and financial viability.

Non-conformances observed during audits included general dusting and cleaning, structural maintenance in bedrooms and bathrooms, general personal hygiene and cleanliness of bedrooms. All facilities have been requested to provide accounting records including profit and loss statement, balance sheet (assets and liability) and cash flow statement (incoming/ outgoings).

The extensive list of non-conformances was communicated with the mangers and proprietors of all facilities to improve the standard of living in bedrooms, bathrooms and common areas. Proprietors were informed to encourage lifestyle changes for residents concerning personal hygiene and standards of cleanliness, storage of belongings and ventilation in bedrooms.

Officers inspected a newly transferred facility and it was revealed during the unannounced inspection that the Manager was not fulfilling the minimum required hours for a manager to be in attendance at the facility. The manager and Proprietor were reminded of this requirement and evidence of the managers hours of attendance at the facility have been provided to EHA.

Complaints

There have been no complaints lodged in relation to supported residential facilities during this reporting period.

Approval of Manager / Temporary Manager

During the reporting period, one application was approved for a manager at a newly transferred facility. An Authorised Officer carried out referee checks and reviewed documentation outlining the applicant's qualifications to ascertain the suitability for the position. The Chief Executive Officer granted approval under delegated authority.

Licence Transfer

During the previous reporting period EHA was informed that a SRF was placed into receivership and one month later the company was placed into liquidation. A transfer application was received and after a long vetting process and meetings with the applicants and Department of Communities and Social Inclusion, the licence was transferred. Officers have corresponded with and visited the facility to ensure the ongoing safety and services are being provided to residents. During an inspection it was revealed that the newly approved Manager was not fulfilling the minimum required hours for a manager to be in attendance at the facility. The manager and Proprietor were reminded of this requirement and evidence of the manager's hours of attendance at the facility has been provided to EHA.

RECOMMENDATION

That:

The Supported Residential Facility Report is received.