



# Annual Business Plan 2020/21



## Introduction



The Eastern Health Authority (EHA) Charter requires an Annual Business Plan to support and inform its Annual Budget which:

- 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

The Budgeted Financial Statements can be found on pages 28 and consist of a Statement of Comprehensive Income, Statement of Financial Position, Statement of Cash Flows and Statement of Changes in Equity.

This document presents the Annual Business Plan for EHA for the 2020-2021 financial year.



Local councils  
working together to  
protect the health  
of the community.

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## About Eastern Health Authority (EHA)

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 council in a joint service delivery arrangement.

The Constituent Councils listed below established Eastern Health Authority in 1986 to discharge their respective environmental health responsibilities that are mandated in the *South Australian (SA) Public Health Act 2011*, *Food Act 2001* and *Supported Residential Facilities Act 1992*.

EHA undertakes a wide range of functions on behalf of its Constituent Councils to protect the health and wellbeing of approximately 160,000 residents plus those people who visit the region. These 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 table below provides a snapshot of the environmental health services provided for each Constituent Council.

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)

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	285	296	485	182	43	1,291
Swimming Pools	19	6	13	2	3	43
High Risk Manufactured Water Systems	9	8	10	2	0	29
Supported Residential Facilities	1	2	1	1	0	5
Environmental Health Complaints	32	35	64	12	9	152
Hairdresser/Beauty Treatment Premises	72	61	106	32	10	281
Number of high school student enrolments	2,268	1,749	2,429	379	291	7,116
Average clients receiving vaccines at public clinics	1,114	1,422	1,429	329	275	4,569





## 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 this years' Annual Business Plan a number of key influences were taken into consideration.

### Significant Influences

- COVID-19 Response
- School Based Immunisation Program reduced to Year 8 and 10 students only (current year 11 catch-up program was finalised in 2019).
- Enterprise Bargaining wage increase for staff.
- No longer providing immunisation services to the City of Unley.
- Commencement of Adelaide Primary Health Network (PHN) – Immunisation Community Engagement partnership project.

EHA has set the following priorities as part of the 2020-2021 Annual Business Plan:

### Priorities

- Implement the elements of the Regional Public Health Plan, 'Better Living, Better Health' as they apply to EHA.
- Where practicable, continue to undertake the necessary public health functions on behalf of Constituent Councils to protect the health and well-being of the community during the COVID-19 crisis.

- Attend and participate in Local Government COVID-19 meetings and forums to ensure consistency of approach in relation to public health and operational matters.
- Review of the EHA Business Continuity Plan considering COVID-19.
- Ensure operational activities (inspections, investigations, immunisation services etc) are undertaken in line with required social distancing and hygiene measures to protect EHA employees and the community.
- Promotion of online immunisation appointment system.
- Conduct immunisation surveys to gain client feedback for use in development of the 2021 Clinic Immunisation Timetable.
- Implement process of improved recalls and reminders for overdue immunisation clients.
- Conduct organisation service review which considers the current scope and delivery of public and environmental health services by EHA, to ensure that these services fulfil the legislative obligations of EHA's Constituent Councils, are aligned to community needs, are delivered efficiently and provide value to the public and Constituent Councils.



## 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 *SA Public Health Act 2011*, *Food Act 2001*, *Supported Residential Facilities Act 1992* and the *Local Government Act 1999*.

The forecast for the 2020-2021 financial year is that EHA's operating result will be a breakeven position. To achieve this operating budget result, a total of \$1,790,674 will be raised through

contributions from our Constituent Councils for operational expenditure. Constituent Councils will be requested to collectively contribute a further \$40,000 (20% per council) for the service review which was postponed from 2020-2021.

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

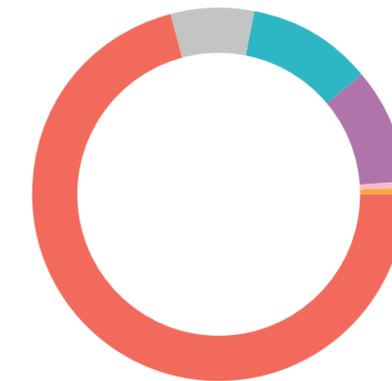
Statutory Charges relate mainly to fees and fines levied in accordance with legislation and include food inspection fees, supported residential facility licences, and environmental health related fines.

User Charges relate 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, workplace immunisation programs and fee vaccines at community immunisation clinics.

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

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

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



Graph 1 – Funding Sources 2020-2021

Statutory Charges	7.0%
User Charges	11.0%
Grants	10.0%
Investment Income	0.6%
Other Revenues	0.3%
Constituent Council Contributions	71.0%



# 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.

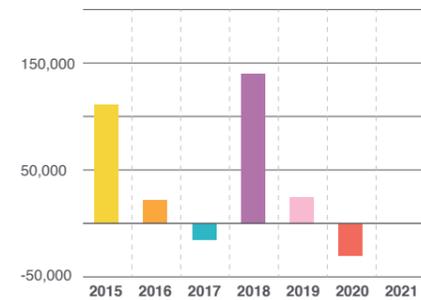
Indicators with relevance to EHA are set out below.

**Operating Surplus (Deficit)** indicates the difference between day-to-day income and expenses for the particular financial year.

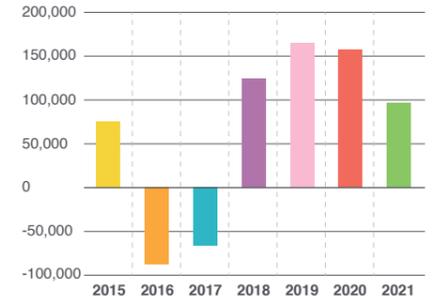
**Net Financial Assets** indicates the money held, invested or owed to EHA less money owed to others (including provisions for employee entitlements).

**Net Financial Assets Ratio** indicates the extent to which net financial assets of a subsidiary can meet its operating revenue.

Graph 2: Operating Surplus / (Deficit)



Graph 3: Net Financial Assets



Graph 4: Net Financial Assets Ratio



Another useful financial indicator is the percentage of Constituent Council total expenditure used on Public Health services provided by EHA as seen in Table 2 below.

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

	Contribution 2019-20	Total Expenses Budgeted 2019-20	EHA % of expenses
Burnside	\$439,648	\$48,019,000	0.92%
Campbelltown	\$429,328	\$51,260,050	0.84%
NPSP	\$562,871	\$42,671,084	1.32%
Prospect	\$222,773	\$25,093,000	0.89%
Walkerville	\$102,500	\$10,143,000	1.01%
<b>Total Constituent Council Expenditure</b>	<b>\$1,757,120</b>	<b>\$177,186,134</b>	<b>0.99%</b>

# Activities for 2020/21

The following information reflects the actions which will be performed to achieve the objectives for EHA over the next 12 months.





## 1.0 – Governance and Organisational Development



### Background

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

### Objective 1.0

Administration of legislative and corporate governance requirements

	Actions	Performance Measures
1.1	<ul style="list-style-type: none"> <li>Monitor the compliance of statutory requirements identified in the Charter.</li> </ul>	<ul style="list-style-type: none"> <li>Statutory requirements complied with as per Charter.</li> </ul>
1.2	<ul style="list-style-type: none"> <li>Properly convene Board meetings providing agendas and minutes.</li> <li>Minimum of 5 ordinary meetings conducted.</li> <li>Notice of meeting given 3 clear days prior to meeting.</li> <li>Minutes provided within 5 days of meeting.</li> </ul>	<ul style="list-style-type: none"> <li>5 meetings conducted.</li> <li>Appropriate notice given.</li> <li>Timeframe met.</li> </ul>
1.3	<ul style="list-style-type: none"> <li>Conduct election for Chair and Deputy Chair of Board of Management in February.</li> </ul>	<ul style="list-style-type: none"> <li>Election conducted at February meeting.</li> </ul>
1.4	<ul style="list-style-type: none"> <li>In accordance Clause 6.5 of EHA's Charter 2016, undertake the required strategies to attain any priority or goal which the Regional Public Health Plan, 'Better Living, Better Health' specifies as EHA's responsibility.</li> </ul>	<ul style="list-style-type: none"> <li>As detailed in 'Better Health, Better Living' the section 'Protection for Health'.</li> </ul>
1.5	<ul style="list-style-type: none"> <li>Implement the second iteration of the Regional Public Health Plan, 'Better Living, Better Health' in accordance with <i>section 51(19) SA Public Health Act, 2011</i>.</li> </ul>	<ul style="list-style-type: none"> <li>Implementation of Regional Public Health Plan</li> </ul>
1.6	<ul style="list-style-type: none"> <li>Provide administrative assistance to the Public Health Plan Advisory Committee and coordinate reports to the Board of Management.</li> </ul>	<ul style="list-style-type: none"> <li>Reports provided to Board meetings as required.</li> </ul>
1.7	<ul style="list-style-type: none"> <li>Annual Business Plan to be developed with detailed objectives for the year in consultation with Constituent Councils.</li> </ul>	<ul style="list-style-type: none"> <li>Draft considered at May meeting and adopted at June meeting.</li> </ul>
1.8	<ul style="list-style-type: none"> <li>Develop budgeted financial statements to implement the Annual Business Plan of EHA.</li> <li>Draft Budgeted Financial Statements considered at May meeting.</li> <li>Budgeted Financial Statements adopted at June meeting.</li> </ul>	<ul style="list-style-type: none"> <li>Budget and Financial Statements adopted.</li> <li>Copy of budget provided to CEO of Constituent Councils within 5 days of adoption.</li> </ul>
1.9	<ul style="list-style-type: none"> <li>Keep proper books of account, regularly report on the financial position of EHA, and apply prudent financial management as required by the Charter.</li> </ul>	<ul style="list-style-type: none"> <li>Financial reports provided at each Board meeting.</li> <li>Budget reviews presented at October, February and May meetings.</li> </ul>
1.10	<ul style="list-style-type: none"> <li>Conduct Audit Committee meetings as required by Charter.</li> </ul>	<ul style="list-style-type: none"> <li>Audit committee meet minimum of two times per annum.</li> </ul>
1.11	<ul style="list-style-type: none"> <li>Ensure the financial statements are audited annually as per the requirements of the Charter.</li> </ul>	<ul style="list-style-type: none"> <li>Audited financial statements adopted at August meeting and provided to Constituent Councils within 5 days.</li> </ul>
1.12	<ul style="list-style-type: none"> <li>Monitor Long Term Financial Plan.</li> </ul>	<ul style="list-style-type: none"> <li>Plan reviewed annually as part of budget process.</li> </ul>

Actions	Performance Measures
1.13 <ul style="list-style-type: none"><li>Provide regular statistical reports to Board Members and Constituent Councils.</li></ul>	<ul style="list-style-type: none"><li>Reports provided at scheduled Board meetings.</li></ul>
1.14 <ul style="list-style-type: none"><li>Conduct annual review of delegations. Lead Constituent Councils in process. Resolutions and Instruments of delegation provided to Constituent Councils.</li></ul>	<ul style="list-style-type: none"><li>Documents provided to Constituent Councils.</li><li>Delegations from EHA to CEO reviewed annually.</li></ul>
1.15 <ul style="list-style-type: none"><li>Provide information to the Board of Management in relation to public health reforms and provide written responses on behalf of EHA and Constituent Councils to State Government.</li></ul>	<ul style="list-style-type: none"><li>Information reports provided to Board and distributed to Constituent Councils as required.</li></ul>
1.16 <ul style="list-style-type: none"><li>Compile annual report in relation to the operations of EHA as required by the Charter.</li></ul>	<ul style="list-style-type: none"><li>Annual report adopted at August meeting and provided to Constituent Councils and other stakeholders.</li></ul>
1.17 <ul style="list-style-type: none"><li>Compile report pursuant to the <i>SA Public Health Act 2011</i> in relation to the operations of EHA as required by legislation.</li></ul>	<ul style="list-style-type: none"><li>Report adopted at relevant Board meeting and provided to Public Health Council.</li></ul>
1.18 <ul style="list-style-type: none"><li>Compile annual reports pursuant to the <i>Food Act 2001</i> and <i>Safe Drinking Water Act 2011</i> in relation to the operations of EHA as required by legislation.</li></ul>	<ul style="list-style-type: none"><li>Report adopted at August meeting and provided to SA Health.</li></ul>
1.19 <ul style="list-style-type: none"><li>Compare Annual Business Plan against performance measures.</li></ul>	<ul style="list-style-type: none"><li>Report presented to August meeting.</li></ul>
1.20 <ul style="list-style-type: none"><li>Provide delegates report to CEO of each Constituent Council following Board meetings for tabling at subsequent council meeting.</li></ul>	<ul style="list-style-type: none"><li>Reports provided following Board meetings.</li></ul>
1.21 <ul style="list-style-type: none"><li>Properly convene meetings of Constituent Council nominated contacts including providing agendas and minutes.</li></ul>	<ul style="list-style-type: none"><li>4 meetings conducted per year.</li></ul>
1.22 <ul style="list-style-type: none"><li>Maintenance of electronic records management system to properly maintain records and reference documents of EHA.</li></ul>	<ul style="list-style-type: none"><li>System developed to ensure appropriate standards are being met.</li></ul>
1.23 <ul style="list-style-type: none"><li>Continually review the EHA website to improve the functionality and available information and educational material.</li></ul>	<ul style="list-style-type: none"><li>Improved website functionality and available information.</li></ul>
1.24 <ul style="list-style-type: none"><li>Explore the potential for the expansion of service provision to areas outside of its current Constituent Council areas.</li></ul>	<ul style="list-style-type: none"><li>Report to Board on expansion opportunities.</li></ul>
1.25 <ul style="list-style-type: none"><li>Maintenance of Health Manager (electronic database) and Mobile Health (inspection App). Continue to expand Health Manager and Mobile Health internal and external functionality, to improve inspection, complaint and administrative efficiency and reporting capabilities.</li></ul>	<ul style="list-style-type: none"><li>Introduce new applications and reporting capabilities where required. Continue to liaise with Open Office to discuss new applications.</li></ul>
1.26 <ul style="list-style-type: none"><li>EHO's to continue to utilise the handheld electronic tablets with access to Mobile Health during routine and follow-up food inspections.</li><li>Expand the use of the electronic tablets in other EHO onsite field work.</li></ul>	<ul style="list-style-type: none"><li>Continue to utilise the handheld electronic tablets during routine and follow-up food inspections.</li><li>Explore the opportunities to expand the use of the electronic tablets in other EHO onsite field work.</li></ul>
1.27 <ul style="list-style-type: none"><li>Participate in the Environmental Health Managers Forum to address environmental health issues and promote uniformity and professional consistency.</li></ul>	<ul style="list-style-type: none"><li>Management to attend and participate in the Environmental Health Managers Forum meetings.</li></ul>
1.28 <ul style="list-style-type: none"><li>Engage and participate with LGA, Environmental Health Australia, state and local government authorities, and other non-Government authorities to review best practice standards and promote uniformity and professional consistency.</li></ul>	<ul style="list-style-type: none"><li>Engage, attend and actively participate.</li></ul>
1.29 <ul style="list-style-type: none"><li>Continue membership and actively participate in the Eastern Adelaide Zone Emergency Management Committee to develop and finalise the Eastern Zone Emergency Management Plan.</li></ul>	<ul style="list-style-type: none"><li>Attend the Eastern Adelaide Zone Emergency Management Committee and actively contribute towards the development of the Eastern Zone Emergency Management Plan.</li></ul>

**Objective 1.1**

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

A work environment which helps to promote a dynamic and committed workforce is a priority for EHA. Organisational capacity is created through encouraging collaboration and peer support. Our staff who create and retain our knowledge capital are our most valuable asset.

Actions	Performance Measures
1.1.1 <ul style="list-style-type: none"><li>Ensure that EHA is properly staffed and resourced in order to carry out its responsibilities.</li></ul>	<ul style="list-style-type: none"><li>Continually review staff resources and report to Board if required.</li></ul>
1.1.2 <ul style="list-style-type: none"><li>Performance development framework used to support staff and link to day-to-day and long-term activities within the Annual Business Plan and Public Health Plan and to provide for an equitable workload.</li></ul>	<ul style="list-style-type: none"><li>Performance development framework and staff portfolios reviewed annually.</li></ul>
1.1.3 <ul style="list-style-type: none"><li>Provide continuing professional development opportunities through ongoing education and training which is relevant to roles within EHA.</li></ul>	<ul style="list-style-type: none"><li>Training and education opportunities provided to staff.</li></ul>
1.1.4 <ul style="list-style-type: none"><li>Continue to foster team cohesiveness and support effective teamwork.</li></ul>	<ul style="list-style-type: none"><li>Training and team building activities provided to staff.</li></ul>
1.1.5 <ul style="list-style-type: none"><li>Encourage staff to be members of their relevant professional organisation. Support participation and EHA representation at professional Special Interest Groups to promote uniformity, professional consistency and to discuss the latest information in relation to public health issues affecting local government.</li></ul>	<ul style="list-style-type: none"><li>Encourage membership and active participation.</li></ul>
1.1.6 <ul style="list-style-type: none"><li>Provide systems for a safe working environment with appropriate Work Health and Safety (WHS) practices in place.</li></ul>	<ul style="list-style-type: none"><li>WHS to be discussed at all team and general staff meetings.</li><li>Provide appropriate training and equipment to new staff.</li></ul>
1.1.7 <ul style="list-style-type: none"><li>Review the WHS action plan outlining program of improvements required in EHA's WHS 3 Year Plan.</li></ul>	<ul style="list-style-type: none"><li>Action plan reviewed with input from staff.</li></ul>
1.1.8 <ul style="list-style-type: none"><li>Annual review of EHA's induction program to ensure EHA staff are and familiar with EHA's methods of operation upon commencement of employment.</li></ul>	<ul style="list-style-type: none"><li>Annual review and induction program updated.</li></ul>



## 2.0 – Public and Environmental Health



### Background

*Environmental Health is the branch of public health that focuses on the interrelationships between people and their environment, promotes human health and well-being, and fosters healthy and safe communities.*

website: NEHA

The *South Australian Public Health Act 2011* (the Act) and Regulations aims to provide a modernised, flexible, legislative framework to respond to both traditional and contemporary public health issues. 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:

- management of domestic squalor and hoarding
- clandestine drug laboratory
- vector control
- 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
- prevention and control of notifiable diseases
- discharge of waste to stormwater

An extension to public health is the licensing of Supported Residential Facilities (SRF's). SRF's provide accommodation to people in the community who require personal care and support. EHA is the licensing authority of all SRF's within the Constituent Councils. The *SRF Act 1992* ensures adequate standards of care and amenity are provided at these facilities to protect the health and wellbeing and rights of the residents.

Environmental health professionals also have a critical function in mitigating public health risks during a response to a disaster. An emergency management plan that integrates with the Eastern Regional Disaster Management Plan has been developed to ensure appropriate linkages are in place with emergency service agencies and the councils EHA serves.

To protect the health and well-being of the community during the COVID-19 crisis, it is imperative for EHA to continue to undertake the necessary functions on behalf of its Constituent Councils. These functions include the provision of hygiene and sanitation control, licensing and monitoring of supporting of residential facilities. Currently, these functions are controlled by the limitations set by the Federal Government Restrictions and State Government Directions.

The surveillance and investigation of the necessary environmental health provisions during the COVID-19 crisis will be modified to acknowledge the advice received from the LGA who are considered as our lead agency.

Where inspections and investigations are undertaken, the Environmental Health Officers ensure they practice the required social distancing and hygiene measures to protect themselves and the community.

**Objective 2.0**

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

Actions	Performance Measures
2.1 <ul style="list-style-type: none"> <li>Maintain and update a register of all public health related premises.</li> <li>Public Health related premises are: <ul style="list-style-type: none"> <li>premises with public swimming pools and spas</li> <li>premises with cooling tower systems and warm water systems</li> <li>personal care and body art premises</li> <li>waste control systems</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Register maintained and updated as required.</li> </ul>
2.2 <ul style="list-style-type: none"> <li>Undertake assessments and investigate complaints to determine that appropriate standards of public swimming pools and spas are maintained in accordance with the <i>South Australian Public Health (General) Regulations 2013</i>.</li> </ul>	<ul style="list-style-type: none"> <li>All indoor pools assessed twice a year and outdoor pools once a year.</li> <li>Investigate and respond to complaints in accordance with the customer service standards.</li> </ul>
2.3 <ul style="list-style-type: none"> <li>Undertake assessments and collect water samples for analysis to 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>.</li> </ul>	<ul style="list-style-type: none"> <li>Assessments performed at least annually.</li> </ul>
2.4 <ul style="list-style-type: none"> <li>Investigate notifiable <i>Legionella</i> incidences and high <i>Legionella</i> counts in accordance with SA Health guidance and internal procedures.</li> </ul>	<ul style="list-style-type: none"> <li>Investigate incidences in accordance with EHA service standards and SA Health guidance.</li> </ul>
2.5 <ul style="list-style-type: none"> <li>Undertake assessments to and investigate complaints determine that appropriate standards at personal care and body art premises are maintained in accordance with guidelines and legislation.</li> </ul>	<ul style="list-style-type: none"> <li>Assessments performed according to risk-based schedule.</li> <li>Investigate and respond to complaints in accordance with the customer service standards.</li> </ul>
2.6 <ul style="list-style-type: none"> <li>Assess applications for the installation of on-site wastewater systems in accordance with <i>South Australian Public (Wastewater) Regulations 2013</i>, the <i>On-site Wastewater System Code 2013</i> and AS 1547 internal procedures, and service standards.</li> </ul>	<ul style="list-style-type: none"> <li>Applications assessed against with legislative requirements and customer service standards.</li> </ul>
2.7 <ul style="list-style-type: none"> <li>Monitor service reports for aerobic waste water treatment systems to identify non-compliances. Ensure non-compliances are addressed in accordance with <i>South Australian Public (Wastewater) Regulations 2013</i></li> </ul>	<ul style="list-style-type: none"> <li>Monitor service reports for waste water treatment systems to identify non-compliances.</li> </ul>
2.8 <ul style="list-style-type: none"> <li>Respond to public health enquiries/complaints within the built environment that give rise to a risk to health in relation to: <ul style="list-style-type: none"> <li>hoarding and squalor</li> <li>sanitation</li> <li>vector control</li> <li>hazardous and infectious substances</li> <li>clandestine drug laboratory</li> <li>asbestos</li> <li>syringes</li> <li>on-site wastewater systems</li> <li>notifiable diseases</li> <li>refuse storage</li> <li>Co-ordinate a multi-agency response where necessary.</li> <li>Enquire into a collaborative working group with operational staff from Constituent Councils to assist with complex case investigation/resolution in public health hoarding and squalor.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Enquiries/complaints are investigated in accordance with the customer service standards and guidelines.</li> </ul>

Actions	Performance Measures
2.9 <ul style="list-style-type: none"> <li>Undertake joint investigations with Constituent Councils where there may be an overlap relating to offences relating to <i>SA Public Health Act 2011</i>, <i>Environmental Protection (Water Quality) Policy 2015</i> and the <i>Local Nuisance and Litter Control Act 2017</i>.</li> </ul>	<ul style="list-style-type: none"> <li>Undertake joint investigations where required.</li> </ul>
2.10 <ul style="list-style-type: none"> <li>Provide information to households informing them of localised pests/vector issues that can be minimised.</li> </ul>	<ul style="list-style-type: none"> <li>Provide information as required.</li> </ul>
2.11 <ul style="list-style-type: none"> <li>Undertake relevant notifiable disease investigations in collaboration with SA Health.</li> </ul>	<ul style="list-style-type: none"> <li>Respond to disease notifications in accordance with customer service standards and SA Health guidance.</li> </ul>
2.12 <ul style="list-style-type: none"> <li>Provide advice and information materials to residents about air quality concerns including the installation, operation and standards of solid fuel burning appliances.</li> </ul>	<ul style="list-style-type: none"> <li>Information available to community and via website as required.</li> </ul>
2.13 <ul style="list-style-type: none"> <li>Provide rodent bait to residents upon request.</li> </ul>	<ul style="list-style-type: none"> <li>Rodent bait provision maintained.</li> </ul>
2.14 <ul style="list-style-type: none"> <li>Assist members of the community by offering approved sharps containers at cost price. Free disposal for residents of full and approved sharps containers delivered to EHA.</li> </ul>	<ul style="list-style-type: none"> <li>Provide sharps containers at cost price and free disposal service to residents as required.</li> </ul>
2.15 <ul style="list-style-type: none"> <li>Continue to co-ordinate and attend the Eastern Hoarding and Squalor Committee meetings to promote interagency management of residents affected by hoarding and squalor.</li> </ul>	<ul style="list-style-type: none"> <li>Coordinate and attend the Eastern Hoarding and Squalor meetings.</li> </ul>
2.16 <ul style="list-style-type: none"> <li>Maintain the hoarding and squalor contacts database.</li> </ul>	<ul style="list-style-type: none"> <li>Update where required.</li> </ul>
2.17 <ul style="list-style-type: none"> <li>Participate in Metropolitan Fire Service fire risk notification system.</li> </ul>	<ul style="list-style-type: none"> <li>Notify MFS when required as per the notification process.</li> </ul>
2.18 <ul style="list-style-type: none"> <li>Respond to development application referrals from councils regarding public health related premises and activities.</li> </ul>	<ul style="list-style-type: none"> <li>Respond to all referrals in accordance with the customer service standards.</li> </ul>
2.19 <ul style="list-style-type: none"> <li>Monitor 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>.</li> </ul>	<ul style="list-style-type: none"> <li>Continue to monitor potential water providers to ensure compliance with the Act and associated regulations.</li> </ul>

**Objective 2.1**

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

Actions	Performance Measures
2.1.1 ◦ Develop and maintain a comprehensive range of health education and promotional material targeting public health issues incorporating the resources of other health related agencies.	◦ Information resources maintained.
2.1.2 ◦ 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.
2.1.3 ◦ Participate in State/National proactive educational initiatives that raise awareness of public health related issues amongst the community.	◦ Number of proactive educational activities conducted each year.

**Objective 2.2**

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

Actions	Performance Measures
2.2.1 ◦ Assess applications for new licences, licence renewals and transfer of licence with regard to SRF legislation and within legislative timeframes.	◦ Applications processed within legislative timeframes.
2.2.2 ◦ Assess applications for manager and acting manager with regard to SRF legislation.	◦ Applications processed in accordance with the customer service standards.
2.2.3 ◦ Conduct relicensing audits of facilities with regard to SRF legislation. ◦ Incorporate appropriate annual fire safety requirements from the Constituent Councils Building Fire and Safety Officers.	◦ Unannounced audits conducted at all facilities. Issue of licences annually with conditions where required. ◦ Fire safety advice obtained annually. If required, include as licence conditions as agreed between EHA and Constituent Councils.
2.2.4 ◦ Conduct follow-up inspections to ensure facilities continue to operate at satisfactory standards in accordance with the legislation.	◦ Unannounced inspections and follow-ups conducted at SRFs where required.
2.2.5 ◦ Respond to enquiries/complaints in relation to SRFs.	◦ Respond to all enquiries and complaints in accordance with the customer service standards.
2.2.6 ◦ Liaise with service providers to ensure residents receive appropriate levels of care.	◦ Liaise where required.
2.2.7 ◦ Liaise with Constituent Councils and other relevant stakeholders in relation to potential SRF closures and surrender of licence, strategic management options and appropriate alternative accommodation options.	◦ Issues investigated and reported to Board of Management and relevant council as necessary.
2.2.8 ◦ Liaise with LGA and State Government to ensure legislation applicable to SRFs is appropriate and that local government receives appropriate support for its licensing role.	◦ Continue discussion with LGA and State Government regarding these issues.

**Objective 2.3**

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

Actions	Performance Measures
2.3.1 ◦ 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.
2.3.2 ◦ Conduct exercises with staff to test the Emergency Management Plan and Business Continuity Plan. ◦ Participate in any relevant exercises conducted by the Constituent Councils or by other organisations.	◦ Conduct or participate in one exercise a year.
2.3.3 ◦ 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.
2.3.4 ◦ Review and update emergency management information and proactively provide public health and food safety information to the community and businesses via the website or email.	◦ Review and update as required.
2.3.5 ◦ Finalise the review of the Emergency Management Plan.	◦ Plan Finalised.
2.3.6 ◦ Review of Business Continuity Plan considering COVID-19.	◦ Plan Finalised.
2.3.7 ◦ 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.



## 3.0 – Immunisation



### Background

Immunisation is the most cost-effective public health initiative and saves millions of lives each year and is critical for the health of children and the wider community. Immunisation is a safe and effective way of protecting people against harmful diseases that can cause serious health problems.

The National Immunisation Program (NIP) Schedule is a series of immunisations given at specific times for children, adolescents and adults. The NIP provides free vaccines against 17 diseases (including shingles) for eligible people and EHA delivers these vaccinations at its public clinics. EHA also offers the Annual Influenza Vaccine at its public clinics to prevent the highly contagious respiratory illnesses caused by Influenza A and B.

Each school year vaccines are provided to adolescents through the NIP's consenting School Immunisation Program (SIP). Year 8 students are vaccinated with two doses of human papillomavirus (HPV) and diphtheria, tetanus and whooping cough vaccine (dTpa). While consenting Year 10 students will receive two doses of the Meningococcal B vaccine and one dose of the Meningococcal ACWY vaccine. EHA will undertake approximately 64 visits to 17 high schools offering vaccinations to 2,225 Year 8 students and 2,361 Year 10 students.

Workplace Immunisation programs are conducted on a fee for service basis. A total of 4,216 vaccinations were provided to EHA clients in 2019. EHA is working to increase the number of vaccinations provided by promotion of its quality on-site service. EHA offers a convenient online quote and booking system on its website where businesses, government agencies, child care centres, schools and aged care facilities can easily coordinate a program with minimal downtime for their staff.

**Objective 3.0**

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

Actions	Performance Measures
3.1 <ul style="list-style-type: none"> <li>Ensure effective governance and delivery of a public clinic immunisation program in accordance with:               <ul style="list-style-type: none"> <li>the current National Health and Medical Research Council (NHMRC) "Australian Immunisation Handbook"</li> <li>National Vaccine Storage Guidelines 'Strive for 5, 2<sup>nd</sup> Edition'</li> <li>the <i>Controlled Substances Act 1984</i> and the <i>Controlled Substances (Poisons) Regulations 2011</i></li> <li>Vaccine Administration Code October 2018 v 1.7</li> <li>South Australia's Child Protection Legislation – Child Safe Environment Guidelines</li> <li>Immunisation Records and Inventory System (IRIS)</li> <li>Immunisation Nurses are provided with opportunities to participate in appropriate professional development opportunities</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Annual clinical performance evaluation.</li> <li>Annual Cold Chain audit and pharmaceutical refrigerator maintenance.</li> <li>Annual review of Child Safe Environment Guidelines and Procedures.</li> <li>Review of Immunisation Nurses CPD annually.</li> </ul>
3.2 <ul style="list-style-type: none"> <li>Promotion of EHA's public immunisation clinic program through channels identified in the EHA Marketing Plan.</li> <li>Build social media presence through Constituent Council platforms to promote immunisation clinics.</li> <li>EHA website used as a tool for communication of up to date information relating to immunisation.</li> <li>Provide Constituent Councils with educational and promotional materials relating to immunisation for circulation.</li> </ul>	<ul style="list-style-type: none"> <li>Increased number of clinic timetables required and distributed.</li> <li>Regular updates on immunisation information and matters provided on the website homepage.</li> <li>Source and distribute to Constituent Councils promotional and educational materials on immunisation in conjunction with Constituent Councils.</li> </ul>
3.3 <ul style="list-style-type: none"> <li>Improve customer experience at EHA public immunisation clinics.</li> <li>Conduct an annual review of EHA's public clinic venues and timetable taking into account client feedback and satisfaction surveys.</li> <li>Continual development and promotion of online immunisation appointment booking system.</li> </ul>	<ul style="list-style-type: none"> <li>Review and evaluate each public clinic venue and times offered.</li> <li>Clinic timetable reviewed and published in November.</li> <li>Increase mailout of Clinic timetable.</li> <li>Report and expand website analytical tools to monitor usage.</li> <li>Improve the access and increase in use of the online immunisation booking system.</li> <li>Implement program of review and reminders for residents of overdue vaccinations.</li> </ul>
3.4 <ul style="list-style-type: none"> <li>Deliver School Immunisation Program (SIP) in accordance with the SA Health Service Agreement contract.</li> <li>Liaise with school coordinators and SA Health regarding implementation and evaluation of program.</li> <li>Immunisation statistics submitted via IRIS to SA Health and the Australian Immunisation Register (AIR) in accordance with contractual arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>Statistics reported to AIR within 5 days of clinics.</li> <li>All students offered vaccinations. If vaccination missed at school visit then public clinics offered.</li> <li>Statistics uploaded onto IRIS for the SIP within 10 days of school visit.</li> <li>Monitor and report on coverage data for the SIP compared to the SA Average.</li> <li>Delivery of SIP with ongoing improvement and evaluation of coverage data. Follow up of students who missed vaccination at school.</li> <li>Further promote EHA clinics and catch up facilities offered in regular school newsletter updates and electronic reminders to parents.</li> </ul>

Actions	Performance Measures
3.5 <ul style="list-style-type: none"> <li>Promote and provide a professional and quality Workplace Immunisation Program on a fee for service basis.</li> <li>Continual development and promotion of online workplace immunisation appointment booking system.</li> </ul>	<ul style="list-style-type: none"> <li>Target services to organisations whose staff are at high risk of acquiring vaccine preventable diseases.</li> <li>Increase of new clients and regular annual clients.</li> <li>Income generated.</li> <li>Review program annually.</li> </ul>
3.6 <ul style="list-style-type: none"> <li>The CEO/Team Leader Immunisation lobby through LGA for appropriate funding for sustainability of local government delivery of immunisation services.</li> </ul>	<ul style="list-style-type: none"> <li>Meet with LGA and SA Health to discuss funding and support from governments.</li> </ul>
3.7 <ul style="list-style-type: none"> <li>Facilitate the Community Engagement Project which forms part of a broader Adelaide PHN Immunisation Hub initiative.</li> <li>The initiative aims to increase immunisation coverage and reduce vaccine preventable hospitalisations in the Adelaide metropolitan region.</li> <li>Increase community awareness and knowledge of the benefits of childhood immunisation, increasing coverage within the eastern and inner northern suburbs of metropolitan Adelaide.</li> <li>Conduct on-site education and awareness raising sessions at participating childcare centres.</li> <li>Provide education and training on immunisation information and immunisation services for health professionals.</li> </ul>	<ul style="list-style-type: none"> <li>Comply with the Adelaide PHN project specific requirements, including submission of periodic reports as required.</li> <li>Meet with PHN periodically to monitor and review compliance against project schedule.</li> </ul>



## 4.0 – Food Safety



### Background

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 and all food businesses meet their legislative obligations.

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.

*Campylobacter* is the most commonly notified cause of gastroenteritis in Australia and foodborne illness caused by *Salmonella* has been significantly increasing over the past 20 years and, compared to many similar countries, Australia has one of the highest rates.

Australia's Foodborne Illness Reduction Strategy 2018-2021+ was endorsed by the Australia and New Zealand Ministerial Forum on Food Regulation in June 2018. The aim of the Strategy is to reduce the number of food-related human cases of *Campylobacter* and *Salmonella* in Australia.

SA Health is leading a national project on food safety culture and raw or lightly-cooked egg foods. EHA was a part of the working group and actively participated in the state project. EHA will continue to support SA Health and the national Strategy in improving the food safety culture in food service.

To prevent food borne outbreaks and protect the health and well-being of the community during the COVID-19 crisis, it is imperative for EHA to continue to undertake the surveillance of food premises and investigations of food related complaints on behalf of its Constituent Councils.

The execution of these functions will be controlled by limitations set by the Federal Government Restrictions and State Government Directions. Assessments undertaken will be modified to acknowledge the advice received from the LGA who are considered as our lead agency.

Where inspections and investigations are undertaken, the Environmental Health Officers ensure they practice the required social distancing and hygiene measures to protect themselves and the community.

**Objective 4.0**

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

Actions	Performance Measures
4.1 <ul style="list-style-type: none"> <li>Assign and where required update food businesses risk classification in accordance with the SA Health Food Business Risk Classification framework.</li> </ul>	<ul style="list-style-type: none"> <li>Apply relevant risk rating to new businesses and undertake assessments in accordance with SA Health Food Business Risk Classification framework.</li> <li>Monitor and identify new food processing practices during routine assessments. Update the risk classification to reflect the changes.</li> </ul>
4.2 <ul style="list-style-type: none"> <li>Routine food business assessments conducted using an appropriate food safety rating tool to ensure compliance with the <i>Food Act 2001</i> and Food Safety Standards.</li> <li>Frequency of routine assessments is determined by the food business risk classification framework.</li> </ul>	<ul style="list-style-type: none"> <li>Assessments performed using the appropriate food safety rating tool.</li> <li>Assessments conducted in accordance with the assigned risk rating and frequency.</li> </ul>
4.3 <ul style="list-style-type: none"> <li>Monitor food businesses during inspections to assess if they are captured by the Primary Production Standards.</li> </ul>	<ul style="list-style-type: none"> <li>Inform SA Health of new food businesses that may be captured under the Primary Production Standards as required.</li> </ul>
4.4 <ul style="list-style-type: none"> <li>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.</li> </ul>	<ul style="list-style-type: none"> <li>Number of enforcement actions taken.</li> </ul>
4.5 <ul style="list-style-type: none"> <li>Investigate food related complaints in relation to: <ul style="list-style-type: none"> <li>alleged food poisoning</li> <li>microbiological and chemical contamination</li> <li>foreign matter found in food</li> <li>poor personal hygiene and handling practices</li> <li>unclean premises</li> <li>vermin, insects and pest activity</li> <li>refuse storage</li> <li>allergens</li> </ul> </li> <li>Liaise with SA Health and other councils to ensure a consistent approach as required.</li> </ul>	<ul style="list-style-type: none"> <li>Respond to complaints in accordance with customer service standards and where necessary SA Health guidance.</li> </ul>
4.6 <ul style="list-style-type: none"> <li>Respond to food recalls in accordance with SA Health recommendations.</li> </ul>	<ul style="list-style-type: none"> <li>Number of recalls actioned when required.</li> </ul>
4.7 <ul style="list-style-type: none"> <li>Ensure all businesses servicing vulnerable populations within 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>.</li> </ul>	<ul style="list-style-type: none"> <li>Number of audits conducted in accordance to audit frequency.</li> </ul>
4.8 <ul style="list-style-type: none"> <li>Provide professional auditing services to businesses servicing vulnerable populations outside of EHA's of Constituent Councils.</li> </ul>	<ul style="list-style-type: none"> <li>Number of audits conducted in accordance to audit frequency.</li> </ul>
4.9 <ul style="list-style-type: none"> <li>Review plans and liaise with the applicant regarding structural fit out of a food business.</li> </ul>	<ul style="list-style-type: none"> <li>Respond to requests as required.</li> </ul>
4.10 <ul style="list-style-type: none"> <li>Provide feedback to Constituent Councils when requested as per the development assessment sharing process.</li> </ul>	<ul style="list-style-type: none"> <li>Respond and provide feedback to Constituent Councils as required.</li> </ul>
4.11 <ul style="list-style-type: none"> <li>Provide new food businesses with a welcome pack to acknowledge their notification and to introduce EHA. The welcome pack to provide resources and information on safe food practice and inform businesses of EHA's inspection fee policy.</li> </ul>	<ul style="list-style-type: none"> <li>Information provided following receipt of notification.</li> </ul>

**Actions****Performance Measures**

4.12 <ul style="list-style-type: none"> <li>Conduct food safety assessments of fairs and festivals and temporary events in collaboration with the Constituent Councils and relevant event co-ordinators. Provide written correspondence and feedback to all stall holders assessed at these events.</li> </ul>	<ul style="list-style-type: none"> <li>Food safety assessments are undertaken based on risk. Provide correspondence and feedback to stall holders where required.</li> </ul>
4.13 <ul style="list-style-type: none"> <li>Liaise with Constituent Council and relevant event coordinators to ensure all stall holders at fairs, festivals and temporary events are well informed of the legislative requirements.</li> <li>Manage temporary stall notification forms and ensure temporary food businesses are provided with adequate resources and information in safe food practices.</li> <li>Conduct stall holder meetings and food safety training for stall holders upon request by the Constituent Councils and relevant event coordinators.</li> </ul>	<ul style="list-style-type: none"> <li>Liaise with Constituent Council and relevant event coordinators prior to the event. Provide stall holder presentations where required.</li> </ul>
4.14 <ul style="list-style-type: none"> <li>Following the assessment of food stalls at Constituent Councils special events, provide feedback to the relevant council on the food safety standards observed at the event.</li> </ul>	<ul style="list-style-type: none"> <li>Provide feedback to council where necessary.</li> </ul>
4.15 <ul style="list-style-type: none"> <li>Ensure businesses provide notification of their business details. Monitor and maintain a register of all food businesses operating within EHA's jurisdiction.</li> </ul>	<ul style="list-style-type: none"> <li>Update in accordance with the customer service policy.</li> </ul>
4.16 <ul style="list-style-type: none"> <li>Assessments, investigations and actions are updated in Health Manager to ensure effective reporting to the Board of Management, Constituent Councils and SA Health.</li> </ul>	<ul style="list-style-type: none"> <li>Update in accordance with the customer service policy.</li> </ul>
4.17 <ul style="list-style-type: none"> <li>Provide information to the Board of Management in relation to food safety reforms and provide written responses on behalf of EHA and Constituent Councils to State Government.</li> </ul>	<ul style="list-style-type: none"> <li>Information reports provided to Board and distributed to Constituent Councils as required.</li> </ul>

**Objective 4.1**

An innovative approach to food safety through business and community education and interaction to increase awareness and understanding

**Actions****Performance Measures**

4.1.1 <ul style="list-style-type: none"> <li>Continue to provide the food safety training program for food businesses.</li> </ul>	<ul style="list-style-type: none"> <li>Continue to provide the food safety training program.</li> </ul>
4.1.2 <ul style="list-style-type: none"> <li>Continue to implement the food safety training program targeting specific food businesses that serve food to the vulnerable population and require a Food Safety Program.</li> </ul>	<ul style="list-style-type: none"> <li>Continue to provide the food safety training program.</li> </ul>
4.1.3 <ul style="list-style-type: none"> <li>Develop and maintain a comprehensive range of health education and promotional material targeting public health issues incorporating the resources of other health related agencies.</li> </ul>	<ul style="list-style-type: none"> <li>Information resources maintained.</li> </ul>
4.1.4 <ul style="list-style-type: none"> <li>Participate in State/National proactive educational initiatives that raise awareness of public health related issues amongst the community.</li> </ul>	<ul style="list-style-type: none"> <li>Number of proactive educational activities conducted each year.</li> </ul>
4.1.5 <ul style="list-style-type: none"> <li>Collate the results from the customer service survey and investigate the feedback to identify areas of improvement and development of further educational materials.</li> </ul>	<ul style="list-style-type: none"> <li>Collate the customer service feedback.</li> </ul>



# Eastern Health Authority

## Budget Financial Statements 2020/21



## Eastern Health Authority Statement of Comprehensive Income

for the year ending 30 June 2021

	Revised (Mar 20) 2019/20	Adopted Budget 2020/21
<b>Income</b>		
Council contributions	1,757,120	1,790,674
Public Health Plan / Service Review contributions	50,000	40,000
Statutory charges	105,000	180,500
User charges	329,000	272,000
Grants, subsidies and contributions	251,000	252,000
Investment income	15,000	15,000
Other income	9,000	7,000
<b>Total income</b>	<b>2,516,120</b>	<b>2,557,174</b>
<b>Expenses</b>		
Employee costs	1,713,000	1,762,000
Materials, contracts and other expenses	770,000	737,300
Finance charges	11,120	7,874
Depreciation	50,000	50,000
<b>Total expenses</b>	<b>2,544,120</b>	<b>2,557,174</b>
Operating Surplus/(Deficit)	(28,000)	–
Net gain (loss) on disposal of assets		–
Net Surplus/(Deficit)	(28,000)	–
<b>Total comprehensive income</b>	<b>(28,000)</b>	<b>–</b>

## Eastern Health Authority Statement of Cash Flows

for the year ending 30 June 2021

	Revised (Mar 20) 2019/20	Adopted Budget 2020/21
<b>Cash Flows from Operating Activities</b>		
<b>Receipts</b>		
Council contributions	1,807,120	1,830,674
Fees and other charges	105,000	180,500
User charges	329,000	272,000
Investment receipts	15,000	15,000
Grants utilised for operating purposes	251,000	252,000
Other	9,000	7,000
<b>Payments</b>		
Employee costs	(1,713,000)	(1,762,000)
Materials, contracts and other expenses	(770,000)	(737,300)
Interest expense	(11,120)	(7,874)
<b>Net cash Provided/(Used) by Operating Activities</b>	<b>22,000</b>	<b>50,000</b>
<b>Cash Flows from Financing Activities</b>		
Loans received	–	–
Loan repayments	(67,488)	69,090
<b>Net cash Provided/(Used) by Financing Activities</b>	<b>(67,488)</b>	<b>(69,090)</b>
<b>Cash Flows from Investing Activities</b>		
<b>Receipts</b>		
Sale of replaced assets	–	–
<b>Payments</b>		
Expenditure on renewal/replacements of assets	(30,000)	–
Expenditure on new/upgraded assets	–	–
Distributions paid to constituent Councils	–	–
<b>Net cash Provided/(Used) by Investing Activities</b>	<b>(30,000)</b>	<b>–</b>
<b>Net Increase/(Decrease) in cash held</b>	<b>(75,488)</b>	<b>(19,090)</b>
Cash and cash equivalents at beginning of reporting period	743,272	667,784
Cash and cash equivalents at end of reporting period	667,784	648,694

## Eastern Health Authority Statement of Financial Position

for the year ending 30 June 2021

	Revised (Mar 20) 2019/20	Adopted Budget 2020/21
<b>Current Assets</b>		
Cash and cash equivalents	667,784	648,694
Trade and other receivables	168,200	122,329
<b>Total current assets</b>	<b>835,984</b>	<b>771,023</b>
<b>Non-current Assets</b>		
Equipment	304,192	254,192
<b>Total Non-current Assets</b>	<b>304,192</b>	<b>254,192</b>
<b>Total Assets</b>	<b>1,140,176</b>	<b>1,025,215</b>
<b>Current Liabilities</b>		
Trade and other payables	149,195	197,380
Provisions	322,578	325,421
Borrowings	64,393	67,488
<b>Total Current Liabilities</b>	<b>536,166</b>	<b>590,289</b>
<b>Non-current Liabilities</b>		
Provisions	24,868	38,690
Borrowings	118,862	46,677
<b>Total Non-current Liabilities</b>	<b>143,730</b>	<b>85,367</b>
<b>Total Liabilities</b>	<b>679,896</b>	<b>675,656</b>
Net Current Assets/(Current Liabilities)	299,818	180,734
Net Assets	460,280	349,559
<b>Equity</b>		
Accumulated Surplus/(Deficit)	460,280	349,559
<b>Total Equity</b>	<b>460,280</b>	<b>349,559</b>

## Eastern Health Authority Statement of Changes in Equity

for the year ending 30 June 2021

	Revised (Mar 20) 2019/20	Adopted Budget 2020/21
<b>Accumulated Surplus</b>		
Balance at beginning of period	488,280	460,280
Net Surplus/(Deficit)	(28,000)	-
Distribution to Constituent Councils	-	-
<b>Balance at end of period</b>	<b>460,280</b>	<b>460,280</b>
<b>Total Equity</b>		
Balance at beginning of period	488,280	460,280
Net Surplus/(Deficit)	(28,000)	-
Distribution to Constituent Councils	-	-
<b>Balance at end of period</b>	<b>460,280</b>	<b>460,280</b>

