



Board of Management

30 March 2022



local councils working together to protect the health of the community



**EASTERN HEALTH AUTHORITY
BOARD OF MANAGEMENT MEETING**

WEDNESDAY 30 MARCH 2022

Notice is hereby given that a meeting of the Board of Management of the Eastern Health Authority will be via Zoom on Wednesday 30 March 2022 commencing at 6.00 pm.

A handwritten signature in black ink, appearing to read 'M Livori', is positioned above the printed name and title.

**MICHAEL LIVORI
CHIEF EXECUTIVE OFFICER**

AGENDA

EASTERN HEALTH AUTHORITY BOARD OF MANAGEMENT MEETING

WEDNESDAY 30 MARCH 2022

Commencing at 6.00 pm

1 Opening

2 Acknowledgement of Traditional Owners

We acknowledge this land that we meet on today is the traditional land of the Kurna People and that we respect their spiritual relationship with their country.

3 Opening Statement

We seek understanding and guidance in our debate, as we make decisions for the management of the Eastern Health Authority, that will impact the public health on those that reside, study, work in and visit the constituent councils that the Eastern Health Authority Charter provides services to.

4 Apologies

5 Confirmation of Minutes – 23 February 2022

6 Matters arising from the minutes

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9 Closure of Meeting

7.1 DRAFT ANNUAL BUSINESS PLAN AND BUDGETED FINANCIAL STATEMENTS FOR 2022/2023

Author: Michael Livori

Ref: AF21/85

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 clause 8 states:

8.1 Contents of the Business Plan

- a) EHA must each year develop in accordance with this clause a business plan which supports and informs its annual budget.
- b) In addition to the requirements for the Business Plan set out in clause 24(6) of Schedule 2 to the Act, the Business Plan will include:
 - (a) a description of how EHA's functions relate to the delivery of the Regional Public Health Plan and the Business Plan;
 - (b) financial estimates of revenue and expenditure necessary for the delivery of the Regional Public Health Plan;
 - (c) performance targets which EHA is to pursue in respect of the Regional Public Health Plan.
- c) A draft of the Business Plan will be provided to the Constituent Councils on a date to be determined for the endorsement of the majority of those councils.
- d) 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 its adoption.

Report

Development of the 2022/2023 EHA Annual Business Plan (ABP) to date:

- On 9 March 2022, a Budget Workshop was held to provide Board Members with information in relation to the development of the 2022/2023 ABP and Budget.
- At the workshop, the Board requested that a draft ABP and budget be formally endorsed by the Board of Management at a meeting to be held on 30 March 2022 prior to being provided to Constituent Councils for consideration.

Content of the Draft Annual Business Plan 2022/2023

The EHA Board is required to adopt an Annual Business Plan and Budget each year to outline our objectives and activities for the financial year, our financial requirements and how we will measure our performance.

This year we have responded to the feedback of Constituent Councils and delivered a streamlined Annual Business Plan and Budget (provided as attachment 1) that has a more strategic focus.

We have developed a series of strategic objectives, drawn from EHA's commitment to good governance under our Charter and our responsibilities under the *Regional Public Health and Wellbeing Plan 2020-2025*, which is prepared for and adopted by our Constituent Councils.

EHA is responsible for the 'Protection for Health' priorities in the Regional Public Health Plan, and this is reflected in our four key focus areas:

1. Public and environmental health services
2. Immunisation
3. Food safety
4. Governance and organisational development

We have prepared a Plan for the next 12 months that aligns to our strategic objectives within each focus area and guides the efficient and effective delivery of our day-to-day operations.

The Plan details the key influences that have been taken into account during its development as well as detailing the priorities that have been set for 2022-2023 (see table which follows).

Our 2022-23 Priorities

Focus Area	2022-23 Priorities
1. Public and Environmental Health Services	<ol style="list-style-type: none"> 1. Continue to assist SAPOL and SA Health with monitoring and education of relevant COVID-19 Directions. 2. Develop educational material to be communicated to Personal Care and Body Art premises on specific high-risk practices. 3. Provide feedback to SA Health on the review of Public Health Regulations review as required.
2. Immunisation	<ol style="list-style-type: none"> 1. Develop a business case for the provision of immunisation services on behalf of non-Constituent Councils. 2. Communicate and inform food businesses of the proposed legislative food management tools: food safety supervisor; food handler training and evidence that will come into effect within 12 months. 3. Collate a biennial food safety newsletter training be distributed to EHA's food businesses. 4. Provide tailored food safety training to workplaces upon request.
3. Food Safety	<ol style="list-style-type: none"> 1. Prepare a report on the outcomes from the first twelve months of the SA Health voluntary Food Star Rating Scheme. 2. Communicate and inform food businesses of the proposed legislative food management tools: food safety supervisor; food handler training and evidence that will come into effect within 12 months. 3. Collate a biennial food safety newsletter training be distributed to EHA's food businesses. 4. Provide tailored food safety training to workplaces upon request.
4. Governance and Organisational Development	<ol style="list-style-type: none"> 1. In consultation with Constituent Councils, review and revise the EHA business planning and reporting framework. 2. Work with the Audit Committee and the Board to review and revise the financial indicators in the Long-Term Financial Plan. 3. Create a Chief Executive group with Constituent Council CEOs to channel information and bilateral communication. 4. Development of targeted quarterly performance report for Constituent Councils. 5. Develop a presentation highlighting strengths and benefits of centralised service delivery model for Constituent Council Elected Members.

As we are committed to continuous improvement, EHA plans to undertake further consultation with Constituent Councils throughout the year to review and refine our strategic objectives and adopt an improved business planning and reporting framework.

A summary of our 2022-23 budget and how we are performing against our Long-Term Financial Plan is also included within this Plan.

Our performance against this Annual Business Plan will be reported in our Annual Report, which will be provided to Constituent Councils by 30 September 2023.

Budget Overview

The 2022-23 Budget projects a deficit of \$26,000.

Operating Activity	(\$'000s)
Total Income	\$2,739
Less	
Employee costs	\$2,014
Operating Expenditure	\$725
Depreciation	\$26
Net Surplus (Deficit)	\$26 Deficit

The key assumptions that have been used to prepare the 2022-23 Budget are summarised below.

- Zero (0%) increase in overall contributions required from Constituent Councils.
- Use of Revised Contribution Formula which will have differing impacts on individual councils.
- CPI of 3.9%, equivalent to Adelaide CPI forecast to June 2022 used for Enterprise Agreement increase.
- Delivery of Immunisation Service Contracts to Unley Council and Adelaide Hills Council.
- Increase (33%) to 2023 School Immunisation Program (additional year level).
- Reduced Finance Costs
- New Initiative – Development of Strategic Plan

Budgeted Financial Statements can be found on pages 21-24 of the ABP document and consist of a Statement of Comprehensive Income, Statement of Financial Position, Statement of Cash Flows and Statement of Changes in Equity.

Funding the Business Plan and the Budget

The component of income required from Constituent Councils to fund EHA operations is determined by a formula contained within the EHA Charter. In the past, included in the formula calculations was a nominal administration fee of 12.5% which was shared evenly (2.5%) per council, while the remaining costs were shared on a proportional basis, dependent upon the numbers of individual public health activities conducted by EHA on behalf of Constituent Councils.

A recommendation from the 2021 EHA Service Review Report was that the administration fee of 12.5% be broken into fixed and variable components. The fixed portion of the administration fee of 5% is now shared equally (1% per council), while the variable component is calculated on a proportional basis, dependent on activity use.

The net effect is that that larger councils now pay a slightly higher proportion of the administrative fee and smaller councils less. While the total administrative charge remains at 12.5%, individual charges now ranges from 3.44% to 1.27% as compared to the 2.5% charged previously.

There is Zero (0%) increase in overall collective contributions requested from Constituent Councils for 2022/2023.

As can also be seen in Table 1, the average increases in contributions requested for Constituent Councils over the last 9 financial years has been 1.66%.

Table 1: Global increase in contributions requested from Constituent Councils.

Combined Council Requested Contributions	Net Cost	\$ change previous year	% Change previous year
2013/2014	\$ 1,576,207		
2014/2015	\$ 1,576,605	\$ 398	0.03%
2015/2016	\$ 1,609,308	\$ 32,703	2.07%
2016/2017	\$ 1,641,055	\$ 31,747	1.97%
2017/2018	\$ 1,680,870	\$ 39,815	2.43%
2018/2019	\$ 1,723,023	\$ 42,153	2.51%
2019/2020	\$ 1,757,120	\$ 34,097	1.98%
2020/2021	\$ 1,790,674	\$ 33,554	1.91%
2021/2022	\$ 1,828,263	\$ 37,589	2.10%
2022/2023	\$ 1,828,000	\$ (263)	-0.01%
Average Annual Increase for 9 year period			1.66%

Table 2 details the contribution required from each Constituent Council using the revised formula including the change from the previous year. While there is zero (0%) overall increase in contributions, the revised formula and changes to activity proportion has the effect of redistributing costs between constituent councils.

Table 2: Constituent Council proportion and contributions for 2021/2022

Eastern Health Authority Constituent Council Contribution Calculations 2022-2023							
		Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Expenditure 2022/2023	\$ 2,726,000						
Less General Receipts 2022/2023 - Funding Statement D45	\$ 898,000						
Total Required Operating contributions 2022/2023	\$ 1,828,000						
Constituent Council Contribution proportion 2022/2023		27.04%	24.79%	31.96%	11.75%	4.47%	100.00%
Required Contribution 2022/2023	\$ 494,233	\$ 453,186	\$ 584,210	\$ 214,740	\$ 81,631	\$ 1,828,000	
Change In Contribution from previous year							
Contribution proportion 2021/2022		24.54%	26.16%	31.27%	12.36%	5.67%	100.00%
Actual Contribution	\$ 448,572	\$ 478,298	\$ 571,786	\$ 225,897	\$ 103,710	\$ 1,828,263	
Change in Contribution Proportion from previous FY		2.50%	-1.37%	0.68%	-0.61%	-1.21%	
Change in Contribution (\$)	\$ 45,661	\$ (25,112)	\$ 12,424	\$ (11,158)	\$ (22,079)	\$ (263)	
Change in contributions (%)		10.18%	-5.25%	2.17%	-4.94%	-21.29%	-0.01%

Process from here

- The Draft ABP and Budget will be provided to Constituent Councils requesting any comment by 30 May 2022.

- Constituent Council feedback and a final budget will be considered for adoption at the Board of Management meeting to be held on 29 June 2022.
- 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 2022/2023 Report is received.
2. The Draft Annual Business Plan and Budgeted Financial Statements for 2022/2023 provided as attachment 1 to this report is endorsed.

DRAFT

EASTERN HEALTH AUTHORITY
ANNUAL BUSINESS PLAN AND
BUDGET 2022/2023



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Introduction

Keeping the community healthy – About EHA

Eastern Health Authority (EHA) has a proud history of promoting and enforcing public health standards in Adelaide's eastern and inner northern suburbs.

We are a regional subsidiary established under the *Local Government Act 1999* and work across our Constituent Councils to protect the health and wellbeing of around 165,000 residents.

EHA is guided by the collective vision and commitment to public health and safety of our five Constituent Councils:

- City of Burnside
- Campbelltown City Council
- City of Norwood Payneham and St Peters
- City of Prospect
- Town of Walkerville

These councils have come together to prepare a shared Regional Public Health and Wellbeing Plan 2020-2025. EHA's role is covered in the Plan's strategic directions for Protecting Health and includes vital public and environment health services such as immunisation, hygiene and sanitation control, licensing and monitoring of Supported Residential Facilities (SRFs), and inspection and regulation of food premises.

EHA effectively manages the risk profile for public and environmental health and food safety across the region, having centralised services provided through a regional subsidiary model which is well recognised and valued by stakeholders.

With a single focus, and highly specialised and experienced staff, EHA is well-equipped to deal with the increasing diversity and complexity of public and environmental health on behalf of its Constituent Councils.

Key Statistics

Population Served	165,573
Staffing	28 Staff (19.2 FTE)
Number of Inspections Undertaken	2,114
Number of Immunisations Administered	21,730
Total Budget	\$2,739K
Grant Funding Received	\$301K
User Income Generated	\$407K
Constituent Council Contributions	\$1,828K

Developing our 2022-23 Annual Business Plan

EHA is governed by a Board of Management comprised of two members elected by each of our Constituent Councils. Our Charter is the formal agreement between the Councils about how EHA will operate and meet our obligations under the *Local Government Act 1999*.

The EHA Board is required to adopt an Annual Business Plan and Budget each year to outline our objectives and activities for the financial year, our financial requirements and how we will measure our performance.

This year we have responded to the feedback of Constituent Councils and delivered a streamlined Annual Business Plan that has a more strategic focus. We have developed a series of strategic objectives, drawn from EHA's commitment to good governance under our Charter and our responsibilities under the *Regional Public Health and Wellbeing Plan 2020-2025*, which is prepared for and adopted by our Constituent Councils. EHA is responsible for the 'Protection for Health' priorities in the Regional Public Health Plan, and this is reflected in our four key focus areas:

1. Public and environmental health services
2. Immunisation
3. Food safety
4. Governance and organisational development

In consultation with our Constituent Councils, we have prepared a Plan for the next 12 months that aligns to our strategic objectives within each focus area and guides the efficient and effective delivery of our day-to-day operations.

As we are committed to continuous improvement, EHA plans to undertake further consultation with Constituent Councils throughout the year to review and refine our strategic objectives and adopt an improved business planning and reporting framework.

A summary of our 2022-23 budget and how we are performing against our Long-Term Financial Plan is also included within this Plan.

Our performance against this Annual Business Plan will be reported in our Annual Report, which will be provided to Constituent Councils by 30 September 2023.

Key influences in 2022-23

The environment in which EHA and our Constituent Councils operate in is always changing. In preparing our 2022-23 Annual Business Plan, EHA has considered the key influences that we need to be aware of and respond to throughout the next 12 months. The major external factors that we have taken into consideration in the preparation of our Plan are summarised below.

<p>P POLITICAL</p>	<ul style="list-style-type: none"> • <i>New State Government</i> • <i>Local Government Elections – New Board</i> • <i>Changes in government / council policies</i> • <i>Revised Charter</i>
<p>E ECONOMIC</p>	<ul style="list-style-type: none"> • <i>Use of revised funding formula</i> • <i>Enterprise Agreement Labour Cost Increase</i> • <i>CPI forecast of 3.9% for 2022 FY</i> • <i>New Immunisation Service Provision Contracts</i> • <i>Increase in size of School Immunisation Program in 2023</i> • <i>Reduced Finance Costs</i>
<p>S SOCIAL</p>	<ul style="list-style-type: none"> • <i>Impacts of COVID – public and mental health, compliance activities</i> • <i>Potential for Covid Vaccines to be delivered by local government</i> • <i>Community attitudes to vaccines</i> • <i>Community expectations of environmental health</i> • <i>Community attitude towards compliance</i> • <i>Changing customer / community expectations</i> • <i>Heightened media interest in public health and safety issues</i>
<p>T TECHNOLOGICAL</p>	<ul style="list-style-type: none"> • <i>Data collection and analysis</i> • <i>Smart technology</i> • <i>Online services / immunisation bookings / information provision</i> • <i>New ways of communicating</i> • <i>Increased functionality from enhanced Immunisation Database</i>
<p>E ENVIRONMENTAL</p>	<ul style="list-style-type: none"> • <i>Ongoing Covid restrictions and impacts</i> • <i>Increased risk of emergency events</i> • <i>Impacts of climate change</i> • <i>Disease from pests</i>
<p>L LEGAL</p>	<ul style="list-style-type: none"> • <i>Revised public health regulations</i> • <i>Training and evidence requirements for Food Businesses</i> • <i>Lack of appropriate registration and licensing systems for food safety and public health matters</i> • <i>Review of Supported Residential Facility legislation.</i>

2022-2023 Annual Business Plan Overview

Our 2022-23 Priorities

Focus Area	2022-23 Priorities
1. Public and Environmental Health Services	<ol style="list-style-type: none"> 1. Continue to assist SAPOL and SA Health with monitoring and education of relevant COVID-19 Directions. 2. Develop educational material to be communicated to Personal Care and Body Art premises on specific high-risk practices. 3. Provide feedback to SA Health on the review of Public Health Regulations review as required.
2. Immunisation	<ol style="list-style-type: none"> 1. Promotion of EHA's public immunisation clinic program through channels identified in the EHA Marketing Plan. 2. Continue to ensure the effective governance and delivery of EHA's public clinic immunisation program in accordance with the National Immunisation Program (NIP) Schedule. 3. Deliver School Immunisation Program (SIP) in accordance with the SA Health Service Agreement contract. 4. Develop a business case for the provision of immunisation services on behalf of non-Constituent Councils (dependent on available opportunities)
3. Food Safety	<ol style="list-style-type: none"> 1. Prepare a report on the outcomes from the first twelve months of the SA Health voluntary Food Star Rating Scheme. 2. Communicate and inform food businesses of the proposed legislative food management tools: food safety supervisor; food handler training and evidence that will come into effect within 12 months. 3. Collate a biennial food safety newsletter training be distributed to EHA's food businesses. 4. Provide tailored food safety training to workplaces upon request.
4. Governance and Organisational Development	<ol style="list-style-type: none"> 1. In consultation with Constituent Councils, review and revise the EHA business planning and reporting framework. 2. Work with the Audit Committee and the Board to review and revise the financial indicators in the Long-Term Financial Plan. 3. Create a Chief Executive group with Constituent Council CEOs to channel information and bilateral communication. 4. Development of targeted quarterly performance report for Constituent Councils. 5. Develop a presentation highlighting strengths and benefits of centralised service delivery model for Constituent Council Elected Members.

Focus Area 1 - Public and Environmental Health Services

Strategic Objectives

- 1.1 Provide services that protect and maintain the health of the community and reduce the incidence of disease, injury or disability.
- 1.2 Increase awareness and understanding of good public and environmental health through community and business education programs.
- 1.3 Promote a safe and home-like environment for residents by ensuring quality of care in supported residential facilities.
- 1.4 Facilitate community safety and resilience through the integration of public and environmental health in emergency management planning.

2022-23 Priorities

Priority	Why this is important	Strategy
1. Continue to assist SAPOL and SA Health with monitoring and education of relevant COVID-19 State Directions.	As partners in government, local government has been asked to assist with administering the public health Directions issued by the State. EHA will continue to play a role based on advice from the Local Government Functional Support Group (LGFSG).	1.1
2. Develop educational material to be communicated to Personal Care and Body Art premises on specific high-risk practices.	Develop and provide education material to inform a high-risk industry on new skin penetration practices to help minimise the risk of clients contracting certain infectious diseases.	1.2
3. Provide feedback to SA Health on the review of Public Health Regulations review as required.	EHA's key responsibility is to administer the Public Health Act and its associated Regulations. Providing feedback to the review of the Regulations enables EHA to address what is working well and areas of change to enable these legislative tools to be effective to ensure residents are provided with a safe and healthy lifestyle.	1.1

Core services

EHA will continue to:

- Implement the elements of the Regional Public Health Plan 'Better Living, Better Health' as they apply to EHA.
- Comply with all relevant legislation and reporting requirements in undertaking assessments and investigating complaints to ensure appropriate standards are met in regulated premises:
 - Public swimming pools and spas
 - Cooling towers and warm water systems
 - Personal care and body art
 - Onsite wastewater management systems
- Respond to or coordinate multi-agency responses to public health enquiries and complaints within the built environment that give rise to public health risk.
- Provide information, advice and resources to households and businesses to assist with the management of public health risks.
- Contribute to and promote interagency management of residents impacted by hoarding and squalor.
- Develop, maintain, and distribute a comprehensive range of health education and promotion material to educate the community and promote good public health.
- Assess applications under the Supported Residential Facilities legislation and undertake inspections and investigations to ensure residents receive an appropriate level of care.
- Liaise with Constituent Councils and Eastern Adelaide Zone Emergency Management Committee to ensure integration of emergency management arrangements.
- Provide public and environmental health information to the community and businesses during emergencies to minimise public health consequences of emergency events.

Key performance indicators

We will know that we are on track to achieve our strategic objectives if we are meeting these Key Performance Indicators.

Strategic Objectives	KPIs
<p>1.1 Provide services that protect and maintain the health of the community and reduce the incidence of disease, injury or disability.</p>	<p>EHA is meeting all public and environmental inspection requirements as per relevant legislation (and / or) adopted service standards.</p> <p>All public health complaints are responded to within EHA's adopted service standards.</p>
<p>1.2 Increase awareness and understanding of good public and environmental health through community and business education programs.</p>	<p>Reduce the number of health inspections that require a follow up inspection to achieve compliance.</p> <p>All Constituent Councils are using EHA public health resources in their own communications.</p> <p>Participation in at least two proactive educational activities annually.</p>
<p>1.3 Promote a safe and home-like environment for residents by ensuring quality of care in supported residential facilities.</p>	<p>Conduct unannounced audits of all single license / non-dual Support Residential Facilities annually.</p> <p>All licensing applications are processed within the legislated timeframes.</p>
<p>1.4 Facilitate community safety and resilience through the integration of public and environmental health in emergency management planning.</p>	<p>Attend and participate in all Eastern Adelaide Zone Emergency Management Committee meetings.</p> <p>Conduct or participate in at least one business continuity or emergency management plan exercise annually.</p>

Focus Area 2 - Immunisations

Strategic Objectives

- 2.1 Contribute to the effective control of preventable disease by delivering a high-quality public clinic immunisation service that complies with all relevant legislation and standards
- 2.2 Increase number of adult and child clients and vaccinations through promotion and provision of accessible clinics, booking systems and appointment times.
- 2.3 Continue to be recognised as a trusted partner and sector leading immunisation provider of choice.
- 2.4 Advocate for appropriate funding to ensure that local government delivery of immunisation services is financially sustainable.

2022-23 Priorities

Priority	Why this is important	Strategy
1. Promotion of EHA's public immunisation clinic program through channels identified in the EHA Marketing Plan.	The development and distribution of promotional and information materials to our community increases awareness of our services and the importance of immunisation. EHA's website is an effective platform for communication of this information and other information relating to the various immunization programs and projects being delivered. Building EHA's Social Media presence through Constituent Council platforms will assist in increasing awareness of immunisation clinics and Flu Worksites.	2.1 2.2 2.3
2. Continue to ensure the effective governance and delivery of EHA's public clinic immunisation program in accordance with the National Immunisation Program (NIP) Schedule.	Immunisation is a safe and effective way of protecting people against harmful diseases that can cause serious health problems. Effective management and governance of the immunisation program delivered by our specialist immunisation nurses and our customer service team, ensures that our community receive a high quality and safe immunisation service.	2.1 2.2 2.3

3. Deliver School Immunisation Program (SIP) in accordance with the SA Health Service Agreement contract.	An effective ongoing relationship with SA Health and the High Schools located within our area is critical the delivery of a successful program. Key elements include liaising with school coordinators and SA Health regarding the implementation and evaluation of the program, community engagement with schools, submission of consent information and statistics via IRIS and the Australian Immunisation Register (AIR).	2.4
4. Develop a business case for the provision of immunisation services on behalf of non-Constituent Councils (dependent on available opportunities).	EHA can diversify its revenue sources by providing additional services where it has capacity and where there will be a net benefit to Constituent Councils.	2.3

Core services

EHA will continue to:

- Deliver a School Immunisation Program in accordance with the SA Health Service Agreement
- Ensure effective governance and delivery of a public health clinic immunisation program in accordance with relevant legislation and EHA's adopted service standards
- Promote and provide a professional and quality Workplace Immunisation Program on a fee for service basis
- Promote EHA's public immunisation clinic program in accordance with the EHA Marketing Plan
- Provide Constituent Councils with educational and promotional materials relating to immunisation
- Promote EHA's online booking system for immunisation appointments
- Participate in discussions with SA Health and the Local Government Association about funding and support for the delivery of local government immunisation services
- EHA services have not historically been included in the Commonwealth's current roll out of COVID-19 vaccinations. EHA will however continue its regular contact with SA Health to enquire about future involvement in delivery of the COVID-19 vaccine in both our SIP and NIP programs
- Facilitate the Adelaide Public Health Network Community Engagement Project with the aim of increasing immunisation coverage in the Adelaide metropolitan region.

Key performance indicators

We will know that we are on track to achieve our strategic objectives if we are meeting these Key Performance Indicators.

<i>Strategic Objectives</i>	<i>KPIs</i>
2.1 Contribute to the effective control of preventable disease by delivering a high-quality public clinic immunisation service that complies with all relevant legislation and standards	<p>Annual clinical performance evaluation completed.</p> <p>Submit all reports within the required timeframes.</p>
2.2 Continue to increase number of adult and child clients and vaccinations through promotion and provision of accessible clinics, booking systems and appointment times.	<p>Maintain or increase the number of public immunisation clinics offered by EHA annually.</p> <p>All eligible students are offered vaccinations through the School Immunisation Program and all absent students are invited to EHA public clinics to catch up.</p> <p>70% of bookings are made via the Immunisation Online Booking System.</p> <p>Clinic Timetable reviewed and published by 30 November.</p>
2.3 Continue to be recognised as a trusted partner and sector leading immunisation provider of choice.	<p>Renewal rate for EHA Workplace Immunisation Program is not less than 70%</p> <p>Satisfy all requirements of the SA Health Service Agreement contract.</p>
2.4 Advocate for appropriate funding to ensure that local government delivery of immunisation services is financially sustainable.	<p>No reduction in the level of State Government funding provided to EHA to deliver immunisation services.</p>

Focus Area 3 - Food Safety

Strategic Objectives

- 3.1 Contribute to the effective control of preventable illness by monitoring and enforcing food safety standards and investigating food related complaints on behalf of Constituent Councils.
- 3.2 Be proactive in building positive relationships with food businesses and provide training and resources to encourage and support compliance with food safety standards.
- 3.3 Build community awareness of food safety issues by leading or participating in food safety education projects and partnerships.

2022-23 Priorities

Priority	Why this is important	Strategy
1. Prepare a report on the outcomes from the first twelve months of the SA Health voluntary Food Star Rating Scheme.	EHA formally commenced its participation in the SA Health voluntary Food Star Rating Scheme in July 2021. Undertaking a review in 2022/23, including feedback from food businesses, will help EHA to monitor the impact the scheme is having on food safety compliance and consumer awareness and identify any suggested improvements to the Scheme.	3.1 3.2
2. Communicate and inform food businesses of the proposed legislative food management tools: food safety supervisor; food handler training and evidence that will come into effect within 12 months.	On 3 March 2022 LGA notified that FSANZ has assessed a proposal to consider food safety management tools for the food service and retail sectors. In summary there are three proposed food safety management tools: food safety supervisor; food handler training and evidence. Following feedback, the proposed Standard 3.2.2A is stated to commence 12 months after gazettal, meaning that businesses and food regulators will have 12 months to implement them. During this process EHA's feedback on the proposed standard and communication to the respective food businesses is critical in ensuring they are prepared and understand the expected changes.	3.1 3.2

3. Collate a biennial food safety newsletter training be distributed to EHA's food businesses.	A newsletter provides communication to a target audience. It enables EHA to communicate to food businesses on any key legislative updates, promotes positive food safety culture, spotlights safe food safety practices and new initiatives within the industry. The newsletter also enables food businesses to recognise that EHA services extends to education providing food businesses with confidence to contact EHA regarding food safety questions and advice.	3.1 3.2 3.3
4. Provide tailored food safety training to workplaces upon request.	Extend the food safety training program to workplaces. This enables a training program to be tailored specifically to the food business. This type of training addresses food safety practices specific to the workplace and allows the staff to engage in a proactive manner.	3.2 3.3 3.4

Core services

EHA will continue to:

- Monitor and maintain a register of all food businesses operating within EHA's jurisdiction
- Conduct routine food business assessments using an appropriate food safety rating tool to ensure compliance with the *Food Act 2001* and Food Safety Standards.
- Undertake enforcement action in relation to breaches of the *Food Act 2001* and Food Safety Standards and follow up actions to ensure compliance is achieved
- Implement the voluntary SA Health Food Star Rating Scheme
- Respond to food related customer complaints in accordance with customer service standards and SA Health guidelines and maintain a register of all food related complaints
- Respond to food recalls in accordance with SA Health recommendations
- Engage with applicants and provide advice to Constituent Councils about development applications and the structural fit out of new food businesses
- Assess risks, conduct safety assessments where required and provide educational materials for temporary food businesses and temporary events
- Provide reports on food safety assessments investigations and actions to the Board, Constituent Councils and SA Health
- Provide a food safety training program for new businesses
- Develop and maintain a comprehensive range of health education and promotion material on food safety related issues.

Key performance indicators

We will know that we are on track to achieve our strategic objectives if we are meeting these Key Performance Indicators.

Strategic Objectives	KPIs
<p>3.1 Contribute to the effective control of preventable illness by monitoring and enforcing food safety standards and investigating food related complaints on behalf of Constituent Councils.</p>	<p>EHA is meeting all food safety inspection requirements for higher risk food business determined by the SA Food Business Risk Classification Framework and performance of the food business.</p> <p>All food safety complaints are investigated in accordance with EHA service standards and SA Health instructions.</p>
<p>3.2 EHA is proactive in building positive relationships with food businesses and provide training and resources to encourage and support compliance with food safety standards.</p>	<p>Reduce the number of routine food premise inspections requiring a follow up inspection to address non-compliance.</p> <p>The average rating given under the SA Health Food Star Rating Scheme in increasing annually</p> <p>All new food businesses receive an EHA Welcome Pack following notification.</p>
<p>3.3 Build community awareness of food safety issues by leading or participating in food safety education projects and partnerships.</p>	<p>Provide food safety training to at least 75 participants annually.</p> <p>All Constituent Councils are using EHA food safety education materials in their communications.</p>

Focus Area 4 - Governance and Organisational Development

Strategic Objectives

- 4.1 Achieve best practice standards of governance in accordance with the EHA Charter and relevant legislation.
- 4.2 Keep Constituent Councils informed of the services and actions performed by EHA on their behalf and the community outcomes being achieved.
- 4.3 Demonstrate leadership within the local government sector as an advocate for public health reforms that benefit the community and councils.
- 4.4 Provide a safe, healthy and rewarding working environment.

2022-23 Priorities

Priority	Why this is important	Strategy
1. In consultation with Constituent Councils, review and revise the EHA business planning and reporting framework.	Feedback from Constituent Councils highlights that we can improve the way we plan our services and measure the outcomes we deliver to councils and the community. The new format of this Annual Business Plan is the start of this process and further improvements can be made by developing and adopting a new planning and reporting framework.	4.1 4.2
2. Work with the Audit Committee and the Board to review and revise the financial indicators in the Long-Term Financial Plan.	The EHA Long Term Financial Plan contains financial sustainability measures that are consistent with those used by Councils. As a subsidiary with a clearly defined focus on delivering public health services, we can explore whether these are the most meaningful measures for EHA to use in its new business planning and reporting framework.	4.1
3. Create a Chief Executive group with Constituent Council CEOs to channel information and bilateral communication.	Feedback from Constituent Councils indicated that regular executive communication at a group and individual level between EHA and its Constituent Councils would strengthen relationships.	4.2

4. Development of targeted quarterly performance reports for Constituent Councils.	Regular targeted performance reporting focusing on high-level EHA service provision information and pertinent service delivery expectations for each constituent council will assist in councils having comfort that their legislative requirements relating to public health are being appropriately managed and also provide a level of understanding in relation to the breadth of services provided by EHA.	4.2
5. Develop a presentation highlighting strengths and benefits of centralised service delivery model for Constituent Council Elected Members.	A presentation provided to Constituent Council Elected Members and/or Executive which highlight the benefits of EHA as a centralised service delivery model provider will assist with strategic council engagement and relationships.	4.2

Core services

EHA will continue to:

- Achieve full compliance with the requirements of the EHA Charter and the Local Government Act 1999.
- Provide administrative assistance to the Public Health Plan Advisory Committee
- Prepare and monitor a Long-Term Financial Plan
- Prepare, monitor, and implement a Corporate Risk Plan
- Make submissions on public health reforms on behalf of Constituent Councils
- Compile and submit all periodic reports on EHAs activities required by legislation (Public Health Act, Food Act, Safe Drinking Water Act etc.)
- Explore the potential for the expansion of service provision to areas outside of current Constituent Councils
- Expand the functionality of Health Manager and Mobile Health to improve inspection, compliant and administrative efficiency and reporting capabilities
- Foster team cohesiveness and support effective teamwork
- Provide systems for a safe working environment with appropriate Work Health and Safety (WHS) practices in place
- Provide professional development opportunities to staff and encourage membership of relevant professional organisations.

Key performance indicators

We will know that we are on track to achieve our strategic objectives if we are meeting these Key Performance Indicators.

Strategic Objectives	KPIs
4.1 Achieve best practice standards of governance in accordance with the EHA Charter and relevant legislation.	No instances of non-compliance with the EHA Charter. No instances of non-compliance with the reporting requirements to external bodies required by legislation. A new business planning and reporting framework is adopted by the Board and implemented by 30 June 2023. Ongoing implementation of all risk controls in the EHA Corporate Risk Plan.
4.2 Keep Constituent Councils informed of the services and actions performed by EHA on their behalf and the community outcomes being achieved.	Meet with Constituent Council nominated contacts at least four times per year. Respond to all Constituent Council requests for information within 5 business days. Provide an Annual Report to Constituent Councils by 30 September. All Constituent Councils participate in EHA's Annual Business Plan and Budget setting process.
4.3 Demonstrate leadership within the local government sector as an advocate for public health reforms that benefit the community and councils.	Written submissions on public health reform proposals are endorsed by the Board. Attend meetings of the Environmental Managers Forum.
4.4 Provide a safe, healthy and rewarding working environment.	WHS is an agenda item at all EHA staff meetings. Annual staff training and development budget is not less than 1.75% of total budget. Staff portfolios are reviewed annually as part of a performance development framework.

Budget Overview

The forecast for the 2022/2023 financial year is that EHA’s operating result will be a deficit of \$49,000. The deficit is an accounting deficit (depreciation and amortisation treatments for leases) and the contributions requested from Constituent Councils will provide for a balanced operating cash budget.

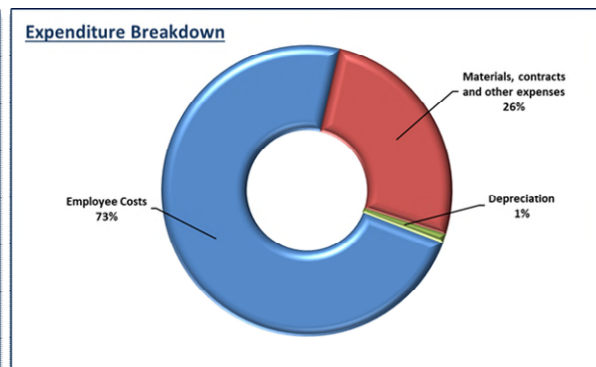
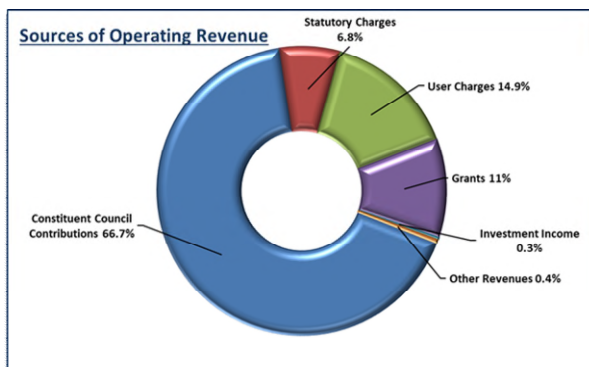
A total of \$1,828,000 will be raised through contributions from our Constituent Councils

This represents a zero (0%) increase in overall collective contributions from the previous year.

Operating Activity	(\$'000s)
Total Income	\$2,739
Less	
Employee costs	\$2,014
Operating Expenditure	\$725
Depreciation	\$131
Net Surplus (Deficit)	(\$49) Deficit

The key assumptions that have been used to prepare the 2022-23 Budget are summarised below.

- Use of Revised Contribution Formula which will have differing impacts on individual councils.
- CPI of 3.9%, equivalent to Adelaide CPI forecast to June 2022 used for Enterprise Agreement increase.
- Delivery of Immunisation Service Contracts to Unley Council and Adelaide Hills Council.
- Increase (33%) to 2023 School Immunisation Program (additional year level).
- Reduced Finance Costs
- New Initiative – Development of Strategic Plan





Funding the Annual Business Plan

The component of income required from Constituent Councils to fund EHA operations is determined by a formula contained within the EHA Charter. In the past, included in the formula calculations was a nominal administration fee of 12.5% which was shared evenly (2.5%) per council, while the remaining costs were shared on a proportional basis, dependent upon the numbers of individual public health activities conducted by EHA on behalf of Constituent Councils.

A recommendation from the 2021 EHA Service Review Report was that the administration fee of 12.5% be broken into fixed and variable components. The fixed portion of 5% is now shared equally (1% per council), while the variable component is calculated on a proportional basis. The net effect is that that larger councils pay a slightly higher proportion of the administrative fee and smaller councils less. While the total administrative charge remains at 12.5%, individual charges now ranges from 3.44% to 1.27% as compared to the 2.5% charged previously.

Financial Sustainability

The following financial ratios are used to monitor the financial performance of the EHA in its Long-Term Financial Plan (LTFP). Overall, the ratios show that that EHA is on track to achieve its LTFP targets.

During FY2023, EHA is committed to reviewing its current financial sustainability indicators and presenting these to both the Audit Committee and the Board for consideration.

Indicator	LTFP Projections 2023	2022-23 Annual Budget Estimate	Comments
Operating Surplus / (Deficit) - \$'000	(17,556)	(49,000)	
Operating Surplus Ratio - %	(1)%	(1)%	
Net Financial Liabilities - \$'000	457,429	354,456	
Net Financial Liabilities Ratio - %	18.1%	12.94%	

2022-23 Budget

EASTERN HEALTH AUTHORITY STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDING 30 June 2023		
REVISED BUDGET 2021/2022		DRAFT BUDGET 2022/2023
	INCOME	
1,828,263	Council Contributions	1,828,000
181,500	Statutory Charges	185,000
326,000	User Charges	407,000
254,000	Grants, subsidies and contributions	301,000
10,000	Investment Income	7,000
11,000	Other Income	11,000
2,610,763	TOTAL INCOME	2,739,000
	EXPENSES	
1,852,000	Employee Costs	2,014,000
550,000	Materials, contracts and other expenses	608,000
43,000	Finance Charges	35,000
145,277	Depreciation	131,000
2,590,277	TOTAL EXPENSES	2,788,000
20,486	Operating Surplus/(Deficit)	(49,000)
	Net gain (loss) on disposal of assets	-
20,486	Net Surplus/(Deficit)	(49,000)
20,486	Total Comprehensive Income	(49,000)

EASTERN HEALTH AUTHORITY STATEMENT OF CASH FLOWS		
FOR THE YEAR ENDING 30 June 2023		
REVISED BUDGET 2021/2022		DRAFT BUDGET 2022/2023
	CASHFLOWS FROM OPERATING ACTIVITIES	
	Receipts	
1,828,263	Council Contributions	1,828,000
181,500	Fees & other charges	185,000
326,000	User Charges	407,000
10,000	Investment Receipts	7,000
254,000	Grants utilised for operating purposes	301,000
11,000	Other	11,000
	Payments	
(1,852,000)	Employee costs	(2,014,000)
(550,000)	Materials, contracts & other expenses	(608,000)
(43,000)	Finance Payments	(35,000)
165,763	Net Cash Provided/(Used) by Operating Activities	82,000
	CASH FLOWS FROM FINANCING ACTIVITIES	
	Loans Received	
-	Loans Received	-
(76,131)	Repayment of Borrowings	(38,391)
(102,873)	Repayment of Finance Lease Liabilities	(82,000)
(179,004)	Net Cash Provided/(Used) by Financing Activities	(120,391)
	CASH FLOWS FROM INVESTING ACTIVITIES	
	Receipts	
	Sale of Replaced Assets	-
	Payments	
	Expenditure on renewal / replacements of assets	-
	Expenditure on new / upgraded assets	-
	Distributions paid to constituent Councils	-
-	Net Cash Provided/(Used) by Investing Activities	-
89,632	NET INCREASE (DECREASE) IN CASH HELD	(38,391)
782,896	CASH AND CASH EQUIVALENTS AT BEGINNING OF REPORTING PERIOD	872,528
872,528	CASH AND CASH EQUIVALENTS AT END OF REPORTING PERIOD	834,137

EASTERN HEALTH AUTHORITY STATEMENT OF FINANCIAL POSITION		
FOR THE YEAR ENDING 30 June 2023		
REVISED BUDGET 2021/2022		DRAFT BUDGET 2022/2023
	CURRENT ASSETS	
872,528	Cash and Cash Equivalents	834,137
188,901	Trade & Other Receivables	188,901
1,061,429	TOTAL CURRENT ASSETS	1,023,038
	NON-CURRENT ASSETS	
1,155,437	Infrastructure, property, plant and equipment	1,024,437
1,155,437	TOTAL NON-CURRENT ASSETS	1,024,437
2,216,866	TOTAL ASSETS	2,047,475
	CURRENT LIABILITIES	
163,940	Trade & Other Payables	163,940
307,903	Provisions	307,903
177,021	Borrowings	119,871
648,864	TOTAL CURRENT LIABILITIES	591,714
	NON-CURRENT LIABILITIES	
21,716	Provisions	21,716
960,556	Borrowings	897,315
982,272	TOTAL NON-CURRENT LIABILITIES	919,031
1,631,136	TOTAL LIABILITIES	1,510,745
412,565	NET CURRENT ASSETS/(CURRENT LIABILITIES)	431,324
585,730	NET ASSETS	536,730
	EQUITY	
585,730	Accumulated Surplus/(Deficit)	536,730
585,730	TOTAL EQUITY	536,730

EASTERN HEALTH AUTHORITY STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDING 30 June 2023		
REVISED BUDGET 2021/2022		DRAFT BUDGET 2022/2023
	ACCUMULATED SURPLUS	
565,244	Balance at beginning of period	585,730
20,486	Net Surplus/(Deficit)	(49,000)
585,730	BALANCE AT END OF PERIOD	536,730
	TOTAL EQUITY	
565,244	Balance at beginning of period	585,730
20,486	Net Surplus/(Deficit)	(49,000)
585,730	BALANCE AT END OF PERIOD	536,730