



Board of Management

14 May 2025



local councils working together to protect the health of the community



**EASTERN HEALTH AUTHORITY
BOARD OF MANAGEMENT MEETING**

WEDNESDAY 14 May 2025

Notice is hereby given that a meeting of the Board of Management of the Eastern Health Authority will be held at Eastern Health Authority Offices, 101 Payneham Road, St Peters on Wednesday 14 May 2025 commencing at 6:30 pm.

A light meal will be served from 5:30 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 14 May 2025

Commencing at 6:30 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 Minutes

Recommendations

That the minutes of the meeting of the Board of Management Meeting held on Wednesday 19 February 2025 as printed and circulated be taken as read and confirmed.

That the minutes for the Circular Resolution for the Draft Annual Business Plan and Financial Statements on Thursday 20 March 2025 as printed and circulated be taken as read and confirmed on Monday 31 March 2025.

Agenda Continued

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That the minutes for the Circular Resolution for the Reappointment of Independent Member of the Audit Committee on Thursday 20 March 2025 as printed and circulated be taken as read and confirmed Monday 31 March 2025.

6 Matters arising from the minutes

7 Administration Report

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10 Closure of Meeting

EASTERN HEALTH AUTHORITY

Minutes of the Meeting of the Board of Management of Eastern Health Authority (EHA) held at EHA Offices, 101 Payneham Road, St Peters on 19 February 2025 commencing at 6:30pm.

MEMBERS PRESENT:

Cr C Granozio, Cr K Moorhouse	Norwood, Payneham & St Peters
Cr P Cornish, Cr M Daws	Burnside
M Hammond	Campbelltown
Cr K Barnett, Cr T Nguyen	Prospect
Cr J Allanson	Corporation of the Town of Walkerville

In attendance:

M Livori	Chief Executive Officer
A Fahey	Manager Administration and Compliance
N Conci	Manager Environmental Health
M Gibbs	Senior Environmental Health Officer

1 OPENING:

The meeting was declared open by the M Livori at 6:34pm.

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:

Cr M Noble	Campbelltown
Cr J Nenke	Corporation of the Town of Walkerville

5 CONFIRMATION OF MINUTES:

Cr J Allanson moved:

The minutes of the meeting of the Board held on 6 November 2024 be taken as read and confirmed.

Seconded by Cr K Barnett

CARRIED UNANIMOUSLY

1: 022025

6 MATTERS ARISING FROM THE MINUTES:

Nil

7 ADMINISTRATION REPORT

**7.1 ELECTION OF THE EASTERN HEALTH AUTHORITY BOARD OF MANAGEMENT
CHAIR AND DEPUTY CHAIR**

Cr K Moorhouse moved:

That:

1. The Election of the EHA Board of Management Chair and Deputy Chair report is received.
2. The term of office for the position of Chair and Deputy Chair of EHA is 1 year in accordance with clause 2.5.2 of the EHA Charter.
3. EHA determines that the method of choosing a Chair and Deputy Chair be by an election process.
4. The method of election is by secret ballot.
5. EHA adopt a first past the post method of voting.
6. The CEO be appointed Returning Officer for the election.
7. If at any stage during the process, there is an equal number of votes the Returning Officer will decide the issue by the drawing of lots. The name of the candidate/s withdrawn will be the one/s excluded from the ballot.
8. Upon the completion of the election, the Returning Officer be authorised to declare the successful candidate elected to the position of Chair and Deputy Chair.
9. Upon the declaration of the Returning Officer the candidate is appointed to the position of Chair and Deputy Chair respectively for the term of office determined by this resolution.

Seconded by Cr P Cornish

CARRIED UNANIMOUSLY 2: 022025

The CEO called for nominations for the position of Chair. Cr K Moorhouse nominated Cr P Cornish, who indicated acceptance of the nomination. As no further nominations were received, the CEO announced that Cr P Cornish had been elected to the position of Chair.

The CEO called for nominations for the position of Deputy Chair. Cr P Cornish nominated Cr K Moorhouse, who accepted the nomination. As no further nominations were received, the CEO announced that Cr K Moorhouse had been elected to the position of Deputy Chair.

7.2 FINANCE REPORT AND SECOND (DECEMBER 2024) BUDGET REVIEW FOR 2024/2025

Cr C Granozio moved:

That:

1. The Finance Report and Second (December 2024) Budget Review Report for 2024/2025 be received.

Seconded by Cr K Barnett

CARRIED UNANIMOUSLY 3: 022025

7.3 SIGNATORIES FOR BUSINESS BANKING ACCOUNT AND ELECTRONIC PAYMENTS

Cr M Daws moved:

That:

1. The report regarding Signatories for Business Banking Accounts is received.
2. Amanda Fahey (Manager Administration and Compliance) is approved as a signatory for Eastern Health Authority Business Banking accounts and Kristen Paparella is removed as an approved signatory.

Seconded by M Hammond

CARRIED UNANIMOUSLY 4: 022025

7.4 DEVELOPMENT OF ANNUAL BUSINESS PLAN FOR 2025/2026

Cr C Granozio moved:

That:

1. The Development of the Annual Business Plan for 2025/2026 report is received.
2. The process for the Development of the Annual Business Plan for 2025/2026 is noted.

Seconded by Cr J Allanson

CARRIED UNANIMOUSLY 5: 022024

7.5 LEASE AGREEMENT FOR OCCUPATION AT THE ST PETERS TOWN HALL COMPLEX

Cr K Moorhouse moved:

That:

1. The Lease Agreement for Occupation at the St Peters Town Hall Complex report is received.
2. The Chair and Chief Executive Officer be authorised to sign and execute the lease.

Seconded by M Hammond

CARRIED UNANIMOUSLY 6: 022025

7.6 AUSTRALIAN CYBER SECURITY CENTRE ESSENTIAL EIGHT MATURITY ASSESSMENT

Cr K Barnett moved:

That:

The Australian Cyber Security Centre Essential Eight Maturity Assessment Report is received.

Seconded by Cr T Nguyen

CARRIED UNANIMOUSLY 7: 022025

8 INFORMATION REPORTS

8.1 ENVIRONMENTAL HEALTH ACTIVITY REPORT

Cr M Daws moved:

That:

1. The Environmental Health Activity Report is received.

Seconded by Cr T Nguyen

CARRIED UNANIMOUSLY 8: 022025

8.2 IMMUNISATION ACTIVITY REPORT

Cr K Moorhouse moved:

That:

1. The Immunisation Services Report is received.

Seconded by Cr T Nguyen

CARRIED UNANIMOUSLY 9: 022025

9 CORRESPONDENCE

Cr Whittington Acknowledgement and Appreciation Letter.

10 CLOSURE OF MEETING:

The Chairperson, Cr P Cornish, declared the meeting closed at 7:17pm.

The foregoing minutes were printed and circulated to EHA Members and member Councils on 21 February 2025.

Cr P Cornish

CHAIRPERSON

EASTERN HEALTH AUTHORITY

Minute of a decision by the Board of Management of Eastern Health Authority (EHA) made via circular resolution.

Resolution Proposed by Circular Resolution

1.0 DRAFT ANNUAL BUSINESS PLAN AND BUDGETED FINANCIAL STATEMENTS FOR 2025/2026

1. The Draft Annual Business Plan and Budgeted Financial Statements for 2025/2026 Report is received.
2. The Draft Annual Business Plan and Budgeted Financial Statements for 2025/2026 provided as attachment 1 to this report is endorsed.

There were ten (10) votes in favour, zero (0) votes against. Nine (9) votes were received before the prescribed date and time in the notice. One (1) vote was received after the prescribed date and time in the notice of Thursday 27 March 2025 5:00pm.

Votes received before prescribed date and time	Vote
Cr P Cornish	Yes
Cr M Daws	Yes
Cr M Noble	Yes
Cr K Barnett	Yes
Cr J Allanson	Yes
Cr K Moorhouse	Yes
Cr C Granozio	Yes
M Hammond	Yes
Cr T Nguyen	Yes
Votes received after prescribed date and time	
Cr J Nenke	Yes



Date: 31 March 2025

Michael Livori

Chief Executive Officer

EASTERN HEALTH AUTHORITY

Minute of a decision by the Board of Management of Eastern Health Authority (EHA) made via circular resolution.

Resolution Proposed by Circular Resolution

2.0 REAPPOINTMENT OF INDEPENDENT MEMBER FOR THE EASTERN HEALTH AUTHORITY AUDIT COMMITTEE

1. The report regarding reappointment of an Independent Member to Eastern Health Authority Audit Committee is received.
2. Madeleine Vezis is reappointed as an Independent Member to the EHA Audit Committee with the term of appointment concluding on 2 August 2026.

There were ten (10) votes in favour, zero (0) votes against. Nine (9) votes were received before the prescribed date and time in the notice. One (1) vote were received after the prescribed date and time in the notice of Thursday 27 March 2025 5:00pm.

Votes received before prescribed date and time	Vote
Cr P Cornish	Yes
Cr M Daws	Yes
Cr K Barnett	Yes
Cr J Nenke	Yes
Cr M Noble	Yes
Cr J Allanson	Yes
Cr K Moorhouse	Yes
M Hammond	Yes
Cr T Nguyen	Yes
Votes received after prescribed date and time	
Cr C Granozio	Yes



Date: 31 March 2025

Michael Livori

Chief Executive Officer

7.1 FINANCE REPORT AND THIRD AND FINAL (MARCH 2025) BUDGET REVIEW FOR 2024/2025

Author: Michael Livori

Ref: AF24/26

Summary

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

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

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

This report provides the third and final of the budget reviews required in accordance with regulation 9 (1) and relates to the financial performance of EHA between 1 July 2024 and 31 March 2025. It provides the opportunity to compare the adopted budget with revised projections of income and expenditure for the 2024/2025 financial year.

Report

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

Eastern Health Authority - Financial Statement (Level 3) 1 July 2024 to 31 March 2025				
	Actual	Budgeted	\$ Variation	% Variation
Total Operating Expenditure	\$1,902,692	\$2,060,721	(\$158,029)	-8%
Total Operating Income	\$2,536,667	\$2,590,233	(\$53,566)	-2%
Operating Result	\$633,975	\$529,512	\$104,463	20%

The report shows that for the reporting period income was \$53,566 (2%) less than budgeted and expenditure was \$158,029 (8%) less than budgeted.

The net result is a positive variation of \$104,463 on the budgeted year to date comparative operating result.

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

Summary Table of Funding Statement Variations				
Favourable variances are shown in black and unfavourable variances are shown in red .				
Description	YTD Budget	YTD Actual	YTD Variation	Comment
Operational Income				
Food Inspection Fees	\$97,364	\$91,046	(\$6,318)	Decrease in YTD budgeted inspections. Delay in appointment of staff to budgeted positions.
Fines	\$29,997	\$15,075	(\$14,922)	Reduction in YTD fines issued.
Food Auditing	\$86,229	\$54,517	(\$31,712)	Timing of Audits.
Interest	\$27,750	\$37,960	\$10,210	Additional Interest Income
Income variations requested				Nil
Operational Expenditure				
Employee Costs	\$1,479,518	\$1,155,743	(\$142,124)	Delay in appointment of staff to budgeted positions.
IT Licences	\$44,300	\$51,625	\$7,325	Increase costs for Cyber Security and increased Cloud hosting costs
Fringe Benefits Tax	\$10,500	\$16,830	\$6,330	Payment of prior year balance
Legal	\$14,994	\$9,330	(\$5,664)	Less legal advice required by EHA
Expenditure variations requested				Nil

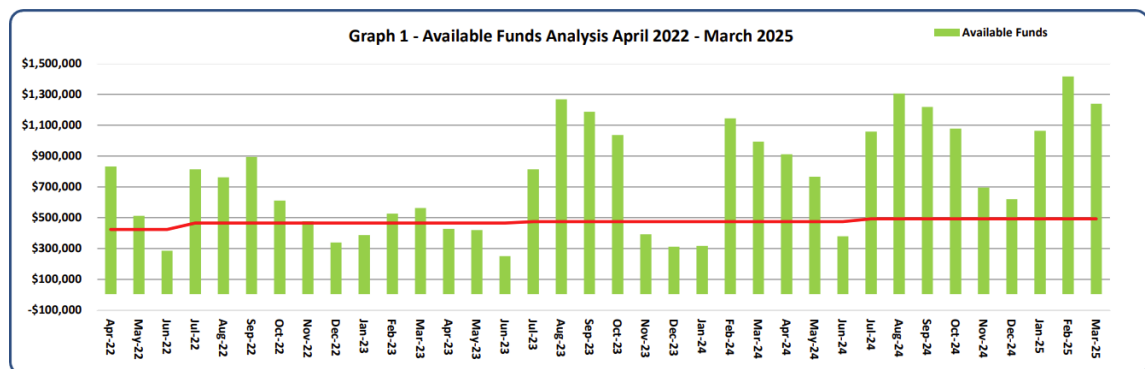
There are no operational budget variations requested or required in this review.

Cash Management

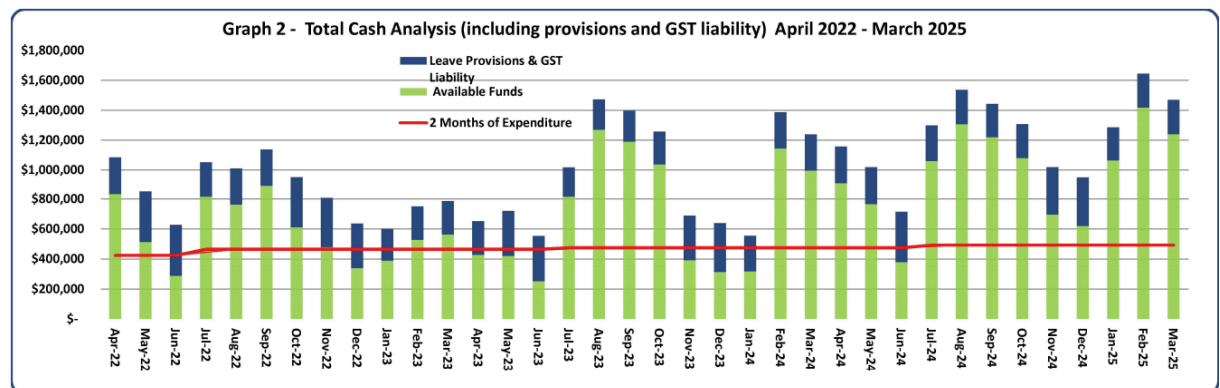
On 31 March 2025 available funds were \$1,181,428 in comparison with \$576,978 on 31 December 2024.

The red line in both graphs indicates the target minimum levels of cash that are recommended to be held for working capital (equivalent to 2 months expenditure). The graphs show that the lowest levels of cash available in the annual cash cycle have generally maintained this target.

Graph 1 which follows details the level of available funds (total cash minus leave provisions and GST liability) for the preceding 2-year period.



Graph 2 below details the total level of cash on hand including leave provisions and GST liability.



RECOMMENDATION

That:

1. The Finance Report and Third and Final (March 2025) Budget Review for 2024/2025 Report be received.
2. The revised 2024/2025 Budget provided as attachment 2 to this report is endorsed.

Eastern Health Authority - Financial Statement (Level 3)				
1 July 2024 to 31 March 2025				
Income	Actual	Budgeted	\$ Variation	% Variation
Constituent Council Income				
City of Burnside	\$588,959	\$588,959	\$0	0%
City of Campbelltown	\$530,383	\$530,383	\$0	0%
City of NPS	\$641,814	\$641,814	\$0	0%
City of Prospect	\$248,997	\$248,997	\$0	0%
Town of Walkerville	\$83,947	\$83,947	\$0	0%
Total Constituent Council Contributions	\$2,094,100	\$2,094,100	\$0	0%
Statutory Charges				
Food Inspection fees	\$91,046	\$97,364	(\$6,318)	-6%
Legionella registration and Inspection	\$4,262	\$6,372	(\$2,110)	-33%
SRF Licenses	\$0	\$1,800	(\$1,800)	-100%
Fines & Expiation Fees	\$15,075	\$29,997	(\$14,922)	-50%
Total Statutory Charges	\$110,383	\$135,533	(\$25,150)	-19%
User Charges				
Immunisation: Service Provision	\$38,500	\$39,250	(\$750)	-2%
Immunisation: Clinic Vaccines	\$70,379	\$70,830	(\$451)	-1%
Food Auditing	\$54,517	\$86,229	(\$31,712)	-37%
Total User Charges	\$163,396	\$196,309	(\$32,913)	-17%
Grants, Subsidies, Contributions				
Immunisation School Program	\$110,645	\$114,500	(\$3,855)	-3%
Immunisation:ACIR	\$19,836	\$16,794	\$3,042	18%
Total Grants, Subsidies, Contributions	\$130,481	\$131,294	(\$813)	-1%
Investment Income				
Interest on investments	\$37,960	\$27,750	\$10,210	37%
Total Investment Income	\$37,960	\$27,750	\$10,210	37%
Other Income				
Motor Vehicle re-imbursements	\$0	\$0	\$0	N/A
Sundry Income	\$347	\$5,247	(\$4,900)	-93%
Total Other Income	\$347	\$5,247	(\$4,900)	-93%
Total Income	\$2,536,667	\$2,590,233	(\$53,566)	-2%

Eastern Health Authority - Financial Statement (Level 3) 1 July 2024 to 31 March 2025				
Expenditure	Actual	Budgeted	\$ Variation	% Variation
Employee Costs				
Salaries & Wages	\$1,155,743	\$1,282,296	(\$126,553)	-10%
Superannuation	\$129,431	\$147,722	(\$18,291)	-12%
Workers Compensation	\$13,842	\$15,000	(\$1,158)	-8%
Employee Leave - LSL Accruals	\$36,878	\$31,500	\$5,378	17%
Medical Officer Retainer	\$1,500	\$3,000	(\$1,500)	-50%
Total Employee Costs	\$1,337,394	\$1,479,518	(\$142,124)	-10%
Prescribed Expenses				
Auditing and Accounting	\$15,193	\$13,250	\$1,943	15%
Financial Support Services	\$24,295	\$25,000	(\$705)	-3%
Insurance	\$46,027	\$42,000	\$4,027	10%
Maintenance	\$53,410	\$55,664	(\$2,254)	-4%
Vehicle Leasing/maintenance	\$60,020	\$61,488	(\$1,468)	-2%
Total Prescribed Expenses	\$198,945	\$197,402	\$1,543	1%
Rent and Plant Leasing				
Electricity	\$8,523	\$11,997	(\$3,474)	-29%
Plant Leasing Photocopier	\$1,724	\$1,800	(\$76)	-4%
Rent	\$90,651	\$90,000	\$651	1%
Water	\$0	\$225	(\$225)	-100%
Gas	\$0	\$2,025	(\$2,025)	-100%
Total Rent and Plant Leasing	\$100,898	\$106,047	(\$5,149)	-5%
IT Licensing and Support				
IT Licences	\$51,625	\$44,300	\$7,325	17%
IT Support	\$45,100	\$41,251	\$3,849	9%
Internet	\$4,737	\$4,500	\$237	5%
IT Other	\$276	\$1,494	(\$1,218)	-82%
Total IT Licensing and Support	\$101,738	\$91,545	\$10,193	11%
Administration				
Administration Sundry	\$9,532	\$7,497	\$2,035	27%
Accreditation Fees	\$2,597	\$2,997	(\$400)	-13%
Governance Expenses	\$4,733	\$9,000	(\$4,267)	-47%
Bank Charges	\$2,698	\$3,744	(\$1,046)	-28%
Public Health Sundry	\$1,960	\$3,744	(\$1,784)	-48%
Fringe Benefits Tax	\$16,830	\$10,500	\$6,330	60%
Health Promotion	\$2,430	\$3,000	(\$570)	-19%
Legal	\$9,330	\$14,994	(\$5,664)	-38%
Printing & Stationery & Postage	\$13,080	\$16,497	(\$3,417)	-21%
Telephone	\$13,206	\$13,500	(\$294)	-2%
Occupational Health & Safety	\$5,012	\$10,001	(\$4,989)	-50%
Staff Amenities	\$1,077	\$3,744	(\$2,667)	-71%
Staff Training	\$10,027	\$9,000	\$1,027	11%
Human Resource Sundry	\$4,669	\$9,000	(\$4,331)	-48%
Total Administration	\$97,181	\$117,218	(\$20,037)	-17%

Eastern Health Authority - Financial Statement (Level 3) 1 July 2024 to 31 March 2025				
Immunisation				
Immunisation SBP Consumables	\$9,030	\$7,497	\$1,533	20%
Immunisation Clinic Vaccines	\$42,584	\$45,000	(\$2,416)	-5%
Immunisation Worksite Vaccines	\$15,000	\$15,000	\$0	N/A
Total Immunisation	\$66,614	\$67,497	(\$883)	-1%
Uniforms/Income protection				
Income Protection	(\$1,598)	\$0	(\$1,598)	N/A
Total Uniforms/Income protection	(\$1,598)	\$0	(\$1,598)	0%
Sampling				
Legionella Testing	\$1,520	\$1,494	\$26	2%
Total Sampling	\$1,520	\$1,494	\$26	2%
Total Materials, contracts and other expenses	\$1,902,692	\$2,060,721	(\$158,029)	-8%
Total Operating Expenditure	\$1,902,692	\$2,060,721	(\$158,029)	-8%
Total Operating Income	\$2,536,667	\$2,590,233	(\$53,566)	-2%
Operating Result	\$633,975	\$529,512	\$104,463	20%

EASTERN HEALTH AUTHORITY STATEMENT OF COMPREHENSIVE INCOME						
FOR THE YEAR ENDING 30 June 2025						
AUDITED RESULT 2023/2024		ADOPTED BUDGET 2024/2025	SEPTEMBER REVIEW	DECEMBER REVIEW	MARCH REVIEW	REVISED BUDGET 2024/2025
	INCOME					
1,970,200	Council Contributions	2,094,100	-	-	-	2,094,100
152,387	Statutory Charges	180,300	-	-	-	180,300
414,731	User Charges	400,500	-	-	-	400,500
249,436	Grants, subsidies and contributions	249,000	-	-	-	249,000
37,380	Investment Income	22,000	-	15,000	-	37,000
913	Other Income	7,000	-	-	-	7,000
2,825,047	TOTAL INCOME	2,952,900	-	15,000	-	2,967,900
	EXPENSES					
1,847,846	Employee Costs	2,104,000	-	(60,000)	-	2,044,000
636,970	Materials, contracts and other expenses	800,900	-	75,000	-	875,900
36,923	Finance Charges	-	-	-	-	-
175,901	Depreciation	48,000	-	-	-	48,000
2,697,640	TOTAL EXPENSES	2,952,900	-	15,000	-	2,967,900
127,407	Operating Surplus/(Deficit)	-	-	-	-	-
(5,287)	Net gain (loss) on disposal of assets	-	-	-	-	-
122,120	Net Surplus/(Deficit)	-	-	-	-	-
122,120	Total Comprehensive Income	-	-	-	-	-

EASTERN HEALTH AUTHORITY STATEMENT OF CASH FLOWS						
FOR THE YEAR ENDING 30 June 2025						
AUDITED RESULT 2023/2024		ADOPTED BUDGET 2024/2025	SEPTEMBER REVIEW	DECEMBER REVIEW	MARCH REVIEW	REVISED BUDGET 2024/2025
	CASHFLOWS FROM OPERATING ACTIVITIES					
	Receipts					
1,970,200	Council Contributions	2,094,100	-	-	-	2,094,100
152,387	Fees & other charges	180,300	-	-	-	180,300
414,731	User Charges	400,500	-	-	-	400,500
37,380	Investment Receipts	22,000	-	15,000	-	37,000
249,436	Grants utilised for operating purposes	249,000	-	-	-	249,000
81,777	Other	7,000	-	-	-	7,000
	Payments					
(1,854,725)	Employee costs	(2,104,000)	-	60,000	-	(2,044,000)
(556,887)	Materials, contracts & other expenses	(800,900)	-	(75,000)	-	(875,900)
(36,923)	Finance Payments	-	-	-	-	-
457,376	Net Cash Provided/(Used) by Operating Activities	48,000	-	-	-	48,000
	CASH FLOWS FROM FINANCING ACTIVITIES					
-	Loans Received	-	-	-	-	-
-	Repayment of Borrowings	-	-	-	-	-
(133,122)	Repayment of Finance Lease Liabilities	-	-	-	-	-
(133,122)	Net Cash Provided/(Used) by Financing Activities	-	-	-	-	-
	CASH FLOWS FROM INVESTING ACTIVITIES					
	Receipts					
	Sale of Replaced Assets	-	-	-	-	-
	Payments					
(14,141)	Expenditure on renewal / replacements of assets	-	-	-	-	-
-	Expenditure on new / upgraded assets	-	-	-	-	-
-	Distributions paid to constituent Councils	-	-	-	-	-
(14,141)	Net Cash Provided/(Used) by Investing Activities	-	-	-	-	-
310,113	NET INCREASE (DECREASE) IN CASH HELD	48,000	-	-	-	48,000
644,769	CASH AND CASH EQUIVALENTS AT BEGINNING OF REPORTING PERIOD	670,769	284,113	-	-	954,882
954,882	CASH AND CASH EQUIVALENTS AT END OF REPORTING PERIOD	718,769	284,113	-	-	1,002,882

EASTERN HEALTH AUTHORITY STATEMENT OF FINANCIAL POSITION						
FOR THE YEAR ENDING 30 June 2025						
AUDITED RESULT 2023/2024		ADOPTED BUDGET 2024/2025	SEPTEMBER REVIEW	DECEMBER REVIEW	MARCH REVIEW	REVISED BUDGET 2024/2025
	CURRENT ASSETS					
954,882	Cash and Cash Equivalents	718,769	284,113		-	1,002,882
187,908	Trade & Other Receivables	271,901	(83,993)	-	-	187,908
1,142,790	TOTAL CURRENT ASSETS	990,670	200,120	-	-	1,190,790
	NON-CURRENT ASSETS					
999,746	Infrastructure, property, plant and equipment	1,030,793	(79,047)	-	-	951,746
999,746	TOTAL NON-CURRENT ASSETS	1,030,793	(79,047)	-	-	951,746
2,142,536	TOTAL ASSETS	2,021,463	121,073	-	-	2,142,536
	CURRENT LIABILITIES					
198,870	Trade & Other Payables	121,916	76,954	-	-	198,870
289,788	Provisions	285,083	4,705	-	-	289,788
139,565	Borrowings	111,865	27,700	-	-	139,565
628,223	TOTAL CURRENT LIABILITIES	518,864	109,359	-	-	628,223
	NON-CURRENT LIABILITIES					
33,030	Provisions	44,614	(11,584)	-	-	33,030
782,210	Borrowings	881,032	(98,822)	-	-	782,210
815,240	TOTAL NON-CURRENT LIABILITIES	925,646	(110,406)	-	-	815,240
1,443,463	TOTAL LIABILITIES	1,444,510	(1,047)	-	-	1,443,463
514,567	NET CURRENT ASSETS/(CURRENT LIABILITIES)	471,806	90,761	-	-	562,567
699,073	NET ASSETS	576,953	122,120	-	-	699,073
	EQUITY					
699,073	Accumulated Surplus/(Deficit)	576,953	122,120	-	-	699,073
699,073	TOTAL EQUITY	576,953	122,120	-	-	699,073

EASTERN HEALTH AUTHORITY STATEMENT OF CHANGES IN EQUITY						
FOR THE YEAR ENDING 30 June 2025						
AUDITED RESULT 2023/2024		ADOPTED BUDGET 2024/2025	SEPTEMBER REVIEW	DECEMBER REVIEW	MARCH REVIEW	REVISED BUDGET 2024/2025
	<u>ACCUMULATED SURPLUS</u>					
576,953	Balance at beginning of period	576,953	122,120		-	699,073
122,120	Net Surplus/(Deficit)	-	-	-	-	-
699,073	BALANCE AT END OF PERIOD	576,953	122,120	-	-	699,073
	<u>TOTAL EQUITY</u>					
576,953	Balance at beginning of period	576,953	122,120	-	-	699,073
122,120	Net Surplus/(Deficit)	-	-	-	-	-
699,073	BALANCE AT END OF PERIOD	576,953	122,120	-	-	699,073

8.1 ENVIRONMENTAL HEALTH ACTIVITY REPORT

1.0 General Activity

During the reporting period EHA administered the *Food Act 2001*, *SA Public Health Act 2011* and *SRF Act 1992* along with their respective standards and regulations to protect and promote the health and wellbeing of the community.

Graph 1 illustrates the number of inspections per category for the reporting period. As shown in Graph 1 a large proportion of inspections relate to activities under the *Food Act 2001*.

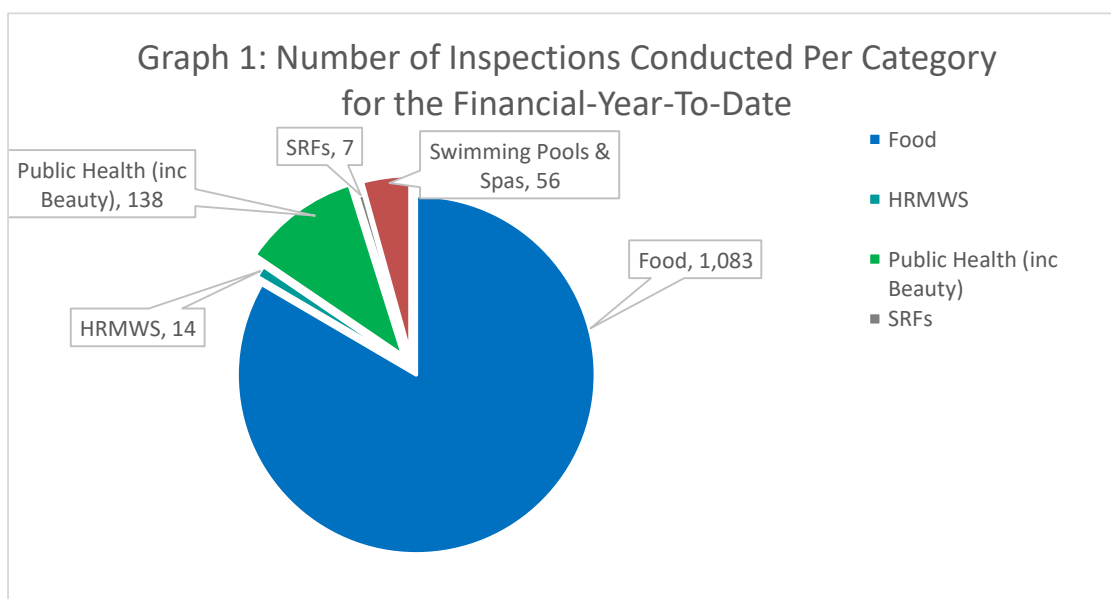


Table 1: Number of Inspections Conducted per Category for the Financial-Year-To-Date.

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Food	252	225	430	139	37	1,083
Beauty	3	2	2	1	0	8
HRMWS	0	7	5	2	0	14
Public Health Complaint	37	30	37	23	3	130
SRFs	3	2	0	2	0	7
Swimming Pools & Spas	29	6	12	5	4	56
Total	324	272	486	172	44	1,298

2.0 Food Safety

2.1 Food Premises Inspections

A total of 231 routine inspections of food businesses were undertaken during the reporting period. 100 follow-up inspections were required to ensure compliance with the Food Safety Standards. In total, 382 food premises inspections were completed during the reporting period.

As shown in Graph 2 the number of routine inspections and follow up inspections remained consistent with the previous year. There was a 19% decrease in the number of complaint inspections undertaken when compared to the previous year.

Graph 2: Comparison Between Total Inspections between 1 January - 31 March 2024 and 2025

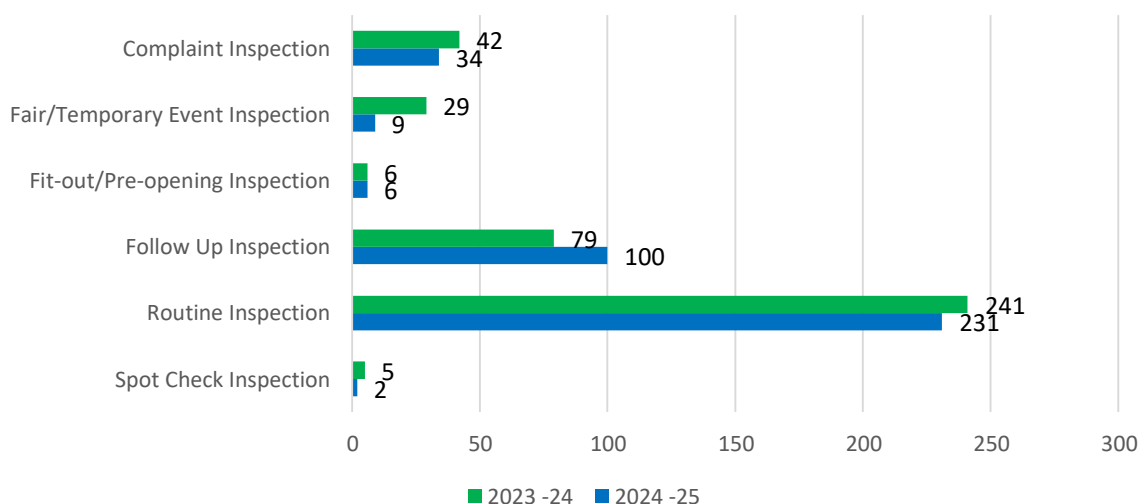


Table 2: Food Premises Inspections from 1 January 2025 to 31 March 2025

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	64	50	85	22	10	231
Follow up Inspection	29	15	37	14	5	100
Complaint Inspection	4	0	18	9	3	34
Fit-out/Pre-opening Inspection	1	1	2	1	1	6
Fair/Temporary Event Inspection	0	6	0	3	0	9
Spot Check Inspection	0	2	0	0	0	2
Total	98	74	142	49	19	382

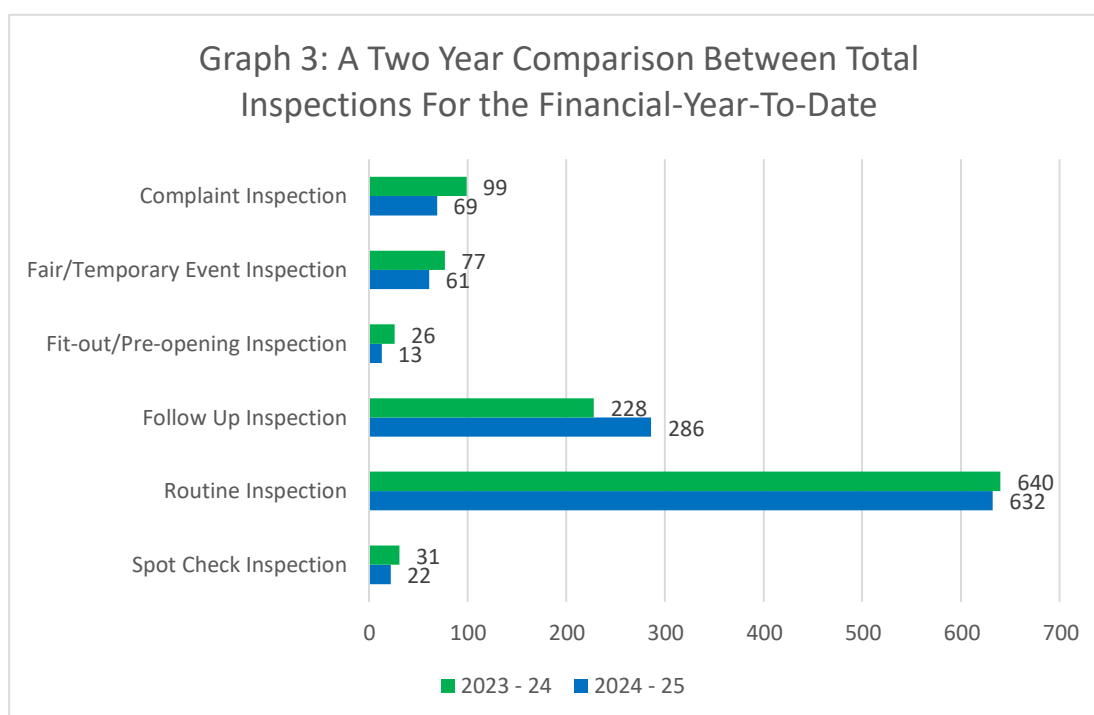


Table 3: Food Premises Inspections for the Financial-Year-To-Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	167	137	247	64	17	632
Follow up Inspection	65	48	126	39	8	286
Complaint Inspection	11	6	31	17	4	69
Fit-out/Pre-opening Inspection	3	3	5	1	1	13
Fair/Temporary Event Inspection	0	29	7	18	7	61
Spot Check Inspection	6	2	14	0	0	22
Total	252	225	430	139	37	1,083

2.2 Food Safety Rating Scheme (FSRS)

The SA Health Food Safety Rating Scheme Checklist (FSRS) is used to assess business compliance with food safety standards at routine inspections. FSRS applies only to P1 and P2 food service businesses within EHA's Constituent Councils who sell food to consumers direct from the premises for 'immediate' consumption.

Non-compliances against the Standards can range from Minor, Major to Serious. This is dependent on the risk and seriousness of the breach. Observations are recorded when an item is not posing an imminent threat but may result in a future non-compliance. These are used as a tool to inform a business of their obligations before it poses a risk to public health.

All food businesses receive a 'performance score' assessed during their respective routine inspection. However, the 'food safety rating score' is represented by stars, with captured businesses able to obtain a maximum rating of five stars. Five stars represents excellent compliance with the Food Safety Standards, four stars very good and three stars good compliance.

Non-compliance with the Food Safety Standards

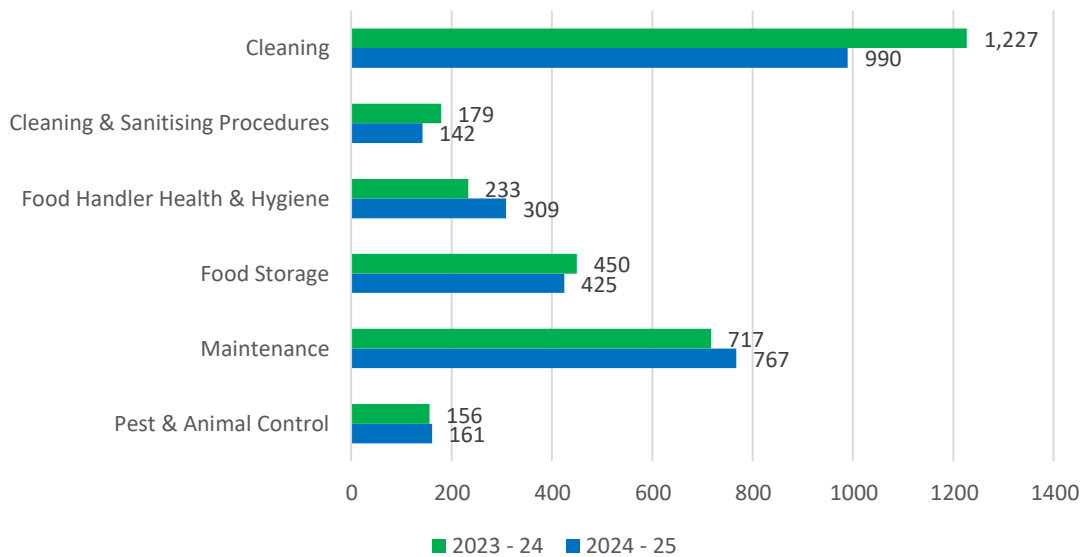
EHO's identified a total of 1,203 observations and non-compliances with the Food Safety Standards during the reporting period (Table 4). Most non-compliances recorded were minor in nature, with 72% of the non-compliances captured within this category.

Table 4: Type and Number of Non-Compliances Identified at Routine Inspections From 1 January to 31 March 2025

Type of non-compliance	Number of non-compliances
Observation	80
Minor	865
Major	165
Serious	93
Total	1,203

A poor standard of cleanliness, maintenance and unsafe storage of food accounted for the most common non-compliances identified during routine inspections for the reporting period (Graph 4). The number of non-compliances identified which relate to cleaning has decreased by 19%. There has however been a significant increase of 33% in the number of non-compliances relating to food handler health and hygiene.

Graph 4: A Two Year Comparison of Total Non-Compliances Per Category Identified at Routine Inspections in the Financial-Year-To-Date

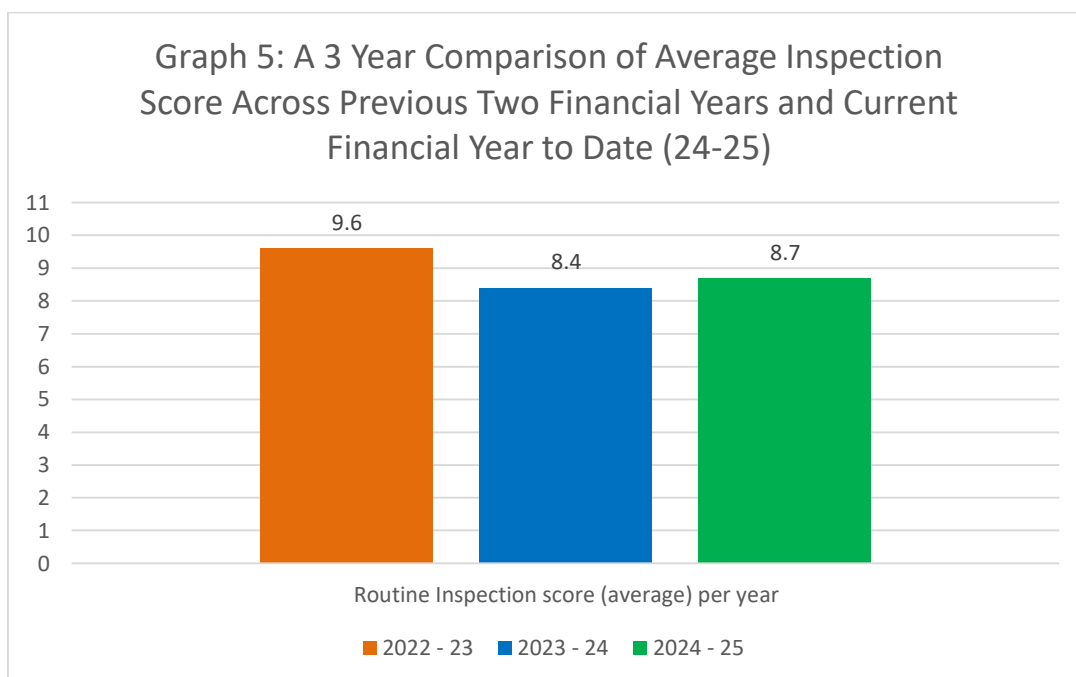


Food Safety Rating Scheme Score

In accordance with the FSRS EHO's calculate a score during the routine inspection based on how well the food business meets the Food Safety Standards. A high inspection score indicates poor compliance, and a low score indicates good compliance with the Food Safety Standards.

Graph 5 demonstrates that there has been a marginal increase in the average FSRS Score from 8.4 to 8.7 compared to the previous year. This slight increase may be explained by the addition of Food Safety Supervisor requirements and the associated minor non-compliance if a business does not have an appointed Food Safety Supervisor.

Overall, a decrease is observed when comparing the current average FSRS Score to 2022-23 financial year.



FSRS – Star Rating

During the reporting period a total of 179 food businesses were assessed within the scheme, 13 less than the previous year. A total of 490 food businesses have been assessed under the scheme for the financial year to date, which is an increase from 440 for the same period in the previous financial year.

Tables 5 and 7 show a decrease in total number of food businesses receiving a star rating. The increase in number of businesses receiving no stars is likely due to the enforcement approach taken during the reporting period that meant business without a Food Safety Supervisor appointed are automatically awarded no stars.

Food businesses receiving a 5-star rating decreased from 38% to 29%, a 9% decrease compared to the same reporting period in the previous financial year. As reflected in Table 7, for the financial year to date there has been a 21% increase in businesses receiving no stars. Business receiving 5 stars has decreased by 17% when compared to the previous financial year to date.

Table 5: A Two-Year Comparison of The Percentage of Businesses Receiving a Food Star Rating for the Reporting Period in 2023-24 Compared to 2024-25.

	2023-24	2024-25	Difference
5 Star	38%	29%	↓ 9%
4 Star	19%	21%	↑ 2%
3 Star	18%	11%	↓ 7%
No Star	25%	39%	↑ 14%

Graph 6: A Comparison of Food Safety Rating Scheme Performance For Captured Inspections Between 1 January and 31 March

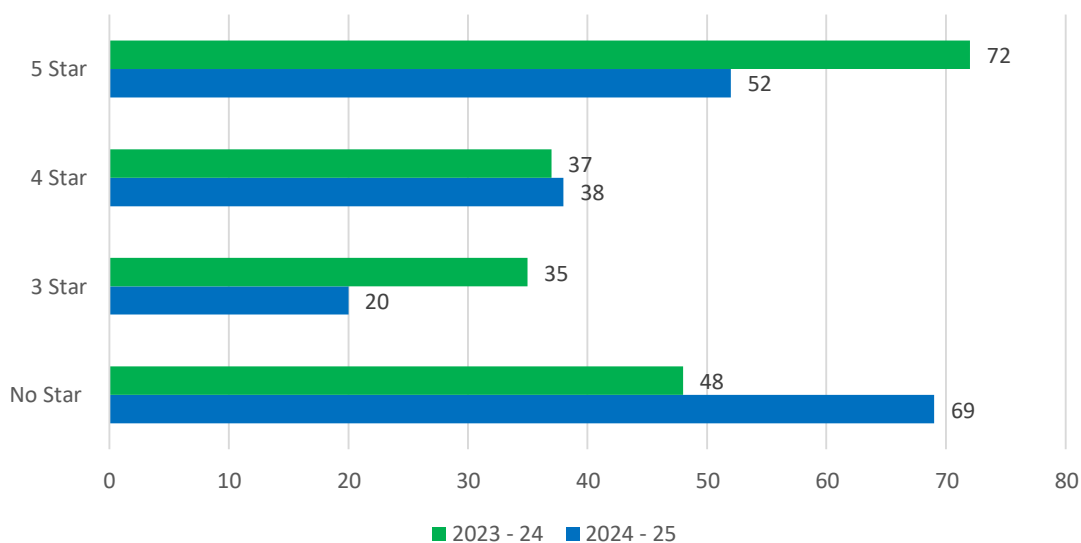


Table 6: Food Safety Rating Scheme Performance Per Inspection From 1 January to 31 March 2025

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
5 Star (0 – 3 points)	10	12	18	6	6	52
4 Star (4 – 7 points)	12	5	18	3	0	38
3 Star (8 – 11 points)	6	4	7	3	0	20
No Star (12+ points)	22	9	29	7	2	69
Total	50	30	72	19	8	179

Table 7: A Two-Year Comparison of The Percentage of Businesses Receiving a Food Star Rating for the Financial-Year-To-Date in 2023-24 Compared to 2024-25

	2023-24	2024-25	Difference
5 Star	46%	29%	↓ 17%
4 Star	23%	24%	↑ 1%
3 Star	17%	13%	↓ 4%
No Star	13%	34%	↑ 21%

Graph 7: A Comparison of Food Safety Rating Scheme Performance For Captured Inspections For the Financial-Year-To-Date 2023 - 24 and 2024 -25

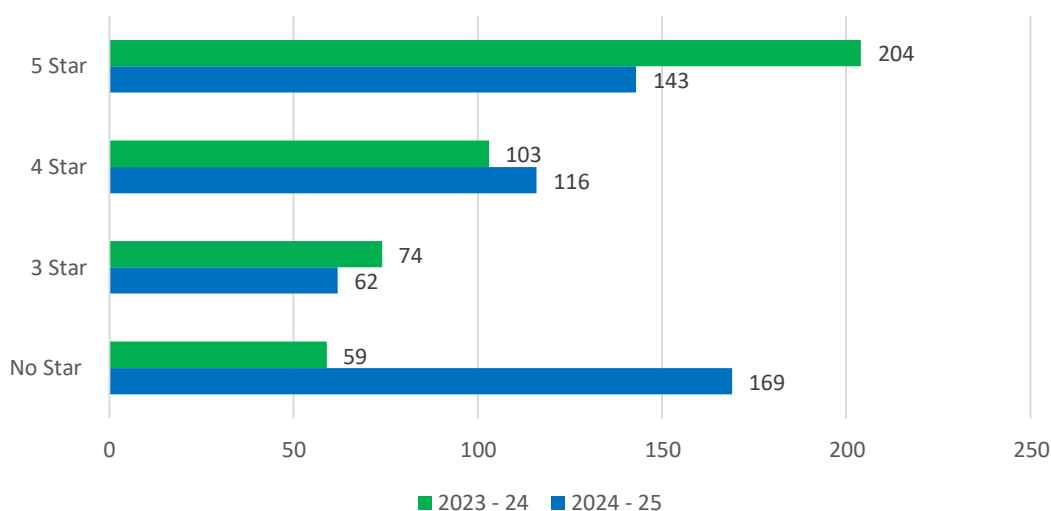


Table 8: Food Safety Rating Scheme Performance Per Inspection for the Financial-Year-To-Date for 2024-25.

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
5 Star (0 – 3 points)	40	26	53	18	6	143
4 Star (4 – 7 points)	32	18	53	10	3	116
3 Star (8 – 11 points)	15	10	28	9	0	62
No Star (12+ points)	48	32	67	18	4	169
Total	135	86	201	55	13	490

2.4 Legal Actions for Food Premises

During the reporting period, a total of 49 Improvement Notices were issued, these have been separated into Improvement Notices issued for No Appointed Food Safety Supervisor and all other Improvement Notices. Four warning letters, two Expiation Notices, and no Prohibition Orders were issued during the reporting period.

Table 9: Legal Action Taken From 1 January to 31 March 2025.

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Warning Letter	2	0	0	1	1	4
Improvement Notice	5	4	5	1	0	15
Improvement Notice (FSS)	13	10	7	4	0	34
Prohibition	0	0	0	0	0	0
Expiation Notice	0	0	2	0	0	2
Total	20	14	14	6	1	55

As shown in Graph 8 there has been an increase in the number of legal actions, specifically the number of Improvement Notices and Warnings, required to be taken for the financial year to date when compared to the same period in the previous financial year.

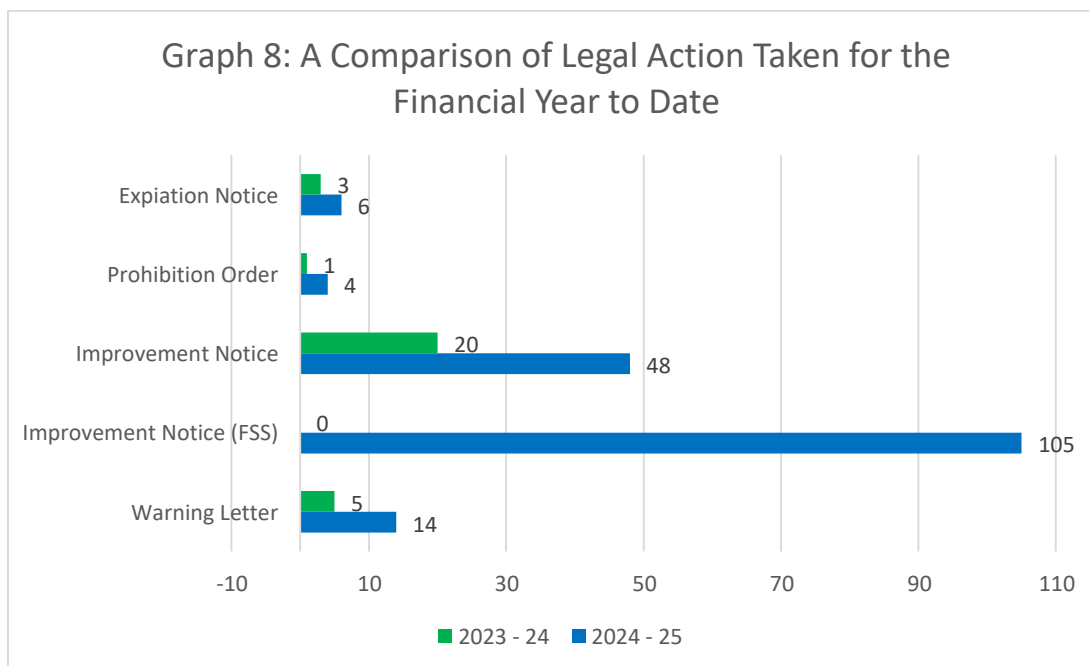


Table 10: Legal Action Taken For 2024-25 Financial-Year-To-Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Warning Letter	3	3	3	3	2	14
Improvement Notice	12	10	15	9	2	48
Improvement Notice (FSS)	30	26	36	12	1	105
Prohibition	0	1	1	2	0	4
Expiation Notice	1	1	3	1	0	6
Total	46	41	58	27	5	177

Most food businesses requiring legal action were Priority 1 high risk businesses (Table 11). A total of 55 legal actions were required to be taken for food businesses during the reporting period, and 177 for the financial year to date.

Table 11: Legal Action Taken Per Food Business Risk Classification From 1 January to 31 March 2025

Enforcement Type	P1	P2
Warning Letter	3	1
Improvement Notice	12	3
Improvement Notice (FSS)	23	11
Prohibition Order	0	0
Expiation Notice	1	1

2.5 Food Complaints

EHA received 34 complaints that were investigated under the *Food Act 2001* during the reporting period. The complaints are shown by category in Graph 9 and by respective Constituent Council area in Table 12.

When compared to the same reporting period for the previous financial year there was a decrease in complaints relating to alleged food poisoning and unsafe or unsuitable food. There was an increase in complaints relating to poor personal hygiene/food handling practices, refuse storage, and unclean premises.

Graph 9: A Two Year Comparison of Food Complaints Received Between 1 January and 31 March 2024 and 2025

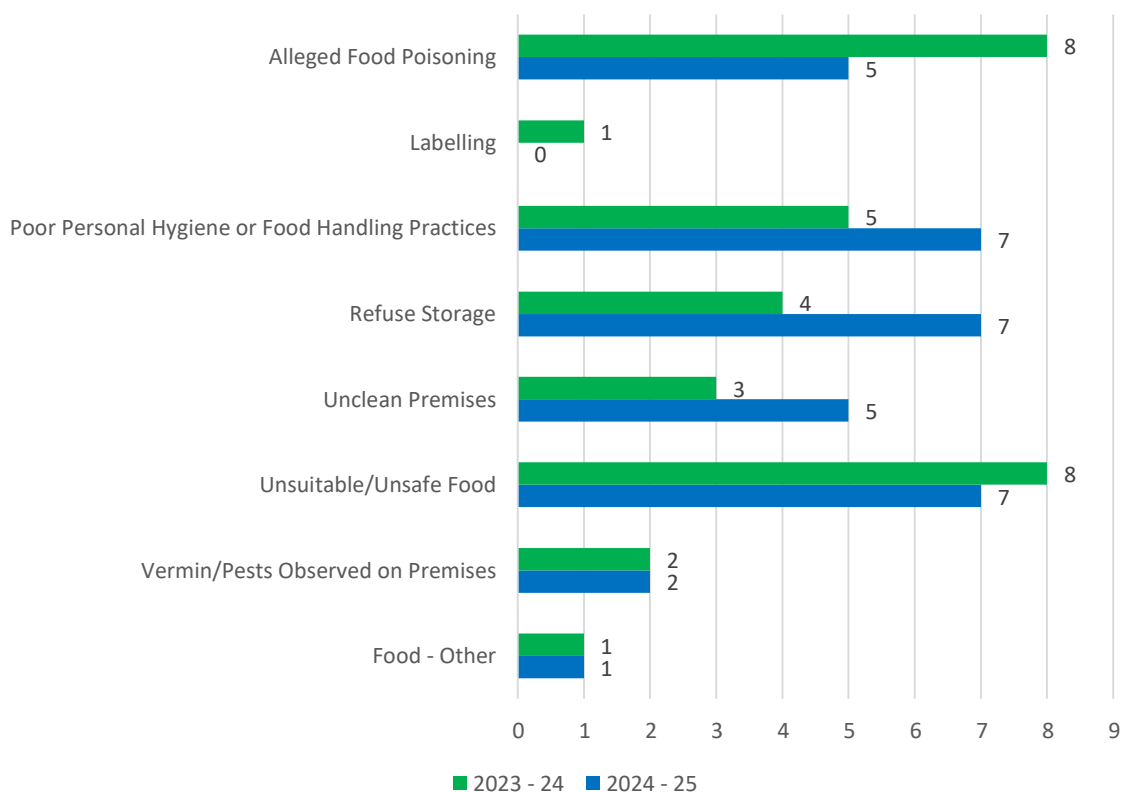


Table 12: Food Complaints Received by Council Area From 1 January to 31 March 2025

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Alleged Food Poisoning	1	0	3	0	1	5
Food - Other	0	0	1	0	0	1
Poor personal hygiene or food handling practices	1	0	3	3	0	7
Refuse Storage	1	0	5	1	0	7
Unclean premises	0	0	1	3	1	5
Unsuitable/unsafe food	2	0	3	1	1	7
Vermin/Pests observed on premises	0	0	0	1	1	2
Total	5	0	16	9	4	34

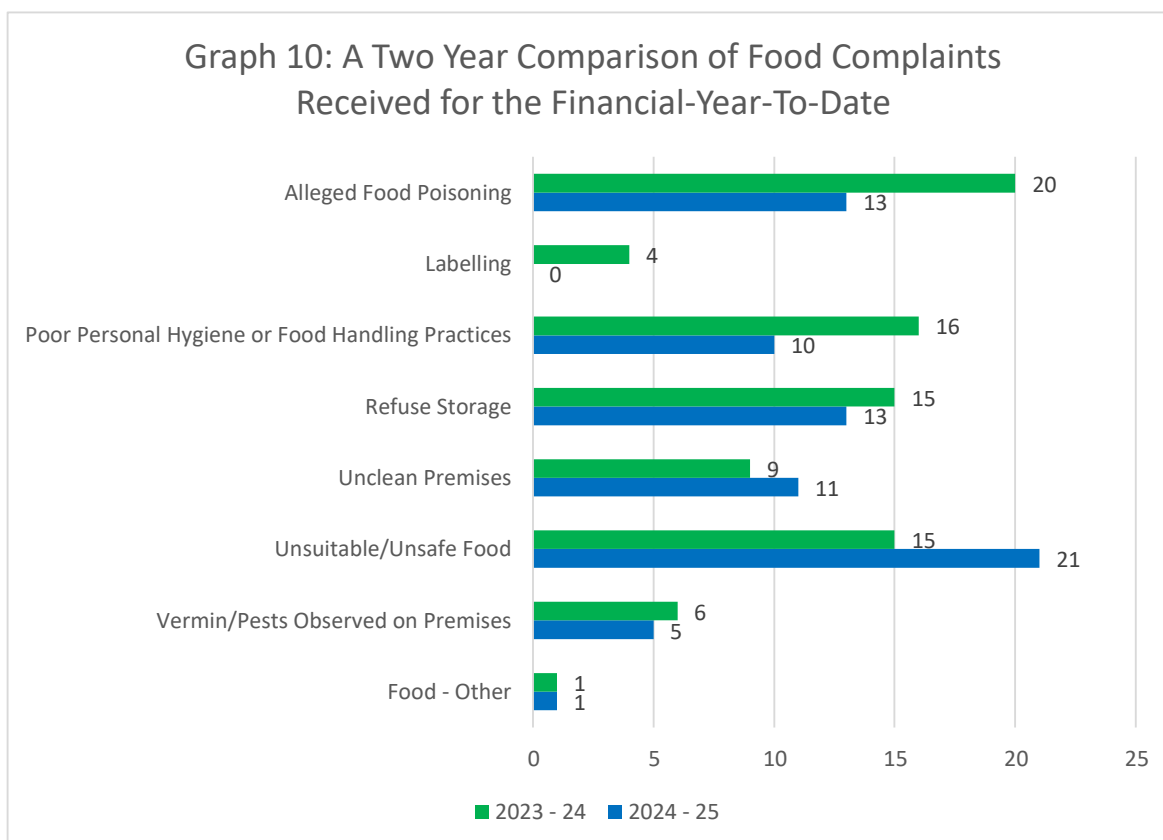


Table 13: Food Complaints Received by Council Area for Financial-Year-To-Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Alleged Food Poisoning	2	1	6	3	1	13
Food - Other	0	0	1	0	0	1
Poor personal hygiene or food handling practices	2	1	4	3	0	10
Refuse Storage	3	1	8	1	0	13
Unclean premises	1	1	2	6	1	11
Unsuitable/unsafe food	5	2	10	2	2	21
Vermin/Pests Observed on Premises	1	1	1	1	1	5
Total	14	7	32	16	5	74

2.6 Audits of Businesses that Serve Vulnerable Populations

During the reporting period, 14 businesses within the Constituent Council boundaries and 12 businesses in other council areas were audited under Standard 3.3.1 of the *Australia New Zealand Food Standards Code*. Two follow-up audits were required.

Table 14: Food Audits Completed for The Period From 1 January to 31 March 2025.

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Out of Council	Total
Audits	1	2	4	6	1	10	24
Follow-up audits	0	0	0	0	0	2	2
Total	1	2	4	6	1	12	26

Table 15: Food Audits Completed for The Financial-Year-To-Date

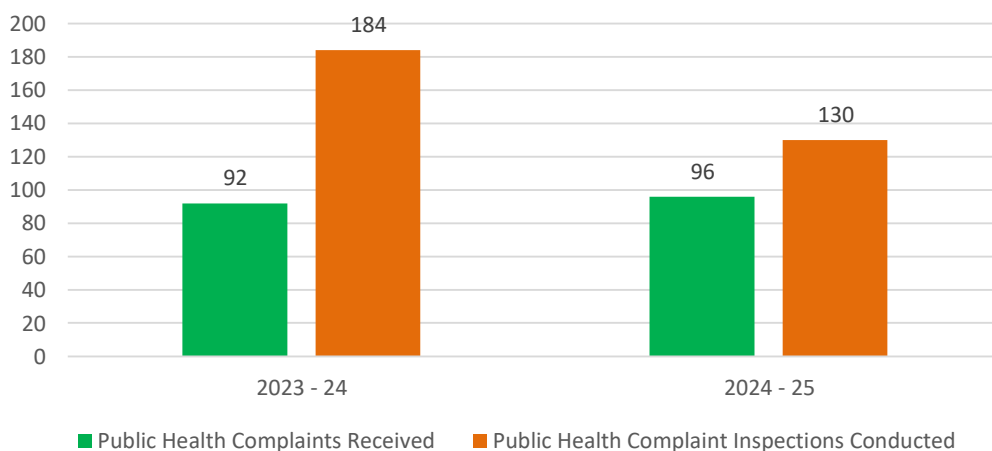
	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Out of Council	Total
Audits	6	7	7	7	2	28	57
Follow-up audits	0	0	0	0	0	2	2
Total	6	7	7	7	2	30	59

3.0 Public Health

3.1 Public Health Complaints

As shown in Graph 11, 96 public health complaints were received for the financial year to date, comparable to the same period in the previous year. A total of 130 inspections were undertaken to investigate these complaints, a 29% decrease compared to the previous year. The reduction in the number of inspections required can be attributed to the nature of complaints received and the approach taken to address and investigate each complaint.

Graph 11: A Two-Year Comparison of Public and Environmental Health Complaints Received vs Completed Inspections for the Financial-Year-To-Date



Vector control and sanitation complaints account for the most common type of complaints over the past two years (Graph 12), representing 58% of the complaints received in the current reporting period.

The total number of public and environmental health complaints received for the reporting period are further broken down by Council area in Table 16.

Graph 12: A Two-Year Comparison of Public and Environmental Health Complaints Received from 1 January and 31 March 2024 and 2025

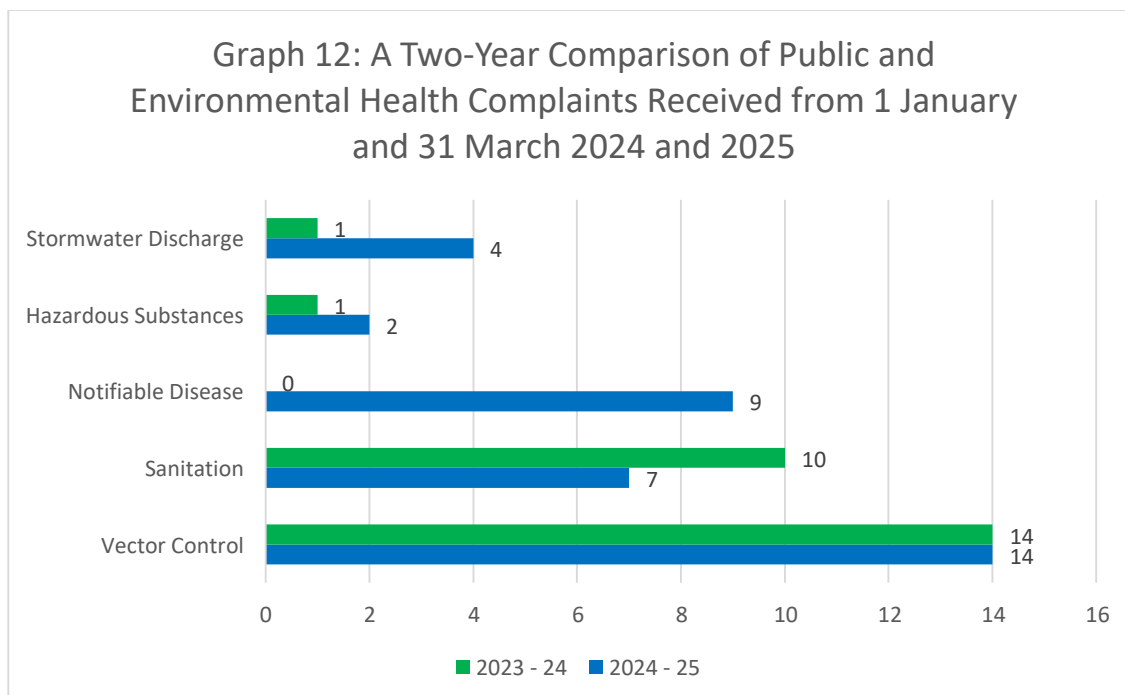


Table 16: Public and Environmental Health Complaints for 1 January to 31 March 2025 by Council Area

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Hazardous Substances	1	0	1	0	0	2
Notifiable Disease	2	5	2	0	0	9
Sanitation	4	2	0	1	0	7
Vector Control	6	2	4	1	1	14
Stormwater Discharge	2	0	2	0	0	4
Total	15	9	9	2	1	36

Graph 13: A Two Year Comparison of Public and Environmental Health Compliants Received for the Financial Year-To-Date

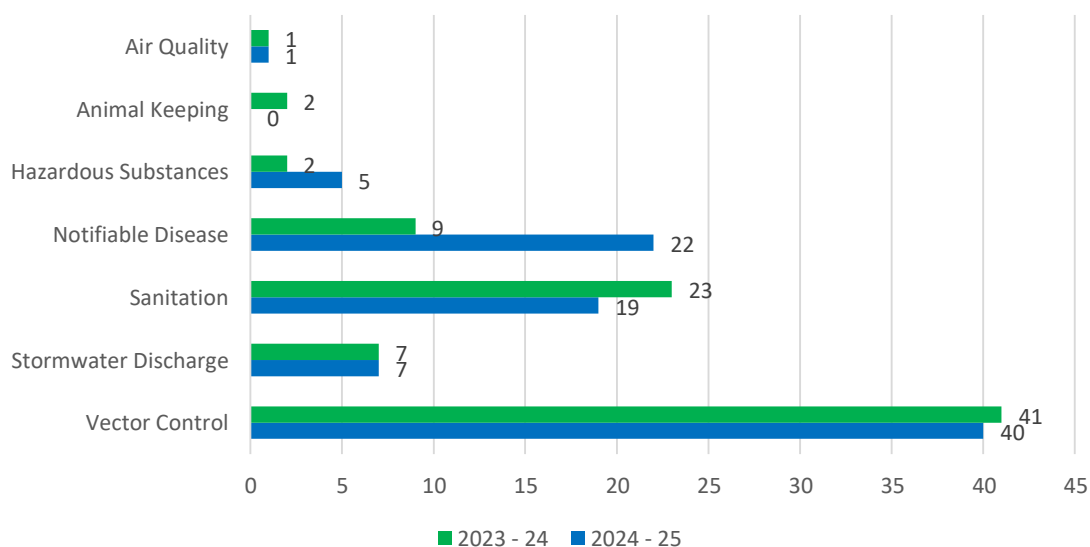


Table 17: Public and Environmental Health Complaints for the Financial Year to Date by Council Area

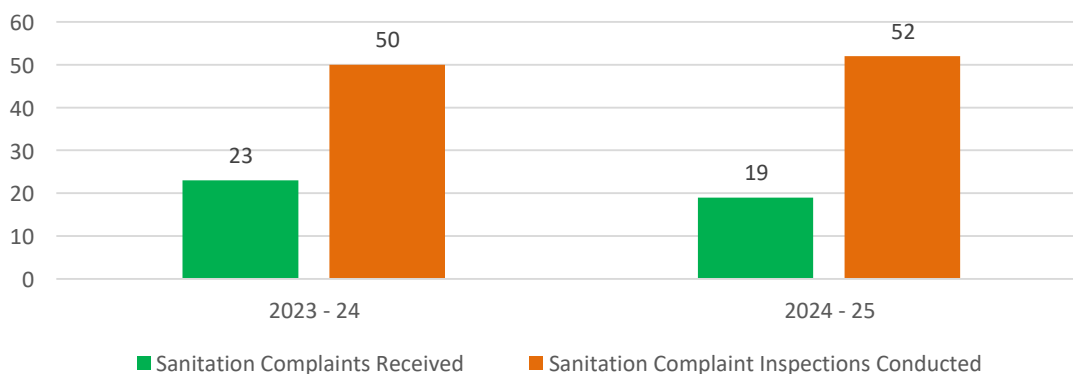
	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Air Quality	1	0	0	0	0	1
Hazardous Substances	1	0	4	0	0	5
Notifiable Disease	7	10	4	1	0	22
Sanitation	9	4	3	1	2	19
Stormwater Discharge	2	0	5	0	0	7
Vector Control	17	9	8	5	1	40
Total	37	23	24	7	3	94

Due to the nature of sanitation complaints the investigation will often require more than one inspection.

Sanitation complaints most commonly involve hoarding and squalor. These types of complaints are often complex and have additional underlying issues that require interaction from other agencies. Multiple inspections over an extended period are required to enable the complaint to be successfully addressed. For the financial year to date a total of 52 inspections have been conducted for sanitation complaints.

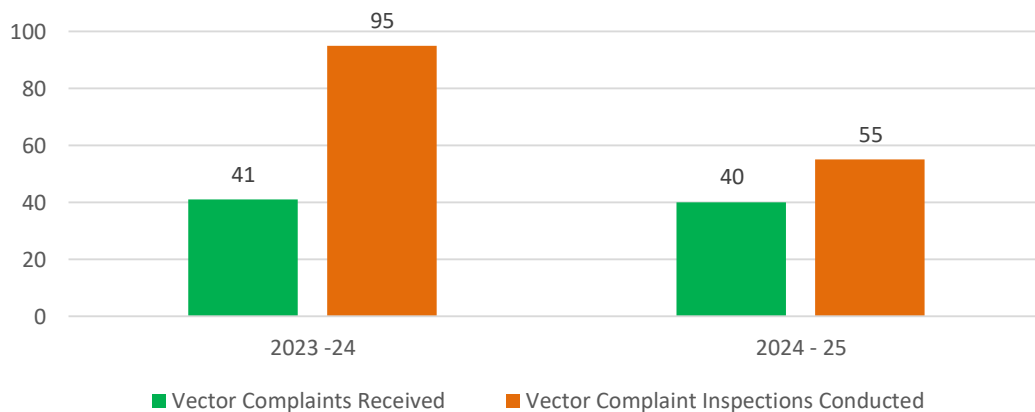
As shown in Graph 14, the number of sanitation complaints received is comparative over the past two years.

Graph 14: A Two Year Comparison of Sanitation Complaints Received Compared to Completed Inspections for the Financial Year To Date



A high proportion of vector control complaints relate to vermin activity which often require time for compliance between inspections. Vector control complaints received have remained similar between the two financial years however the required inspections have decreased. This decrease can be attributed to the risk-based investigation strategy used by EHO's. In the first instance this enables the EHO's to communicate with and educate the requestor and alleged offender to resolve the matter. EHO's will conduct further inspection where required.

Graph 15: A Comparison of Vector Control Complaints Received Compared to Completed Inspections for the Financial Year To Date



3.2 Cooling Towers & Warm Water Systems

During the reporting period five warm water systems inspections and four cooling tower inspections were conducted at three sites (Table 18). In the financial year to date six cooling tower inspections and eight warm water system inspections were conducted across seven sites (Table 19).

Table 18: Cooling Tower and Warm Water System Inspections Conducted from 1 January to 31 March 2025

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	0	2	5	2	0	9
<i>Legionella</i> Detections during sampling	0	1	0	0	0	0
Total	0	2	5	2	0	9

Table 19: Cooling Tower and Warm Water System Inspections for the Financial Year to Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	0	7	5	2	0	14
<i>Legionella</i> Detections during sampling	0	2	0	0	0	0
Total	0	7	5	2	0	14

3.3 Public Swimming Pools and Spas

During the reporting period a total of 20 routine swimming and spa pool inspections were conducted (Table 20). Three inspections required a follow up and two complaints were received that required inspection. A total of 49 routine inspections have been undertaken for the financial year to date (Table 21).

Table 20: Swimming Pool and Spa Inspections Conducted Between 1 January and 31 March 2025

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	11	4	3	0	2	20
Follow Up Inspection	2	0	0	1	0	3
Complaint Inspection	2	0	0	0	0	2
Total	15	4	3	1	2	25

Table 21: Swimming Pool and Spa Inspections Conducted for the Financial Year to Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	25	6	12	2	4	49
Follow Up Inspection	2	0	0	3	0	5
Complaint Inspection	2	0	0	0	0	2
Total	29	6	12	5	4	56

3.4 Personal Care and Body Art

There were no personal care and body art inspections conducted during the reporting period. Table 22 details the total inspections conducted for the financial year to date.

Table 22: Personal Care and Body Art Premises Inspections Conducted for the Financial Year to Date

	Burnside	Campbelltown	NPSP	Prospect	Walkerville	Total
Routine Inspection	1	2	2	0	0	5
Fit-out/Pre-opening Inspection	0	0	0	1	0	1
Complaint Inspection	2	0	0	0	0	2
Total	3	2	2	1	0	8

3.5 Wastewater

During the reporting period there were no applications received which required an assessment in accordance with the requirements of the *SA Public Health (Wastewater) Regulations 2013*.

Wastewater service reports are regularly received and monitored for compliance on an ongoing basis. A total of 24 service reports were received and assessed.

4.0 Health Care and Community Services - Supported Residential Facilities

For the reporting period 1 January and 31 March 2025 two dual licence and one pension only facility were licenced by Eastern Health Authority under the *Supported Residential Facilities Act 1992*.

Three audits were conducted at two facilities, and one follow up inspection was conducted.

One Manager's application was completed and approved, and one complaint was received and investigated.

5.0 Environmental Health Education / Promotion

Environmental Health education, training and promotion plays an important role in protecting the health of the local communities from the potential health effects of environmental hazards. EHA does this by informing the local community and businesses through various forms of communication by:

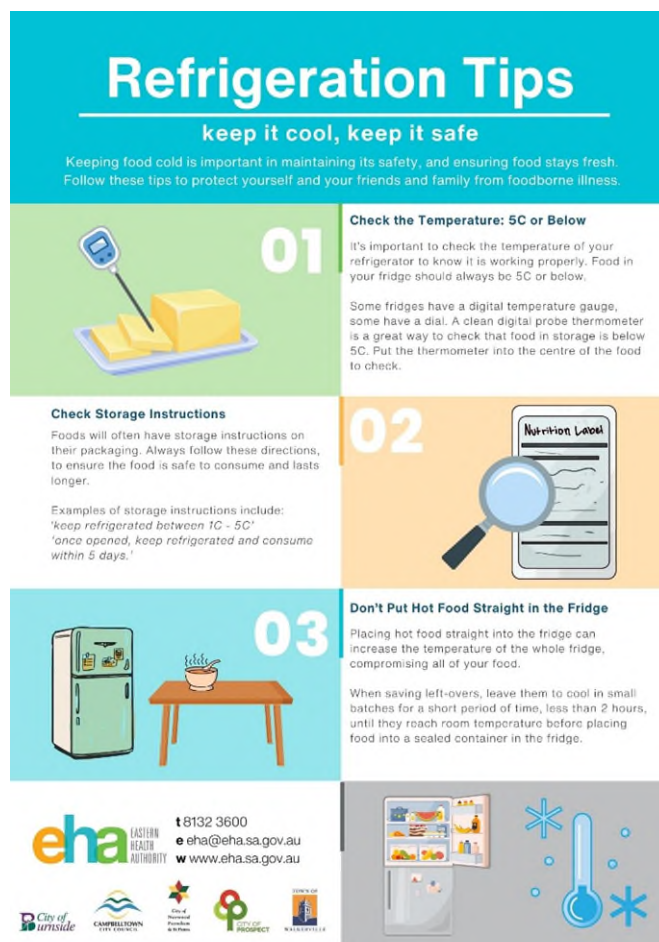
- raising awareness of environmental hazards in the community
- providing training, education, technical guidance and advice
- outlining legislative responsibilities and updates.

Food Safety Training

On 6 March 2025 one 'Food Safety Training' session was presented with 5 attendees. The session is aimed at educating food handlers on the fundamental principles of food safety with interactive activities to consolidate the participants learnings.

Fact Sheets and Newsletters

During the reporting period a fact sheet was published on the EHA website for refrigeration tips. These fact sheets are aimed at the public to promote awareness of food safety within their home.



RECOMMENDATION

That:

The Environmental Health Activity Report is received

8.2 IMMUNISATION

Public Clinics

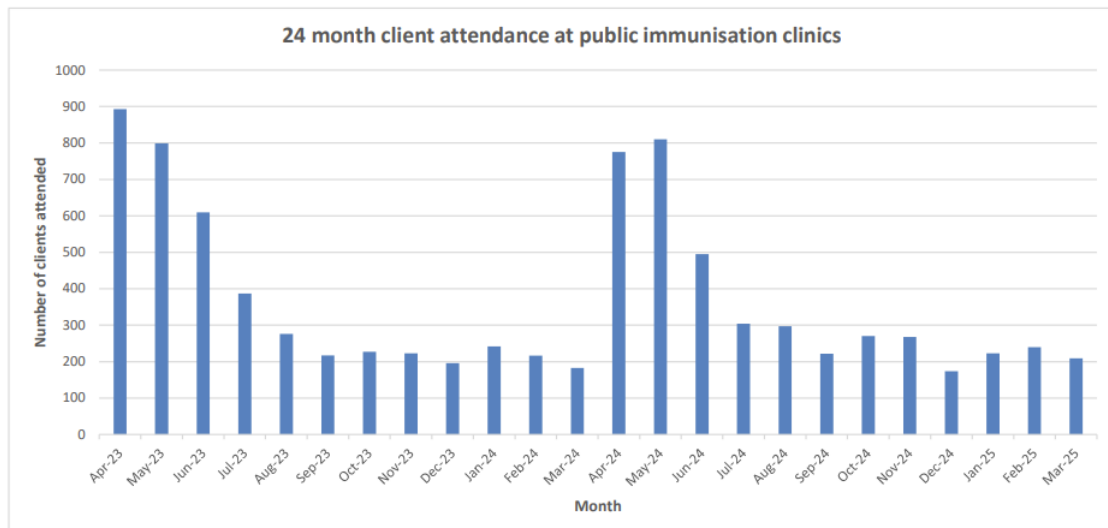
Attendance and Vaccinations

During the reporting period 1 January – 31 March 2025, 672 clients visited one of EHA's public immunisation clinics, and a total of 1,683 vaccines were administered. This represents a notable increase of 168 clients (33.27%) and 430 vaccines (34.32%) compared to this reporting period the previous year. The accessibility of multiple clinics across all Constituent Council locations and within the City of Unley enables clients with the flexibility of choice of location, dates and times.

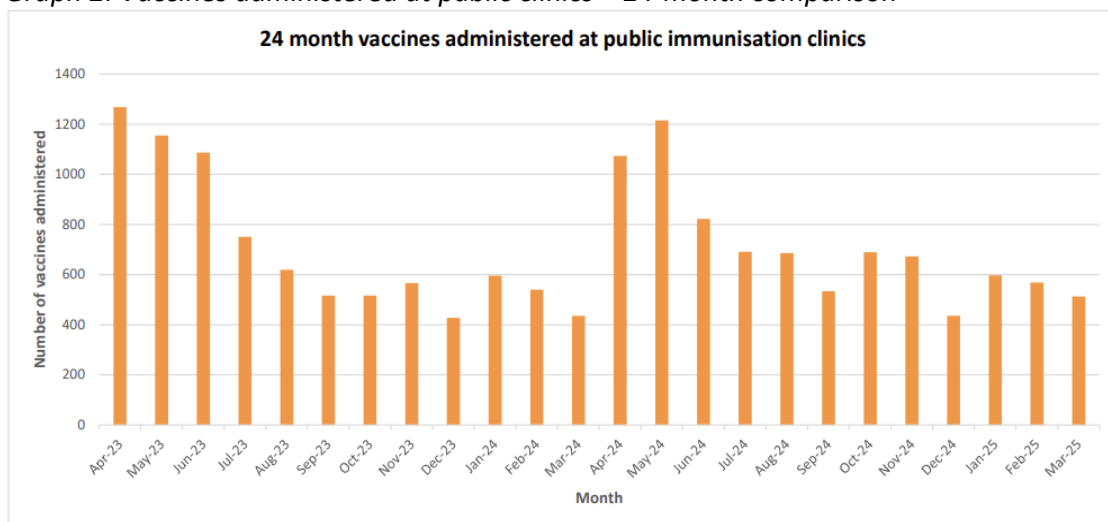
EHA's online booking system remains to be a preferred choice of booking among clients. There were 597 bookings completed online between January and March, accounting for 89% of booked clients.

Below details Client attendance and Vaccines administered for both the reporting periods of 2023 and 2024.

Graph 1: Client Numbers at public clinics – 24-month comparison



Graph 2: Vaccines administered at public clinics – 24-month comparison

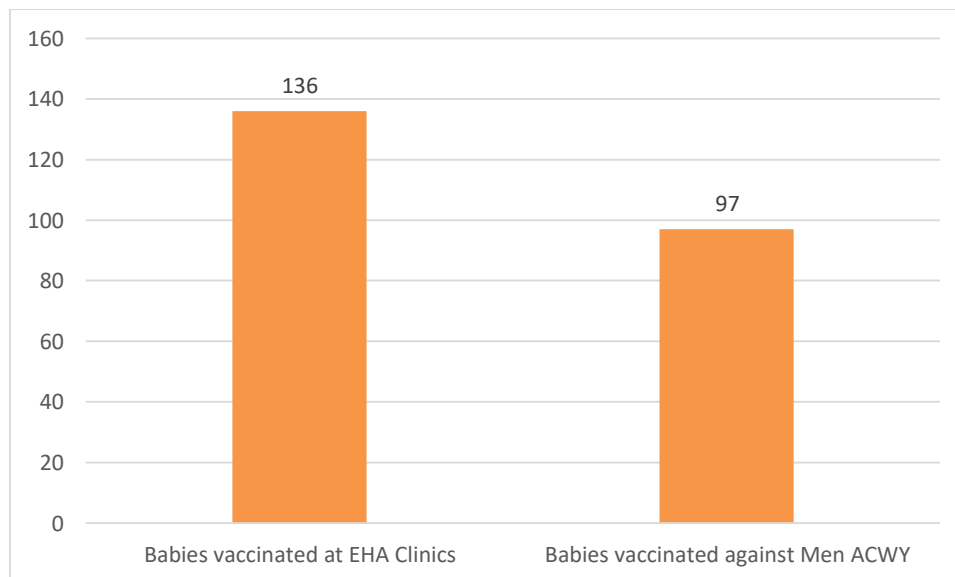


Education

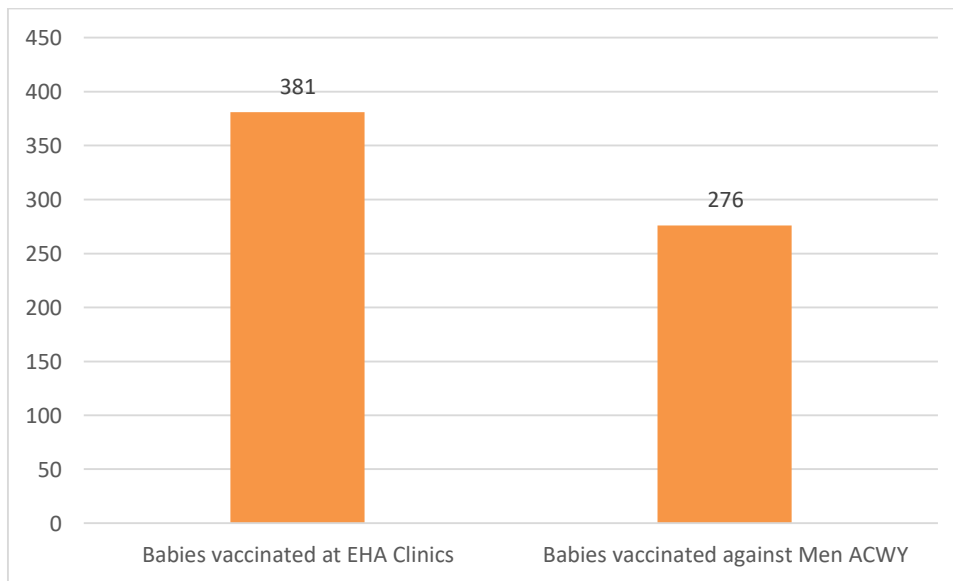
At EHA's public immunisation clinics, the registered nurses place strong emphasis on parent education, ensuring they are well-informed about the vaccines being administered to their babies and the critical role these vaccines play in preventing infectious diseases.

The Meningococcal (Men) ACWY is not part of the funded National Immunisation Program. The registered Immunisation nurses educate and inform parents of this vaccine preventable disease, with no obligation to vaccinate their baby. As shown in Graph 3, within the reporting period there was a high uptake with 71% of parents opting to further vaccinate their babies against Men ACWY. This was comparative to the uptake of 74% for the financial year to date (Graph 4). This strong uptake reflects both the trust in EHA's clinical staff and the value parents place on informed decision-making when it comes to protecting their children's health.

Graph 3 – A graph demonstrating the number parents opting to further vaccinate their babies against Men ACWY at EHA Clinics for the reporting period.



Graph 4 – A graph demonstrating the number parents opting to further vaccinate their babies against Men ACWY at EHA Clinics for the financial year to date.



Non-Medicare 'Catch Up Program'

As part of EHA's broader Immunisation Service, an important component is the 'catch-up' program designed to support new arrivals from overseas who are not eligible for Medicare-funded vaccines. This program plays a vital role in promoting equitable access to immunisation and protecting the wider community from the spread of vaccine-preventable diseases.

The process involves a detailed review of overseas immunisation records, which can be complex and requires considerable administrative and clinical time from EHA's registered nurses. Despite the resource demands, this program remains an essential public health initiative, ensuring that no one is left behind when it comes to immunisation coverage.

As illustrated in Graph 5, a total of 38 client catch-up cases were received and reviewed during the current reporting period. A total of 118 catch-up immunisation clients have been recorded and assessed for the financial year to date.

Graph 5 – A graph illustrating the number of client catch-ups for the reporting period and financial year to date.

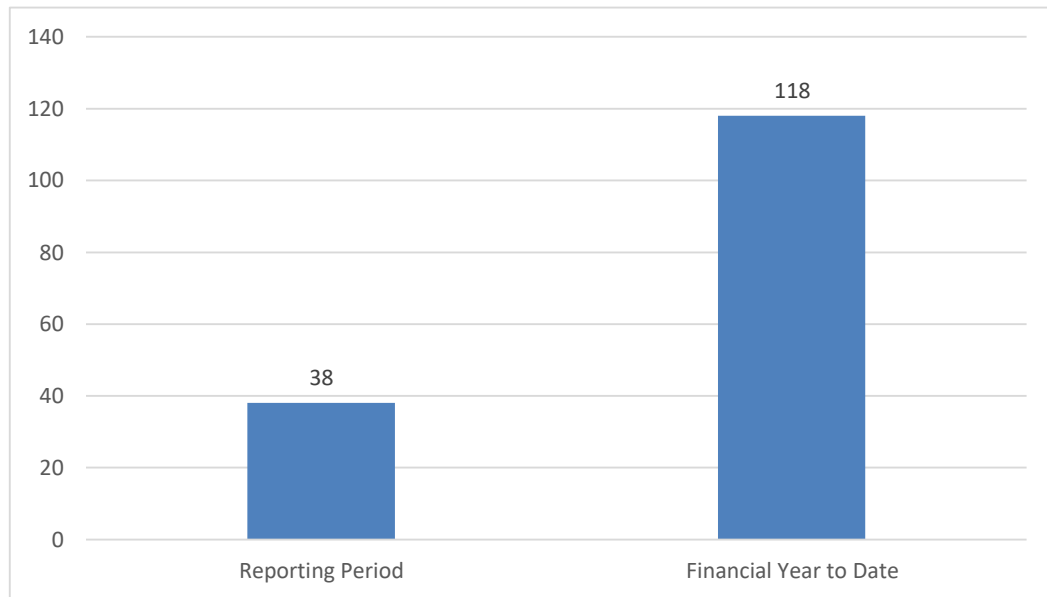


Table 1: Combined Clinic breakdown for the Quarter January 2025 – March 2025 and for the financial year to date.

Burnside Clinic				
Burnside Council - 2nd and 4th Monday of each month				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	45	99	147	301
Campbelltown	13	34	44	108
NPSP	9	26	41	108
Prospect	1	5	6	21
Walkerville	1	5	5	11
Unley	8	16	20	48
Other	3	7	16	42
Clinic Total Number	80	192	279	639

Campbelltown Clinic				
The ARC - 1st and 3rd Wednesday of each month				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	19	41	37	74
Campbelltown	45	113	133	315
NPSP	4	7	30	51
Prospect	2	5	2	5
Walkerville	1	1	5	13
Unley	1	5	2	8
Other	6	11	14	29
Clinic Total Number	78	183	223	495

Norwood Payneham & St Peters Clinic				
Weekly at EHA offices				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	58	135	188	466
Campbelltown	113	317	349	914
NPSP	122	293	407	962
Prospect	33	86	100	255
Walkerville	13	36	33	85
Unley	27	72	84	222
Other	21	60	63	170
Clinic Total Number	387	999	1224	3074

Prospect Clinic				
Prospect Clinic - held at Prospect Town Hall Payinthe				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	1	3	10	15
Campbelltown	3	4	4	5
NPSP	1	1	4	12
Prospect	17	41	54	137
Walkerville	1	4	3	10
Unley	0	0	1	1
Other	2	4	6	12
Clinic Total Number	25	57	82	192

Walkerville Clinic				
Walkerville Council - 1st Friday of each month				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	4	5	13	28
Campbelltown	7	15	24	63
NPSP	9	24	18	46
Prospect	7	18	12	32
Walkerville	2	6	15	33
Unley	0	0	4	15
Other	0	0	3	10
Clinic Total Number	29	68	89	227

Unley Clinic				
Civic Centre - 3rd Wed, 4th Fri and 1st Sat of each month				
Client council of origin	Jan - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	10	20	33	68
Campbelltown	7	15	30	67
NPSP	3	6	12	32
Prospect	0	0	7	12
Walkerville	0	0	0	0
Unley	37	106	136	327
Other	16	37	58	124
Clinic Total Number	73	184	276	630

Grand Total of all Clinic Sites				
Client council of origin	Jan 24 - Mar 25		YTD	
	Clients	Vaccines	Clients	Vaccines
Burnside	137	303	428	952
Campbelltown	188	498	584	1472
NPSP	148	357	512	1211
Prospect	60	155	181	462
Walkerville	18	52	61	152
Unley	73	199	247	621
Other	48	119	160	387
Clinic Total Number	672	1683	2173	5257

2025 School Immunisation Program

During the reporting period, the 2025 School Immunisation Program (SIP) commenced with first visits at 12 schools successfully completed across EHA's Constituent Councils and the City of Unley.

During the reporting period total of 2,328 vaccines have been administered. This represents an increase of 471 vaccines (or 24.96%) compared to the same period in 2024 (refer to Table 2). The significant increase is primarily attributed to the earlier scheduling of initial school visits in 2025.

EHA Administrative Team have ensured that all Immunisation Consent Cards reviewed by the Registered Immunisation Nurses are data entered into a state based immunisation inventory system prior to the school visits and by 30 April 2025 as required by SA Health SIP Protocols.

Table 2: School Vaccinations for Calendar Year to Date – January to March 2025

Council	Human Papillomavirus (HPV)	Diphtheria Tetanus and Pertussis (dTpa)	Meningococcal B (Men B)	Meningococcal ACWY (Men ACWY)	Total
Burnside	42	42	66	67	217
Campbelltown	151	153	133	133	570
NPSP	205	208	135	136	684
Prospect	123	125	92	93	433
Walkerville	73	74	72	71	290
Unley	27	27	40	40	134
Total	621	629	538	540	2,328

Workplace Influenza Program

EHA's 2025 Workplace Influenza Program officially commenced on 1 April 2025, marking the beginning of this year's seasonal flu vaccination initiative aimed at promoting health and wellbeing across workplaces.

As of 31 March 2025, a total of 74 workplace flu bookings had been confirmed, demonstrating strong early interest and engagement from businesses committed to safeguarding their employees during the flu season.

The program is set to run for approximately 13 weeks with an anticipated conclusion around 30 June 2025. To further boost bookings, a targeted relaunch of the program was undertaken in February and ongoing promotion during the Flu Workplace program.

EHA remains committed to supporting workplaces in delivering accessible and efficient flu vaccination services, contributing to a healthier community overall.

RECOMMENDATION

That:

The Immunisation Services Report is received.

CEO Indication under Clause 3.4(e) of the Eastern Health Authority Charter

Notice is hereby given in accordance with Clause 3.4(e) of the Eastern Health Authority Charter that the information and matters contained in the following documents related to item 9.1 'Instrument of Delegation Under the Charter for the Eastern Health Authority Report' may, if the Board of Management so determines, be considered in confidence under Clause 3.10(b) of the Eastern Health Authority Charter (with reference to the provisions of Part 3 of the *Local Government Act 1999*) at item 9.1 ('Instrument of Delegation Under the Charter for the Eastern Health Authority Report') of the Agenda for the Meeting of the Board on 14 May 2025 on the grounds set out at Section 90(3)(h) of the *Local Government Act 1999*.

A handwritten signature in black ink, appearing to read 'M. Livori', with a stylized, cursive script.

MICHAEL LIVORI
CHIEF EXECUTIVE OFFICER

9.1 DELEGATION UNDER THE CHARTER FOR EASTERN HEALTH AUTHORITY

RECOMMENDATION 1

1. Pursuant to Clause 3.10(b) of the Eastern Health Authority (EHA) Charter (and with reference to Section 90 of the *Local Government Act 1999*) the Board of Management (Board) orders that all members of the public, except the Chief Executive Officer, Team Leader Environmental Health, Team Leader Administration and Compliance and Senior Environmental Health Officer, be excluded from attendance at the meeting for Agenda Item 9.1 – Instrument of Delegation Under the Charter for the Eastern Health Authority Report.
2. The Board is satisfied that, pursuant to Section 90(3)(h) of the *Local Government Act 1999*, the information to be received, discussed or considered in confidence is namely:
 - legal advice from the Authority’s solicitors relating to delegations under the Eastern Health Authority Charter 2024.
3. Accordingly, on this basis, the Board considers the principle that meetings of the Board should be conducted in a place open to the public, has been outweighed by the need to keep the information or matter confidential.

RECOMMENDATION 2

That:

In exercise of the power under Clause 36 of Schedule 2 of the *Local Government Act 1999*, EHA delegates the powers and functions under the Charter for EHA dated 1 July 2024 and specified in the proposed Instrument of Delegation contained in Attachment 1 of the report dated 14 May 2025 and entitled Instrument of Delegation Under the Charter for Eastern Health Authority to the person(s) occupying the office or position detailed in the proposed Instrument of Delegation subject to the conditions and/or limitations specified herein or in the Schedule of Conditions in the proposed Instrument of Delegation.

RECOMMENDATION 3

That:

1. In accordance with Clause 3.11(c) of the Eastern Health Authority Charter, the Board of Management orders that the Report relating to Instrument of Delegation Under the Charter for the Eastern Health Authority Report, having been considered by the Board in confidence under Clause 3.10(b) of the Eastern Health Authority Charter (by virtue of Section 90(3)(h) of the *Local Government Act 1999*), be kept confidential and not available for public inspection.
2. The Board of Management delegates to the Chief Executive Officer the power to revoke this order in whole or in part.

3. The Board of Management authorises the Chief Executive Officer to disclose the contents of the Report relating to Instrument of Delegation Under the Charter for the Eastern Health Authority Report, as necessary to give effect to this decision.

HEAD DELEGATION

INSTRUMENT OF DELEGATION UNDER THE CHARTER FOR THE EASTERN HEALTH AUTHORITY

NOTES

1. Conditions or Limitations: conditions or limitations may apply to the delegations contained in this Instrument. Refer to the Schedule of Conditions at the back of this document.
2. Refer to the relevant EHA Board resolution(s) to identify when these delegations were made, reviewed and or amended.
3. Legend for Delegations
CEO – Chief Executive Officer

POWERS AND FUNCTIONS DELEGATED BY THE EASTERN HEALTH AUTHORITY (EHA) IN THIS INSTRUMENT TO THE OFFICERS AND EMPLOYEES OF EHA

Power/Function	Office/position to which power/function delegated
1. Functions	
1.1 The functions pursuant to clause 1.5 of the Charter for EHA dated 1 July 2024 (the EHA Charter) for or in connection with the purpose for which EHA is established, to:	CEO
1.1.1 take action to preserve, protect and promote public and environmental health within the area of the Constituent Councils;	CEO
1.1.2 cooperate with other authorities involved in the administration of public and environmental health;	CEO
1.1.3 promote and monitor public and environmental health whether in or, so far as the <i>Local Government Act 1999</i> and the EHA Charter allows, outside the area of the Constituent Councils;	CEO

**INSTRUMENT OF DELEGATION UNDER THE
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1.1.4	assist the Constituent Councils to meet their legislative responsibilities in accordance with the <i>South Australian Public Health Act 2011</i> (SA), the <i>Food Act 2001</i> (SA), the <i>Supported Residential Facilities Act 1992</i> (SA), the <i>Expiation of Offences Act 1996</i> (SA), the <i>Housing Improvement Act 1940</i> (SA) (or any successor legislation to these Acts) and any other legislation regulating similar matters that the Constituent Councils determine is appropriate within the purposes of EHA;	CEO
1.1.5	establish objectives and policy priorities for the promotion and protection of public and environmental health within the areas of the Constituent Councils;	CEO
1.1.6	provide immunisation programs for the protection of public health within the areas of the Constituent Councils or to ensure that such programs are provided;	CEO
1.1.7	promote and monitor standards of hygiene and sanitation;	CEO
1.1.8	promote and monitor food safety standards;	CEO
1.1.9	identify risks to public and environmental health within the areas of the Constituent Councils;	CEO
1.1.10	monitor and regulate communicable and infectious disease control;	CEO
1.1.11	licence and monitor standards in Supported Residential Facilities;	CEO
1.1.12	ensure that remedial action is taken to reduce or eliminate adverse impacts or risks to public and environmental health;	CEO
1.1.13	provide, or support the provision of, educational information about public and environmental health and provide or support activities within the areas of the Constituent Councils to preserve, protect or promote public health;	CEO

**INSTRUMENT OF DELEGATION UNDER THE
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1.1.14	keep the Constituent Councils abreast of any emerging opportunities, trends and issues in public and environmental health.	CEO
2.	POWERS	
2.1	The power pursuant to clause 1.6 of the EHA Charter to:	CEO
2.1.1	enter into contracts or arrangements with any government agency or authority, or councils, including the Constituent Councils;	CEO
2.1.2	appoint, employ, remunerate, remove or suspend officers, managers, employees and agents;	CEO
2.1.3	enter into contracts with any person for the acquisition or provision of goods and services;	CEO
2.1.4	receive financial contributions from the Constituent Councils;	CEO
2.1.5	publish information;	CEO
2.1.6	acquire, hold, deal with and dispose of any real or personal property, subject to the requirements of the Constituent Councils;	CEO
2.1.7	open and operate bank accounts;	CEO
2.1.8	invest any of the funds of EHA in any investment with the LG Finance Authority, provided that in exercising this power of investment the delegate must: 2.1.8.1 exercise the care, diligence and skill that a prudent person of business would exercise in managing the affairs of other persons; and 2.1.8.2 avoid investments that are speculative or hazardous in nature;	CEO
2.1.9	raise revenue by applying for grants and other funding from the State of South Australia or the Commonwealth of Australia	CEO

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**INSTRUMENT OF DELEGATION UNDER THE
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	and their respective agencies or instrumentalities on behalf of the Constituent Councils or on EHA's behalf.	
3.	COMMON SEAL	
3.1	The power pursuant to clause 1.8 b) of the EHA Charter to decide whom shall keep custody of the common seal.	CEO
4.	BOARD POLICIES AND CODES	
4.1	The power pursuant to clause 2.4 a) of the EHA Charter to ensure that appropriate policies, practices and procedures are implemented and maintained in order to:	CEO
4.1.1	ensure compliance with any statutory requirements; and	CEO
4.1.2	achieve and maintain standards of good public administration.	CEO
5.	MEETING PROCEDURE	
5.1	The power pursuant to clause 3.7 b) of the EHA Charter to document meeting procedures determined by EHA and make them available to the public.	CEO
6.	STAFF OF EHA	
6.1	The power pursuant to clause 5 a) of the EHA Charter to employ any staff required for the fulfillment of EHA's functions.	CEO
7.	IMPLEMENTATION OF REGIONAL HEALTH PLAN	
7.1	The power pursuant to clause 6.1 of the EHA Charter to undertake any strategy and attain any priority or goal which the Regional Public Health Plan specifies as EHA's responsibility.	CEO
8.	REVIEW	
8.1	The power pursuant to clause 6.2 of the EHA Charter to, in conjunction with the Constituent Councils, review the Regional Public Health Plan every five	CEO

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	years or at shorter time intervals as directed by the Constituent Councils.	
9.	REPORTING	
9.1	The power pursuant to clause 6.3 a) of the EHA Charter to, on a biennial basis, on behalf of the Constituent Councils, coordinate the preparation of a draft report that contains a comprehensive assessment of the extent to which, during the reporting period, EHA and the Constituent Councils have succeeded in implementing the Regional Public Health Plan.	CEO
9.2	The power pursuant to clause 6.3 b) of the EHA Charter to comply with guidelines issued by the Chief Public Health Officer in respect of the preparation of reports on regional public health plans.	CEO
9.3	The power pursuant to clause 6.3 c) of the EHA Charter to submit the draft report to the Chief Public Health Officer on behalf of the Constituent Councils as required.	CEO
10.	FINANCIAL MANAGEMENT	
10.1	The power pursuant to clause 7.1 a) of the EHA Charter to keep proper books of account.	CEO
10.2	The power pursuant to clause 7.1 of the EHA Charter to make books of account available for inspection by any Board Member or authorised representative of any Constituent Council at any reasonable time on request.	CEO
11.	BANK ACCOUNT	
11.1	The power pursuant to clause 7.2 a) of the EHA Charter to establish and maintain a bank account with such banking facilities and at a bank determined by the Board.	CEO
12.	BUDGET	
12.1	The power pursuant to clause 7.3 a) of the EHA Charter to prepare a proposed budget for each financial year in accordance with clause 25, Schedule 2 to the <i>Local Government Act 1999</i> .	CEO

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12.2	The power pursuant to clause 7.3 b) of the EHA Charter to refer the proposed budget to the Board at its April meeting and to the Chief Executive Officers of the Constituent Councils by 30 April each year.	CEO
13.	INSURANCE AND SUPERANNUATION REQUIREMENTS	
13.1	The power pursuant to clause 7.9 a) of the EHA Charter to register with the LGA Mutual Liability Scheme and comply with the rules of that scheme.	CEO
13.2	The power pursuant to clause 7.9 b) of the EHA Charter to register with the LGA Asset Mutual Fund or otherwise advise the Local Government Risk Services of EHA's insurance requirements relating to local government special risks in respect of buildings, structures, vehicles and equipment under the management, care and control of EHA.	CEO
13.3	The power pursuant to clause 7.9 c) of the EHA Charter to register with Hostplus and the LGA Workers Compensation Scheme and comply with the rules of those schemes.	CEO
14.	CONTENTS OF THE BUSINESS PLAN	
14.1	The power pursuant to clause 8.1 c) of the EHA Charter to provide a draft of the Business Plan to the Constituent Councils for the endorsement of the majority of those councils.	CEO
15.	REVIEW AND ASSESSMENT AGAINST THE BUSINESS PLAN	
15.1	The power pursuant to clause 8.2 b) of the EHA Charter to submit to the Constituent Councils, by 30 September each year in respect of the immediately preceding financial year, an annual report on the work and operations of EHA detailing achievement of the aims and objectives of its Business Plan and incorporating any other information or report as required by the Constituent Councils.	CEO
16.	DISPUTE RESOLUTION	
16.1	The power pursuant to clause 10 e) of the EHA Charter to promptly notify the other party to the dispute of:	CEO

**INSTRUMENT OF DELEGATION UNDER THE
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16.1.1	the nature of the dispute, giving reasonable details;	
16.1.2	what action (if any) EHA seeks to resolve the dispute.	
16.2	The power pursuant to clause 10 f) of the EHA Charter to, at the same time as providing notice of a dispute under clause 10 e) of the EHA Charter or at a later time, notify the other party to the dispute that EHA requires a meeting within 14 business days.	CEO
16.3	The power pursuant to clause 10 i) of the EHA Charter to refer a dispute to mediation.	CEO
16.4	The power pursuant to clause 10 j) (a) of the EHA Charter where a dispute is referred to mediation under clause 10 j) of the EHA Charter to agree the person to be the mediator.	CEO
16.5	The power pursuant to clause 10 j) (c) of the EHA Charter to agree to be bound by a decision of a mediator either at the time the mediator is appointed or subsequently.	CEO
16.6	The power pursuant to clause 10 j) (d) of the EHA Charter to agree the location for the mediation to occur.	CEO
16.7	The power pursuant to clause 10 j) (f) of the EHA Charter to cooperate in arranging and expediting the mediation, including by providing information in the possession or control of EHA reasonably sought by the mediator in relation to the dispute.	CEO
16.8	The power pursuant to clause 10 j) (g) of the EHA Charter to send a senior manager authorised to resolve the dispute to the mediation and to authorise the senior manager to resolve the dispute.	CEO
16.9	The power pursuant to clause 10 j) (j) of the EHA Charter to withdraw from mediation if in the reasonable opinion of the delegate, the mediator is not acting in confidence or with good faith or is acting for a purpose other than resolving the dispute.	CEO
16.10	The power pursuant to clause 10 j) (k) (iv) of the EHA Charter to report back to the mediator within 14 days	CEO

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on actions taken based on the outcomes of the mediation.	
16.11 The power pursuant to clause 10 j) (l) of the EHA Charter to approve payment of EHA's own costs in respect of the mediation, plus an equal share of the costs and expenses of the mediator.	CEO
17. REGISTER OF GIFTS	
17.1 The power pursuant to clause 12.8 of the EHA Charter to publish on EHA's website a register of gifts and benefits.	CEO

**INSTRUMENT OF DELEGATION UNDER THE
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SCHEDULE OF CONDITIONS

**CONDITIONS OR LIMITATIONS APPLICABLE TO DELEGATIONS CONTAINED
IN THIS INSTRUMENT**

Paragraph(s) in instrument to which conditions/limitations apply	Conditions / Limitations