

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 24 June 2026 commencing at 6:30pm.

MEMBERS PRESENT:

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

In attendance:

M Livori	Chief Executive Officer
A Fahey	Manager Administration & Compliance
M Gibbs	Senior Environmental Health Officer

1 OPENING:

The meeting was declared open by the Cr P Cornish at 6:xxpm.

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 C Granozio	Norwood, Payneham & St Peters
Cr T Nguyen	Prospect
Cr J Nenke	Corporation of the Town of Walkerville
N Conci	Manager Environmental Health

5 CONFIRMATION OF MINUTES:

Cr M Daws moved:

The minutes of the meeting of the Board held on 29 April 2026 be taken as read and confirmed.

Seconded by Cr P Cornish

CARRIED UNANIMOUSLY

1: 062026

6 MATTERS ARISING FROM THE MINUTES:

Nil

7 ADMINISTRATION REPORT

7.1 FINANCE REPORT

Cr K Moorhouse moved:

That:

1. The Financial Report is received.

Seconded by Cr J Allanson

CARRIED UNANIMOUSLY

2: 062026

7.2 ADOPTION OF ANNUAL BUSINESS PLAN AND BUDGETED FINANCIAL STATEMENTS FOR 2026/2027

Cr K Moorhouse moved:

That:

1. The report regarding the adoption of the Eastern Health Authority Annual Business Plan and Budgeted Financial Statements for 2026/2027 is received.
2. The Eastern Health Authority Annual Business Plan and Budget for 2026/2027 provided as attachment 1 to the report is adopted.
3. A copy of the Eastern Health Authority Annual Business Plan 2026/2027 incorporating the Budget is provided to the Chief Executive Officer of each Constituent Council within five business days.

Seconded by Cr J Allanson

CARRIED UNANIMOUSLY

3: 062026

7.3 REVIEW OF THE FOOD BUSINESS INSPECTION FEE POLICY

Cr J Allanson moved:

That:

1. The report regarding the review of the Food Business Inspection Fee Policy is received.
2. The Policy entitled Food Business Inspection Fee Policy, marked attachment 2 to this report, is adopted.

Seconded by Cr M Daws

CARRIED UNANIMOUSLY 4: 062026

7.4 REVIEW OF THE FOOD BUSINESS AUDIT FEE POLICY

Cr J Allanson moved:

That:

1. The Food Business Audit Fee Policy report is received.
2. The Food Business Audit Fee Policy, marked attachment 2 to this report, is adopted.

Seconded by M Hammond

CARRIED UNANIMOUSLY 5: 062026

7.5 EASTERN HEALTH AUTHORITY ENFORCEMENT POLICY REVIEW

Cr J Allanson moved:

That:

1. The report regarding the Eastern Health Authority Enforcement Policy is received.
2. The Policy entitled Eastern Health Authority Enforcement Policy, marked attachment 2 to this report, is adopted.

Seconded by M Hammond

CARRIED UNANIMOUSLY 6: 062026

7.6 SAFE ENVIRONMENT POLICY REVIEW

M Hammond moved:

That:

1. The report regarding the Safe Environment Policy Review is received.
2. The Safe Environment Policy marked as Attachment 2 to the Safe Environment Policy Review Report dated 24 June 2026, be adopted as amended, and that advice be sought regarding any requirement for Board members to hold a Working with Children Clearance.

Seconded by Cr M Daws

CARRIED UNANIMOUSLY 7: 062026

7.7 COMPLAINTS HANDLING POLICY

Cr K Moorhouse moved:

That:

1. The Complaints Handling Policy report is received.
2. The Complaints Handling Policy marked attachment 2 to the Complaints Handling Policy Report dated 24 June 2026 is adopted.

Seconded by Cr K Barnett

CARRIED UNANIMOUSLY 8: 082025

7.8 SUPPORTED RESIDENTIAL FACILITY LICENSING REPORT

Cr M Daws moved:

That:

1. The Supported Residential Facilities 2026-2027 Licensing Report is received.
2. The applicants detailed below be granted a licence to operate a Supported Residential Facility for a period of 12 months from 1 July 2026 to 30 June 2027 under the provisions of the *Supported Residential Facilities Act 1992* subject to conditions as detailed:

Applicant	Premises
Magill Lodge Supported Residential Care Pty Ltd	Magill Lodge Supported Residential Care 524 Magill Road Magill SA 5072
Conditions	
<ol style="list-style-type: none"> 1. Ensure that Residents' contracts are signed either by the resident themselves or by a designated representative. Each signature must include the date it was executed. 2. The proprietor must, where there is no identifiable or contactable next of kin, or where next of kin are unable or unwilling to act, take reasonable steps to identify and contact the next of kin within their residential contracts or any legally appointed substitute decision-maker. 3. Ensure that the facility, along with all linens and mattresses, is upheld in a clean, safe, and hygienic condition. 4. If there are 30 or more residents of the facility, ensure that the staff includes both a cook and a cleaner in addition to the members of staff who provide personal care services to residents of the facility; and in any case, ensure that the facility is staffed so as to ensure, at all times, the proper care and safety of residents. 5. Comply with the requirements of Section 157 of the <i>Planning and Development and Infrastructure Act, 2016</i>, in relation to Fire Safety by maintaining all Essential Safety Provisions as required under the relevant schedule of options listed in the Ministerial Building Standard (MBS 002 – Maintaining the performance of essential safety provisions) for the premises. 	
Applicant	Premises
Palm Gardens Consolidated Pty Ltd	Magill Estate Retirement Village 122 Reid Avenue Magill SA 5072
Conditions	
<ol style="list-style-type: none"> 1. Comply with the requirements of Section 157 of the <i>Planning and Development and Infrastructure Act, 2016</i> in relation to Fire Safety by maintaining all Essential Safety Provisions as required under the relevant schedule of options listed in the Ministerial Building Standard (MBS 002 – Maintaining the performance of essential safety provisions) for the premises. 	
Applicant	Premises
MGB Residential Care Pty Ltd	Prospect Community Village 6 Dean St Prospect SA 5082
Conditions	
<ol style="list-style-type: none"> 1. The Licensee will grant access to the Facility by an authorised officer under the Act, as required by section 22 of the Act, upon attendance during reasonable working hours, to 	

inspect the facility, documents and, as required and reasonable, speak to staff and residents.

2. The Licensee must, upon request by an authorised officer attending the Facility under the Act, provide a room within the Facility which allows the authorised officer unrestricted access to any documents they are entitled to see under section 22 of the Act, noting some documents are digital.
3. Where the Authority or an authorised officer requests a document subject to section 22 of the Supported Residential Facilities Act 1992 (Act), and that document is subject or potentially subject to confidentiality requirements under the NDIS scheme, the Licensee will seek authority from the appropriate delegate at the NDIS Scheme or Commission, as appropriate, to authorise release of the document.
4. The Licensee will, upon written request, provide the Authority with:
 - a. A list of all policies and procedures currently in place; and
 - b. A copy of the Staffing Register; and
 - c. A copy of the Audit Report prepared for the purposes of compliance with NDIS requirements dated 2024 and 2025, noting that the NDIS permits a time to rectify any non-compliance; and
 - d. A copy of the Profit and Loss & Balance Sheets from the most recent financial year; and
 - e. A copy of the Facility lease; and
 - f. A copy of the document external support phone numbers provided to residents as a result of the 16 June 2023 NDIS Outcome Report.
5. Pursuant to Regulation 14 of the *Supported Residential Facilities Regulations 2024 (Regulations)*, the Licensee will notify the Authority of "certain events" within 14 days of becoming aware of the same:
 - a. Any known complaint to, or investigation by the NDIS Commission;
 - b. Any complaint by a resident or their guardian, which could adversely affect the health or wellbeing of any resident;
 - c. In relation to any other "certain event".
6. The Licensee will grant access to the Facility by an authorised officer under the Act, as required by section 22 of the Act, upon attendance during reasonable working hours, to inspect the facility, documents and, as required and reasonable, speak to staff and residents.
7. The Licensee must, upon request by an authorised officer attending the Facility under the Act, provide a room within the Facility which allows the authorised officer unrestricted access to any documents they are entitled to see under

section 22 of the Act, noting some documents are digital, including:

- a. The Staff Register maintained in accordance with regulation 16(1)(1) of the Regulations;
 - b. All policies and procedures in place at the relevant time;
 - c. The resident contracts for all Residents;
 - d. The service plans prepared in accordance with section 40 of the Act and regulation 6 of the Regulations for all Residents;
 - e. The records maintained for the purposes of Regulation 7(2) of the Regulations (if not contained within the service plan);
 - f. The Complaints Register, including details of any appeals;
 - g. The Facility's Prospectus;
 - h. Financial records which are maintained in accordance with Regulation 15(1)(c) of the Regulations;
 - i. The Visitors Book maintained in accordance with Regulation 7(1) of the Regulations;
 - j. A copy of the current Facility menu;
 - k. Staff Roster maintained in accordance with Regulation 16(1)(g) of the Regulations;
 - l. Facility managed Medical Records and Medication Lists in accordance with Regulation 13 of the Regulations.
8. The Licensee will provide copies of any document as requested by the Authority or an authorised officer pursuant to section 22 of the Act.
9. The Licensee will advise all residents and their guardians of the existence of the dispute resolution process available to them under section 43 of the Act and provide the Authority's contact details to all residents and their guardians.
10. Comply with the requirements of Section 157 of the *Planning and Development and Infrastructure Act, 2016* in relation to Fire Safety by maintaining all Essential Safety Provisions as required under the relevant schedule of options listed in the Ministerial Building Standard (MBS 002 – Maintaining the performance of essential safety provisions) for the premises.
11. Comply with the requirements of Section 71 of the Development Act 1993 in relation to Fire Safety by maintaining all Essential Safety Provisions as required under the relevant schedule of options listed in the Ministers Specification SA 76 for the premises.
12. The proprietor must, where there is no identifiable or contactable next of kin, or where next of kin are unable or unwilling to act, take reasonable steps to identify and contact the next of kin within their residential contracts or any legally

appointed substitute decision-maker.

13. These conditions will be reviewed upon an application for renewal for a licence to the Authority.

3. The applicant detailed below be granted a licence to operate a Supported Residential Facility for a period of 4 months from 1 July 2026 to 31 October 2026 under the provisions of the *Supported Residential Facilities Act 1992* subject to conditions as detailed:

Applicant	Premises
Bellara Aged Care Village Pty Ltd	Bellara Village 98 Newton Road Campbelltown SA 5074
Conditions	
<ol style="list-style-type: none"> 1. The Proprietor must operate the facility strictly in accordance with the information contained in the current prospectus for the facility. 2. The Proprietor must lodge a copy of the current prospectus with the Eastern Health Authority within 14 days of the granting of this licence. 3. The Proprietor must ensure that a person is provided with a copy of the current prospectus for the facility: <ol style="list-style-type: none"> a. with respect to all current residents, within 14 days of the granting of this licence; b. before a person enters into a resident contract (including a replacement resident contract). 4. The Proprietor must review the prospectus within 60 days of the granting of this licence to ensure that it clearly and distinctly specifies and separates the services provided to residents under the Prospectus (including the associated costs) from those offered through National Disability Insurance Scheme arrangements. 5. With respect to any alteration of the prospectus for the facility, the Proprietor must undertake discussions or consultations with the residents of the facility before finalising the alteration. 6. The Proprietor must lodge a copy of: <ol style="list-style-type: none"> a. any altered prospectus; and b. the written statement required by regulation 5(2)(b) of the Supported Residential Facilities Regulations 2024, with the Eastern Health Authority within 14 days after the alteration is brought into effect. 7. The Proprietor must maintain a record detailing: <ol style="list-style-type: none"> a. the date when each resident of the facility was provided with a copy of the current prospectus for the facility in accordance with condition 3; and 	

- b. the date and nature of any consultations or discussions undertaken with residents in accordance with condition
8. The Proprietor must produce for inspection a copy of the record required by condition 7 upon request of an authorised officer.
9. The Proprietor must:
 - a. review each resident contract between it and each resident of the facility within 60 days of the granting of this licence to ensure that the contract complies with the requirements of sections 38 and 39 of the Supported Residential Facilities Act 1992 and regulation 6 of the Supported Residential Facilities Regulations 2024;
 - b. in circumstances where the Proprietor identifies that any contract between it and a resident of the facility is non-compliant with these requirements, use its best endeavours to enter into a new, compliant, contract with that resident within 14 days of identifying the non-compliant contract.
10. The Proprietor must ensure that a person is provided with a statement in the form required by Schedule 2 of the Supported Residential Facilities Regulations 2024:
 - a. with respect to all current residents, within 14 days of the granting of this licence; and
 - b. before a person enters into a resident contract (including a replacement resident contract).
11. The Proprietor must ensure that a person is provided with a copy of the rules and policies that will apply to the person as a resident of the facility:
 - a. with respect to all current residents, within 14 days of the granting of this licence; and
 - b. before a person enters into a resident contract (including a replacement resident contract).
12. The Proprietor must ensure that a person is provided with a copy of a checklist against which the person may ensure that they have been given a copy of the documents required by regulation 6(3)(a) of the Supported Residential Facilities Regulations 2024 and that they have been informed of the matter set out in regulation 6(3)(b)(ii) of these Regulations:
 - a. with respect to all current residents, within 14 days of the granting of this licence; and
 - b. before a person enters into a resident contract (including a replacement resident contract).
13. The Proprietor must, for each resident of the facility, within 60 days of the granting of this licence, prepare a service plan in conjunction with the resident that complies with the requirements of section 40 of the *Supported Residential*

Facilities Act 1992 and regulation 6(4) of the *Supported Residential Facilities Regulations 2024*. The service plan must be specific; must set out details of the resident's needs; and must explain how these needs will be managed through the provision of personal care services. Service plans must not contain vague descriptions of any personal care services provided, and clearly detail all of the services provided to the resident, including those services provided under arrangements with the National Disability Insurance Scheme by the Proprietor or other persons.

14. The Proprietor must ensure that each resident is provided with a copy of their service plan:
 - a. within 2 days of its preparation (in respect of a plan required by condition 13); and
 - b. before a person enters into a resident contract (including a replacement resident contract).
15. The Proprietor must maintain a record detailing:
 - a. the date when each resident of the facility was provided with a copy of the documents required by conditions 10, 11, 12 and 14;
 - b. the making available upon request to the resident and their representative or a medical practitioner or other health service provider involved in providing care to the resident of any of these documents.
16. The Proprietor must produce for inspection a copy of the record required by condition 15 upon request of an authorised officer.
17. Comply with the requirements of Section 157 of the *Planning and Development and Infrastructure Act, 2016* in relation to Fire Safety by maintaining all Essential Safety Provisions as required under the relevant schedule of options listed in the Ministerial Building Standard (MBS 002 – Maintaining the performance of essential safety provisions) for the premises.
18. The Proprietor must maintain the Food Safety Program and relevant records in accordance with Food Safety Standards 3.2.1 and 3.3.1. The business must include appropriate Listeria Management Controls, make and keep records in compliance with the Food Safety Program, and provide evidence upon request to an authorised officer.

Seconded by Cr K Barnett

CARRIED UNANIMOUSLY 9: 062026

8.1 ENVIRONMENTAL HEALTH ACTIVITY REPORT

Cr K Barnett moved:

That:

1. The Environmental Health Activity Report is received.

Seconded by Cr J Allanson

CARRIED UNANIMOUSLY 10: 062026

8.2 IMMUNISATION REPORT

Cr K Barnett moved:

That:

2. The Immunisation Report is received.

Seconded by M Hammond

CARRIED UNANIMOUSLY 11: 062026

9 CORRESPONDENCE

Nil

10 CLOSURE OF MEETING:

The Chairperson, Cr P Cornish, declared the meeting closed at 7.31pm.

The foregoing minutes were printed and circulated to EHA Members and member Councils on 26 June 2026.

Cr P Cornish

CHAIRPERSON