Annual Reports of the Regional Subsidiaries
During the past year the Eastern Health Authority has continued to provide outstanding public and environmental health services to constituent Councils and the community, and to meet increased demand for services in some areas. In particular, attendance at Public Immunisation Clinics has increased dramatically over the past year, with consequent resource implications for the Authority. The outbreak of Swine Flu and the threat of a national pandemic set new priorities for the Eastern Health Authority, which has played a leading role in provision of information and educational material to Councils and their communities. This experience reinforces the role that local government health authorities can play in containing future pandemics.

Recent media reports indicate that some medical practitioners will no longer provide immunisation services. If the trend for immunisation services to be provided by local government rather than medical practitioners continues, the current inequitable levels of government subsidy can only be addressed through a coordinated approach by local government. The Eastern Health Authority will continue to monitor statistics and liaise with the Local Government Association on this issue.

The Board of Management comprises two delegates appointed by each constituent Council (the City of Burnside, Campbelltown City Council, the City of Norwood, Payneham and St Peters, the City of Prospect and the Town of Walkerville) and continues to meet every alternate month. Other members of constituent Councils are welcome to attend as observers and meetings are open to the public. The Eastern Health Authority recently adopted a revised Code of Conduct for Board Members based on the local government model and is currently reviewing its Charter. Under the Local Government Act, subsidiaries are required to adopt an Annual Business Plan and Budget. These were adopted on 24 June 2009 for the 2009/2010 financial year.

One of the important roles of the Eastern Health Authority is the auditing and licensing of Supported Residential Facilities, which accommodate some of the most disadvantaged and vulnerable residents in our community. The Authority also provides contract services to the City of Unley for facilities in their area. During the past year eighteen licences were approved, some with conditions.

At a time when Council amalgamations seem to be back on the agenda, at both state and national level, the Eastern Regional Alliance of Councils and subsidiaries such as the Eastern Health Authority provide excellent alternative models for collaboration and the efficient provision of cost-effective services to ratepayers and residents.

Finally, I wish to acknowledge the commitment and dedication of the CEO and staff of the Eastern Health Authority, who continue to strive for excellence in the provision of environmental health services to our community. I also thank Cr Sue Whitington for her dedicated service as Chairperson of the Board of Management for the previous six years, and thank constituent Councils and members of the Board of Management for their continued support.
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The Eastern Health Authority Inc (the ‘Authority’) is a regional subsidiary established pursuant to Section 43 of the Local Government Act 1999. Section 43 provides for two or more councils (known as constituent councils) to establish a subsidiary to perform a function of the council in a joint service delivery arrangement under the Local Government Act or other Acts.

The Authority provides services on behalf of its constituent councils which are:
- City of Burnside
- Campbelltown City Council
- City of Norwood Payneham and St Peters
- City of Prospect
- Corporation of the Town of Walkerville

In addition, the Authority is contracted by the Adelaide City Council to provide immunisation services and the City of Unley to license supported residential facilities.

The Authority discharges its constituent councils’ environmental health responsibilities that are mandated in the following legislation:
- Public and Environmental Health Act 1987
- Food Act 2001
- Supported Residential Facilities Act 1992
- Environment Protection Act 1993

A wide range of functions are performed to protect people’s health and wellbeing. These include the provision of immunisation services, hygiene and sanitation control, licensing and monitoring of supported residential facilities and surveillance of food premises.

The table below provides a snapshot of the environmental health services provided for each constituent council.

<table>
<thead>
<tr>
<th>Service</th>
<th>Burnside</th>
<th>Campbelltown</th>
<th>Norwood, Payneham &amp; St Peters</th>
<th>Prospect</th>
<th>Walkerville</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rateable properties</td>
<td>20254</td>
<td>20170</td>
<td>19317</td>
<td>9453</td>
<td>3360</td>
<td>72554</td>
</tr>
<tr>
<td>Population of council</td>
<td>43674</td>
<td>47527</td>
<td>34865</td>
<td>19814</td>
<td>7202</td>
<td>153082</td>
</tr>
<tr>
<td>Number of food premises</td>
<td>249</td>
<td>235</td>
<td>397</td>
<td>142</td>
<td>31</td>
<td>1054</td>
</tr>
<tr>
<td>Swimming pools</td>
<td>20</td>
<td>5</td>
<td>23</td>
<td>2</td>
<td>2</td>
<td>52</td>
</tr>
<tr>
<td>Cooling towers &amp; warm water systems</td>
<td>23</td>
<td>9</td>
<td>24</td>
<td>7</td>
<td>7</td>
<td>70</td>
</tr>
<tr>
<td>Supported Residential Facilities &amp; Lodging Houses</td>
<td>6</td>
<td>4</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>Environmental health complaints</td>
<td>110</td>
<td>132</td>
<td>175</td>
<td>33</td>
<td>13</td>
<td>463</td>
</tr>
<tr>
<td>Personal grooming, body art and health care</td>
<td>61</td>
<td>52</td>
<td>88</td>
<td>29</td>
<td>8</td>
<td>238</td>
</tr>
<tr>
<td>2009 SBIP Year 8 enrolment numbers</td>
<td>577</td>
<td>646</td>
<td>651</td>
<td>190</td>
<td>68</td>
<td>2132</td>
</tr>
<tr>
<td>2009 SBIP Year 9 enrolment numbers</td>
<td>563</td>
<td>671</td>
<td>740</td>
<td>207</td>
<td>72</td>
<td>2253</td>
</tr>
<tr>
<td>Immunisation clinics – vaccines given</td>
<td>1783</td>
<td>2032</td>
<td>4044</td>
<td>520</td>
<td>381</td>
<td>8760</td>
</tr>
</tbody>
</table>

The diversity and increasing complexity of environmental health makes it difficult for small organisations to have staff who are experienced and fully competent across all spheres of the profession. The Authority is structured to proficiently deliver all required services on behalf of its constituent councils.
The Authority is a body corporate, governed by a Board of Management. The Board has the responsibility of managing the business and administrative affairs of the Authority, ensuring that it acts in accordance with its Charter.

Two elected members from each constituent council comprise the Board, which consists of ten members.

The Board met eight times during the year to consider the Authority’s business. Meetings were conducted in accordance with the Local Government (Procedures and Meetings) Regulations 2000.

### BOARD OF MANAGEMENT 2008-09

<table>
<thead>
<tr>
<th>Member</th>
<th>Status</th>
<th>Meetings attended</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>City of Burnside</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cr Chris Morley</td>
<td>Board Member (July 2008 – January 2009)</td>
<td>3</td>
</tr>
<tr>
<td>Cr Andrew Hillier</td>
<td>Proxy Member (July 2008 – April 2009) Board Member (May 2009 – June 2009)</td>
<td>3</td>
</tr>
<tr>
<td><strong>Campbelltown City Council</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cr Anne Fitzharris</td>
<td>Board Member</td>
<td>2</td>
</tr>
<tr>
<td>Cr Terence Cody</td>
<td>Board Member</td>
<td>8</td>
</tr>
<tr>
<td>Cr Helen Nichols</td>
<td>Proxy Member</td>
<td>1</td>
</tr>
<tr>
<td><strong>City of Norwood, Paynehem &amp; St Peters</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cr Lance Manser</td>
<td>Board Member</td>
<td>7</td>
</tr>
<tr>
<td>Cr Kevin Duke</td>
<td>Proxy Member</td>
<td>1</td>
</tr>
<tr>
<td><strong>City of Prospect</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cr Tim Newall</td>
<td>Board Member</td>
<td>5</td>
</tr>
<tr>
<td>Cr Bruce Preece</td>
<td>Board Member (July 2008 – February 2009)</td>
<td>3</td>
</tr>
<tr>
<td>Cr Grace Fitzpatrick</td>
<td>Proxy Member (July 2008 – April 2009) Board Member (May 2009 – June 2009)</td>
<td>2</td>
</tr>
<tr>
<td>Cr Monica Lee</td>
<td>Proxy Member (May 2009 – June 2009)</td>
<td>1</td>
</tr>
<tr>
<td><strong>Corporation of the Town of Walkerville</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cr Heather Wright</td>
<td>Board Member</td>
<td>6</td>
</tr>
<tr>
<td>Cr Rex Adams</td>
<td>Proxy Member</td>
<td>0</td>
</tr>
</tbody>
</table>
BOARD OF MANAGEMENT (AS AT 30 JUNE 2009)

Carolyn Wigg  
Chairperson

David Lincoln  
Deputy Chairperson

Andrew Hillier

Terence Cody

Anne Fitzharris

Lance Manser

Sue Whittington

Grace Fitzpatrick

Tim Newall

Heather Wright
The efficient and effective management of the affairs of the Authority are the responsibility of the Chief Executive Officer who is appointed by the Board of Management. The responsibilities of the Chief Executive Officer include the employment of staff to ensure that the Authority’s operations are effectively undertaken.

The staffing of the Authority as at 30 June 2009 was:

- Chief Executive Officer
- Senior Environmental Health Officer
- Environmental Health Officers (7.0 FTE)
- Team Leader Immunisation Services
- Immunisation Nurses (2.0 FTE plus casual staff employed as required)
- Team Leader Administration
- Clerical Officers (1.4 FTE plus temp staff employed as required)
- Medical Officer of Health (Dr Rodney Pearce – consultant)
- Auditor (Dean Newberry and Partners)

The Annual Business Plan 2008-2009 translates strategic directions contained in the 2005 Strategic Plan into actions, outputs and outcomes for the financial year. Influential factors for 2008-09 included:

- the commencement of auditing of food safety plans for businesses with ‘vulnerable populations’
- the commencement of a contract to licence and monitor supported residential facilities for the City of Unley
- the commencement of new legislation requiring registration and auditing of cooling towers and warm water systems.

The Annual Business Plan 2008-2009 translates strategic directions contained in the 2005 Strategic Plan into actions, outputs and outcomes for the financial year. Influential factors for 2008-09 included:

- Increase in required visits for the ongoing school immunisation program.

These priority areas were the focus for staff during the reporting period.
The past year has seen a number of challenges confront the Eastern Health Authority, and also a number of notable achievements. Developing a new image is one achievement of which I am extremely pleased with.

Our organisation serves as an outstanding example of the renewed commitment and demand for local government to adopt a more regional focus in the structure of their organisations and the delivery of their services. The five constituent councils who currently form the Authority are all signatories to the Eastern Region Alliance which formalises a commitment to resource sharing and collective action.

Public health service delivery under the model of a local government regional subsidiary is unique. For this reason, it was identified that the role the Authority plays on behalf of its constituent councils should be actively promoted within the community.

A new website was also created that is functional, user-friendly and reflects the Authority’s contemporary branding. The website (www.eha.sa.gov.au) enables members of the public, constituent councils and other clients convenient access to information about the organisation. A variety of documents and reports are now publicly available and from the home page, parents can quickly access the timetable of the Authority’s popular immunisation clinics.

Speaking of immunisation, the past year has proven to be extremely challenging. The demand for our public immunisation services continues to grow with a 25% increase seen over the last 3 years. The demand peaked in April with the publicity surrounding Swine Flu and Whooping Cough outbreaks, and saw appointment clinics booked out up to three weeks in advance and long waiting times for clients.

To portray a modern contemporary and professional image, a new logo was created during the reporting period. The logo has a community health focus and reflects the layers of services that the Authority provides. The use of the colour green and the people within the design indicates the focus on the environmental health of the community.

A tag line of “Local Councils working together to protect the health of the community” has been used to more clearly reflect the fact that the Authority is a Local Government organisation and that it collectively serves its constituent council’s communities.

All handout material, brochures and banners have been redesigned, stylised and branded in the theme of the logo. These will be displayed around libraries, civic centres and other community venues to increase awareness of the services offered by the Authority.
Our ongoing School Based Immunisation program has also grown in size and the combined increase in workloads necessitated a review of our immunisation services. More than 22,000 vaccines were delivered during the past year.

The Board of Management agreed to provide additional staffing resources in 2009-2010 at a special meeting convened in May and a major review will occur during the year to determine appropriate long-term strategies. The roll-out of the “Swine Flu” vaccine is imminent and we are certain that Local Government will be asked to play a role in its delivery. This is likely to place further pressure on the organisation and staff and will be yet another challenge to be faced.

Challenges in the Public Health area included the introduction in October 2008 of the Public and Environmental Health (Legionella) Regulations 2008 requiring all high risk manufactured water systems to be registered. This has necessitated the development of a registration system and up-skilling of officers.

Also introduced in October 2008, after a two-year lead in period, was Food Safety Standard 3.3.1 requiring businesses that serve vulnerable populations, such as hospitals, aged care, childcare and delivered meals organisations, to implement an audited food safety program.

Seven Environmental Health Officers undertook extensive training and were nationally accredited and approved by SA Health as auditors for the purpose of the Standard. One hundred and fourteen audits were conducted during the reporting period.

Food safety enforcement is core business for the environmental health team and I believe the Authority to be an industry leader in this area. The total number of inspections conducted for 2008-09 increased by 75% when compared to 2007-08. The main increase was in re-inspections, which increased from 172 to 522. The increase in re-inspections is primarily due to officers taking more enforcement action that is demonstrated by the 171 improvement notices issued under the Food Act 2001, a 150% increase on the previous year.

To maintain this level of enforcement during a period when food auditing was introduced is quite an achievement. We hope and expect that this significant effort in enforcement activity will result in improved standards and less problems over the next year.

Our Emergency Management Plan which was developed after successfully applying for a grant from the Australian Government under the ‘Working Together to Manage Emergencies’ initiative commenced implementation during the year.

It was extremely pleasing that the Department of Health (SA) Award for Excellence in Leadership was awarded to the Authority in recognition of this emergency management planning initiative.

As the Chief Executive Officer, I am extremely lucky and proud to work with a group of staff whose commitment and professionalism is unquestionable. The quality of service that is delivered by these dedicated staff in the face of surges of demand and a changing legislative environment is admirable. I sincerely thank them for their efforts during the past year.

Also I would like to thank the Board of Management who continue to be totally supportive of the extremely important role the Authority plays on behalf of its Constituent Councils.

**Information reports**

There were no (0) requests for information under the provisions of the Freedom of Information Act for the year ending 30 June 2009.

**Confidentiality Provisions**

During the 2008-09 financial year, the confidentiality provisions of the Local Government Act were used by the Authority a total of three times to consider matters in confidence.
Promotion of public and environmental health is a statutory requirement of all Councils under the Public and Environmental Health Act 1987, which states:

Section 12A(2) ...it is the duty of a local council –

(a) to promote proper standards of public and environmental health in its area; and
(b) to take reasonable steps to prevent the occurrence and spread of notifiable diseases within its area.

Health promotion complements and supports the Authority’s enforcement functions and is vital to creating healthy living environments and positive health outcomes. In addition to special projects described below, health promotion activities routinely undertaken include:

- Supply of South Australia Food Handler Update (SAFHU) newsletter to all food businesses.
- Promotion of public health messages via publications produced by the constituent councils.
- Display of public health promotional and hand-out material in the customer service areas of the constituent councils, libraries and the Authority.

PREVENTING KITCHEN NIGHTMARES – A GUIDE TO FOOD SAFETY FUNDAMENTALS

‘Preventing Kitchen Nightmares – A Guide to Food Safety Fundamentals’ was launched in June 2008.

The food handler training program aims to provide food handlers, proprietors and managers with an understanding of the basic principles of personal hygiene, food storage, preparation, cleaning and sanitising. The session is three hours in duration and a combination of training methods are used. A presentation on the theory of food safety and photos from inspections highlight common noncompliance with legislative requirements. Group activities encourage interaction between participants and address the safe storage of food in refrigeration (as shown in the photo below) and proper hand-washing technique. Workbooks and information handouts are provided for future reference and to assist participant’s comprehension of key concepts.

The food handler training program caters to various businesses types and was attended by 138 people during the year, predominantly from aged care, child care and hospitals. In-house training was delivered in response to positive feedback from attendees and employers requesting training of all food handlers within their businesses across the metropolitan area.

Environmental Health Officers have observed an improvement in the knowledge of food handlers who have attended and of the standard of food hygiene in the premises they work. Furthermore, the training has improved the rapport with food handlers, proprietors and managers in the food industry, resulting in a positive acceptance of officers into food businesses during food inspections.
WASH WIPE COVER – DON’T INFECT ANOTHER

In support of SA Health’s ‘Wash Wipe Cover – Don’t Infect Another’ initiative, health promotion materials were distributed to different community venues and businesses at the commencement of the 2009 winter season. The initiative aims to reduce the transmission of colds, flu and gastro by promoting simple infection control techniques, particularly hand and respiratory hygiene. The message is communicated through a variety of pictorial posters and fact sheets plus ‘The Sneeze’ television advert developed by SA Health.

The SA Health advert highlighted the spread of infectious droplets through unprotected sneezing

The printed information was initially distributed to constituent council staff and they assisted in the dissemination of materials to libraries and community centres. Other target groups included childcare related organisations, food businesses, beauty industry, aged care and leisure centres such as gyms and public pools. A total of 530 organisations received information packages relevant to their business.

To evaluate the effectiveness of the ‘Wash Wipe Cover’ campaign within the Authority’s workplace, a survey was distributed to all staff. The survey results revealed that the promotional material was sighted and read by staff.

Although staff were already applying good hygiene practices of hand washing and covering the mouth when coughing and sneezing, there was an improvement in other recommended practices included wiping down surfaces and the use of anti-bacterial hand gels when required.

The information provided to staff through visual posters and email proved to be an effective method of distribution and it was agreed that the campaign was effective in promoting better health and hygiene in the workplace.

FIGHT THE BITE

To increase awareness about the risk of mosquito-borne viruses, such as Ross River Virus, promotional information has been developed by SA Health under the banner of ‘Fight the Bite’. Posters, pamphlets and fact sheets addressing protection from mosquitoes and minimisation of mosquito breeding was dispersed during the summer period as mosquito populations started to increase. Such information was delivered to medical centres, libraries, community centres and other venues where mosquito problems may occur, such as caravan parks. Where necessary the issue at hand was discussed at each venue and staff were advised to contact the Authority for any further help or information.
**IMMUNISATION EDUCATION**

In August 2008, an immunisation education session on Diphtheria, Tetanus and Pertussis (dTpa) vaccination was presented to 120 year nine girls after a request from the school coordinator. The Team Leader Immunisation covered subjects relevant to the students’ school immunisation:

- why we need a booster dose of dTpa
- the effect of immunisation coverage on the population
- overview of diphtheria, tetanus and pertussis diseases
- how to relax and reduce anxiety before vaccination.

The Authority’s public clinics are promoted throughout the community. A revised clinic timetable is mailed annually throughout the constituent council areas, focusing on childcare centres, Child & Youth Health, kindergartens, primary schools, public libraries and other council community areas.

**PROMOTING THE ENVIRONMENTAL HEALTH PROFESSION**

Environmental Health Officers facilitated two workshops to year ten science students at Marryatville High School. The presentation material, developed by the Department of Environmental Health at Flinders University and Environmental Health Australia, aims to promote the environmental health profession to students.

The workshop incorporated a fictitious scenario involving a cyclone in a remote area of Australia and the health implications associated with this situation. With guidance, the students performed simple water tests to analyse microbial contamination and metal contamination in the water. Using the results, the students determined remedial actions and then wrote and presented a media release.

The feedback from students and teachers was positive and students gained a greater understanding of environmental health as a career. The high school has requested further presentations for year 11 and 12 students in the future.
Immunisation remains one of the most effective and cost efficient public health measures. Local Government plays a significant role in the delivery of immunisation in South Australia and it shares responsibility with other levels of government and providers to improve immunisation uptake and coverage. By providing immunisation, the Authority’s constituent councils directly contribute to saving lives and make it possible for their community to live free from illness and disability caused by many vaccine-preventable diseases.

PUBLIC IMMUNISATION CLINICS

This year around 30 public immunisation clinics were available each month at seven locations. During 2008-09, 4819 clients attended the public clinics and received 9894 vaccinations. The commencement of the 2009 influenza season saw enquiries and client demand for vaccination escalate significantly. The demand in part was attributable to the State Government’s influenza vaccination campaign and media releases following the emergence of Swine Flu. The heightened demand for influenza vaccination was a hot topic in the media (see article right) as vaccine supplies were exhausted.

SA Health requested that a comparative survey be conducted over a six-week period at the height of the 2008 and 2009 influenza seasons. The results showed a 146% increase in influenza vaccination at the public clinics and 12% increase at worksites for 2009. These results reveal an intense demand over a short period, early in the season.

The pressure upon the Authority’s immunisation services prompted a number of proactive short-term measures to alleviate extreme waiting times and prevent children missing or delaying their immunisation. For example, standard operating procedures were modified to suit the circumstances and extra immunisation sessions were made available. An additional six clinics were conducted during March to June 2009.

Two of these clinics catered specifically for infants and children unable to attend regular clinics due to the increased demand for influenza vaccination.

The huge spike in demand in April 2009 prompted an analysis of all immunisation services. The graph over the page illustrates the ongoing increase in demand at public clinics over the last 3 years. In this period demand has increased by over 25%. The record attendance in April saw a further 30% increase in patronage above the increased average.
One of the benefits of providing immunisation across a region in the form of a regional subsidiary is that the communities in the councils serviced have a wide choice of immunisation venues, dates and times. The table below illustrates the fact that residents take advantage of this variety.

If we take the 838 Burnside residents as an example we find that while 47% of these people attended the Burnside clinic, 35% attended Payneham and a further 9% attended St Peters. Burnside residents attended every one of the venues offered during the year. This trend is similar for all councils served.

The availability of such a variety of clinics to the communities of the constituent councils is an important strategy in improving access to services and enhancing the uptake of immunisation.
SCHOOL BASED IMMUNISATION PROGRAM

Ninety-five sessions at 25 high schools were booked for the 2009 School Based Immunisation Program (SBIP), which involved:

- year eight male and female students receiving two doses of Hepatitis B vaccine;
- year eight male and female students receiving one dose of Varicella (chicken pox) vaccine;
- year eight female students receiving three doses of Human Papillomavirus (HPV) vaccine; and
- year nine male and female students receiving one dose of Diphtheria-Tetanus-Pertussis vaccine

As detailed in the table below, 10788 vaccines were delivered during 2008-09. This represents a decrease from the previous reporting period as the HPV catch-up program has now concluded.

A student being vaccinated

The ongoing SBIP is however more complex than the previous program, requiring 25% more visits to schools and higher numbers of vaccinations. Around 40% more vaccines are now offered than with the previous ongoing SBIP. A notable increase in resources was required due to the time required to handle additional vaccines, deliver additional immunisation sessions, input data and collate statistics for reporting purposes.

WORKSITE PROGRAM

During February 2009, information promoting the Worksite Immunisation Program was distributed to existing and potential clients. A rapid response was received and bookings were secured from the second week of March 2009. Eighty-nine worksites were serviced and 2457 vaccinations were provided, an increase of 367 or 18% on the previous reporting period.

Vaccinations administered for the 2008-09 School Based Immunisation Program

<table>
<thead>
<tr>
<th>School Program 2008/09</th>
<th>Hep B</th>
<th>VZV</th>
<th>HPV</th>
<th>dTpa</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adelaide</td>
<td>1106</td>
<td>333</td>
<td>1027</td>
<td>710</td>
<td>3176</td>
</tr>
<tr>
<td>Burnside</td>
<td>670</td>
<td>151</td>
<td>629</td>
<td>674</td>
<td>2124</td>
</tr>
<tr>
<td>Campbelltown</td>
<td>869</td>
<td>316</td>
<td>729</td>
<td>125</td>
<td>2039</td>
</tr>
<tr>
<td>Norwood, Payneham &amp; St Peters</td>
<td>836</td>
<td>228</td>
<td>658</td>
<td>797</td>
<td>2519</td>
</tr>
<tr>
<td>Prospect</td>
<td>263</td>
<td>101</td>
<td>51</td>
<td>173</td>
<td>588</td>
</tr>
<tr>
<td>Walkerville</td>
<td>81</td>
<td>19</td>
<td>138</td>
<td>104</td>
<td>342</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3825</td>
<td>1148</td>
<td>3232</td>
<td>2583</td>
<td>10788</td>
</tr>
</tbody>
</table>

Vaccinations administered for the 2008-09 Worksite Program

<table>
<thead>
<tr>
<th>Vaccine type</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>2255</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>31</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>15</td>
</tr>
<tr>
<td>Hepatitis A &amp; B</td>
<td>42</td>
</tr>
<tr>
<td>ADT</td>
<td>24</td>
</tr>
<tr>
<td>dTpa</td>
<td>89</td>
</tr>
<tr>
<td>Meningococcal C</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2457</td>
</tr>
</tbody>
</table>
A reduced number of staff were absent on the day for their vaccination, which may have been due to organisations booking their worksite visit before the start of the influenza season. Any absent staff had the opportunity to attend one of the Authority’s public clinics.

As part of the Authority’s occupational health and safety program, 16 or 94% of staff received influenza immunisation this year.

An outbreak of pertussis (whooping cough) early in 2009 prompted demand for the diphtheria/tetanus/pertussis (dTpa) vaccine. Six dTpa worksite programs were provided for staff at primary and secondary schools where there had been cases of the illness amongst staff and students. Eighty-nine dTpa vaccines were administered compared to two dTpa vaccines the previous year. Three of the six dTpa programs were delivered in the Burnside and Campbelltown areas that had a high number of notified pertussis cases as shown in the table below.

### VACCINE & COLD CHAIN MANAGEMENT

In line with National Vaccine Storage Guidelines, the cold chain temperature range of 2°C - 8°C is monitored and managed to ensure stored vaccines are effective.

Vaccine and cold chain management during the reporting period involved:

- recording of the pharmaceutical refrigerator temperature twice daily and before vaccines are used
- checking of freeze sensitive monitors placed on each shelf of the pharmaceutical refrigerator
- checking each temperature data logger daily and downloading graphs weekly or when the data loggers read out of temperature range
- calibration and service of the data loggers annually by a NATA approved agent
- maintenance and service of the pharmaceutical refrigerator
- creation of a cold chain breach incident form
- monthly vaccine stock take, rotating vaccines and disposing of vaccines that have passed the ‘expiry date’

### STANDING DRUG ORDERS

The Authority, as a local government organisation providing a community immunisation program, uses Standing Drug Orders (SDOs) that are updated and endorsed yearly. The endorsement committee, comprising of the Authority’s Medical Officer of Health, Chief Executive Officer and the Immunisation Team Leader reviewed, updated and signed the SDOs and associated policies in March 2009. The Authority's nurses familiarised themselves with the recommendations and counter signed the updated SDOs.

### Vaccine preventable diseases reported to SA Health by council area - 1 July 2008 to 30 June 2009

<table>
<thead>
<tr>
<th>Council</th>
<th>Pertussis</th>
<th>Varicella Virus</th>
<th>Rotavirus</th>
<th>Hepatitis A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burnside</td>
<td>77</td>
<td>38</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>Campbelltown</td>
<td>80</td>
<td>41</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Norwood, Payneham &amp; St Peters</td>
<td>38</td>
<td>23</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>Prospect</td>
<td>18</td>
<td>10</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Walkerville</td>
<td>13</td>
<td>7</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>226</strong></td>
<td><strong>119</strong></td>
<td><strong>39</strong></td>
<td><strong>9</strong></td>
</tr>
</tbody>
</table>
‘Environmental Health comprises those aspects of human health, including quality of life, that are determined by chemical, physical, biological, social and psychosocial factors in the environment. It also refers to the theory and practice of assessing, correcting, controlling and preventing those factors in the environment that can potentially affect adversely the health of present and future generations.’

(World Health Organisation 1972)

The Public and Environmental Health Act 1987 and Regulations are mechanisms employed by the Authority to fulfil its duty of care for the constituent councils. The Act deals with the following environmental health issues:

- prevention of insanitary conditions
- remediation of housing unfit for human habitation
- surveillance of swimming pool, spa pool and cooling tower operation
- assessment of hairdressing salons, beauty salons, acupuncture clinics and tattoo parlours
- approval and inspection of waste control systems
- control of offensive activities and discharges of waste to the environment
- prevention and control of notifiable diseases.

Environmental health often requires a multidisciplinary approach. In the course of investigating complex issues, Environmental Health Officers often work together with other local government officers and state government departments. An educative approach is normally used in the first instance to manage non-compliance with legislation. Environmental Health Officers will inform individuals of their responsibilities concerning a particular issue and encourage behaviour change.

In most instances during the year, this proved sufficient to achieve the desired outcome. Where information and advice was disregarded, enforcement mechanisms were utilised.

**COMPLAINTS AND REFERRALS**

In accordance with the Public and Environmental Health Act 1987, Environmental Health Officers investigated 204 complaints. These complaints related to rodent activity in residential areas, confirmed cases of notifiable diseases and unhygienic premises. The source of a complaint may be a concerned member of the public, a constituent council employee or SA Health. The table below shows a breakdown of these complaints based on the type of complaint and the council area.

The graph that follows provides a comparison of complaints received from 2006 – 2009. When comparing current figures with 2007-08 data, there has been a small increase of 3% in the total number of complaints investigated during 2008-09.

| Disease control complaints received 1 July 2008 to 30 June 2009 |
|------------------|----------|-----------------|---------|----------|---------|-------|
|                  | Burnside | Campbelltown   | Norwood, Payneham & St Peters | Prospect | Walkerville | Total |
| Animal Keeping   | 2        | 7               | 9                   | 1        | 1         | 20    |
| Notifiable Disease | 5       | 4               | 9                   | 3        | 0         | 21    |
| Other            | 4        | 6               | 8                   | 2        | 1         | 21    |
| Sanitation       | 15       | 11              | 24                  | 7        | 1         | 58    |
| Vector Control   | 18       | 27              | 28                  | 7        | 3         | 83    |
| Waste Control Systems | 0    | 0               | 1                   | 0        | 0         | 1     |
| Total            | 44       | 55              | 79                  | 20       | 6         | 204   |
Animals
Twenty animal keeping complaints were received relating to cats, dogs, poultry, sheep and a peacock, which is comparable to last year. The predominant concern related to these complaints is the presence of animal faeces and the associated odour. Authorised Officers investigated these complaints to determine whether the keeping of such animals gives rise to the risk of health and hence causing an insanitary condition. No formal action was taken as general compliance was resolved through negotiation.

Notifiable Disease
The Public and Environmental Health Act 1987 details 80 diseases that must be reported to the Communicable Disease Control Branch (CDCB) of SA Health. Notification enables investigation and surveillance of these diseases in order to prevent their spread within the community.

Disease Control Complaints Received 2006 - 2009

The following table provides a comparison of notifiable diseases reported over the past year within the Authority’s area. These diseases include those associated with poor food handling and poor personal hygiene with exposure occurring through inhalation and ingestion.

Environmental Health Officers are asked to investigate confirmed cases in the following instances:

- where a food handler, health care worker or child care worker is involved
- if the illness is associated with food consumed prior to onset of symptoms
- where swimming pools and cooling towers are implicated
- where a cluster of cases have been identified by the CDCB

During 2008-09, the CDCB referred 21 confirmed cases to the Authority for further investigation. Environmental Health Officers were required to inspect aged care facilities and provide information about how to prevent transmission of disease.

Notifiable diseases reported to SA Health by council area 1 July 2008 to 30 June 2009

<table>
<thead>
<tr>
<th>Council Area</th>
<th>Campylobacter</th>
<th>Salmonella</th>
<th>Legionellosis</th>
<th>Cryptosporidiosis</th>
<th>Rotavirus</th>
<th>Hepatitis A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burnside</td>
<td>48</td>
<td>18</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>4</td>
</tr>
<tr>
<td>Campbelltown</td>
<td>51</td>
<td>28</td>
<td>0</td>
<td>3</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Norwood, Payneham &amp; St Peters</td>
<td>40</td>
<td>15</td>
<td>1</td>
<td>0</td>
<td>18</td>
<td>4</td>
</tr>
<tr>
<td>Prospect</td>
<td>10</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Walkerville</td>
<td>6</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>155</strong></td>
<td><strong>72</strong></td>
<td><strong>5</strong></td>
<td><strong>10</strong></td>
<td><strong>39</strong></td>
<td><strong>9</strong></td>
</tr>
</tbody>
</table>
The number of investigations carried out when compared to 2007-08 has reduced by 41%. One of the contributing factors is a 61% decline in the number of gastroenteritis outbreaks at aged care facilities.

Two confirmed cases of Legionellosis were investigated during the year. Whilst the source of one case could not be pinpointed, the other was linked to a domestic hot water system that had an operating temperature of less 60°C.

**Sanitation**

There were 58 complaints alleging insanitary conditions at residential and commercial premises. The majority involved an accumulation of rubbish and other materials that had the potential to attract and harbour vermin. Although in most instances the conditions were not insanitary, Environmental Health Officers discussed the matter with the property owner, tenant or property manager to resolve any minor nuisance.

Environmental Health Officers issued four notices under section 15(1) of the Public and Environmental Health Act 1987 on three properties including:

- one relating to the discharge of effluent onto a neighbouring property. Failure to comply with the notice resulted in an expiation being issued
- one for the accumulation of extraneous items throughout a house including soiled mattresses, food waste on the floor and the presence of offensive odours
- two due to accumulation of materials that provide harbourage for vermin.

The circumstances prompting the fourth notice were unresolved at the conclusion of the reporting period.

Environmental Health Officers have observed an increase in complex cases associated with insanitary living conditions (as shown in the photo below) in the past 12 months. The complexity has been associated with:

- management of mental health issues including aged related dementia and hoarding disorders
- availability of assistance and support from family, health care providers and neighbours to reach a resolution
- understanding of cultural and ethnicity issues as they relate to living standards
- the need to ensure the privacy and public health rights of individuals affected by insanitary conditions are not eroded or undermined.

These complaints are not quick to resolve and extensive periods of time are often needed by the people involved to clean up the property.

**Insanitary living conditions are often associated with complex mental health, cultural or aged related issues**

**Vector Control**

During the year there were 83 vector complaints received and investigated. This represents an 18% decrease from the previous year. Although there was a slight increase in mosquito complaints, there was a significant decrease in complaints made in regards to rodents, pigeons and flies. The majority of complaints throughout the year were concerning rats or mice in association with overgrown grass, accumulated refuse material and poultry keeping. Mosquito complaints were more prevalent in the summer period and were commonly found to be breeding in unmaintained swimming pools and ponds.
The approach in responding to vector control complaints generally includes an initial inspection of the alleged property. If the property is providing harbourage for rats or mice, appropriate instruction is provided to implement necessary remedial action. In addition, the Authority provides information to the community in the form of letter mail-outs that are sent to the neighbouring residents. This is an effective tool to educate the community on vector prevention and control. Additionally, the Authority provides free sample packs of rodent bait to residents.

**Waste Control Systems**

Waste control systems are predominantly installed in non-sewered areas such as the Adelaide Hills Face Zone, although awareness about the pressure on reticulated water supplies in South Australia has resulted in greater interest in the recycling and reuse of water.

The Authority received and approved four applications for the installation of waste control systems during the reporting period. Three applications were for installations in non-sewered areas. One application was for an installation in a sewered area where the applicant intended to re-use the wastewater.

Applications for installation of un-approved types of waste control systems are submitted to SA Health as the approving body. SA Health approved an additional two applications for systems installed within sewered areas. Copies of plans and approvals were provided to the Authority for its records.

The new Onsite Wastewater Systems Code and the Regulations are expected to commence in the new financial year. The upgraded requirements will affect consultants and building, plumbing and manufacturing industries as well as owners and occupiers of premises upon which waste control systems are installed.

**MONITORING AND SURVEILLANCE**

**Personal Grooming, Body Art and Health Care**

There was a significant focus on the hairdressing, beauty and skin penetration industries this year.

As a new initiative, 232 self-assessment forms were posted to hairdressing and beauty salons, of which 138 were returned. The majority were completed to a satisfactory standard, however 23 contained unsatisfactory responses. All businesses that did not return the self-assessment and those that provided unsatisfactory responses were placed on an inspection schedule.

A total of 98 inspections were conducted, comprising 14 hairdressers, 36 beauty salons, 12 acupuncturists and three tattoo parlours. This represents a three-fold increase in inspections compared to last year. Acupuncturists and tattooists are inspected annually due to the greater risk to health associated with procedures that pierce the skin.
A high level of compliance was observed and no re-inspections were required this year. Further information provided to businesses for consideration addressed issues surrounding vaccinations, sharps disposal and hand washing practices.

A complaint about a hairdresser who was reported to have a dog on the premises was investigated during the year but could not be substantiated.

**Legionella Control**

The Public and Environmental Health (Legionella) Regulations 2008 came into effect on 1 October 2008. The Regulations require all high risk manufactured water systems (which includes cooling towers and warm water systems) to be registered and provides a framework under which the inspection and maintenance of systems is now enforceable.

In total 34 registrations have been received since the Regulations commenced (up to 30 June 2009), encompassing 38 warm water systems and 32 cooling towers. One new cooling tower was identified because of the mandatory registration requirements, while one cooling tower was decommissioned in the reporting period.

Routine inspections of 32 cooling towers were undertaken against the structural and maintenance requirements of the new Regulations. As part of the inspections, water samples were obtained for microbiological analysis. Legionella was detected in two cooling towers and in response, operators were contacted and required to decontaminate the cooling towers and re-test to ensure the decontamination process was successful.

Routine inspections of warm water systems will commence during 2009-10.

The Regulations require operators of warm water systems and cooling towers to notify the Authority when high Legionella counts are detected. The Authority must then report this information to SA Health. Five notifications were received, prompting decontamination of the implicated systems and investigation into maintenance regimes. In two instances, SA Health assisted the Authority and attended meetings with operators to ensure compliance with the Regulations.

**CASE STUDY**

Within one week, three notifications of high Legionella counts were received from an aged care facility. Legionella had been detected in the warm water system several times in the past after routine microbiological testing. A water treatment contractor was employed to undertake maintenance and collect water samples for analysis. As required by the Legionella Regulations, SA Health was notified of the problem.

The Authority required the aged care facility to shut down all affected systems until they could be decontaminated. To ensure decontamination was effective, Environmental Health Officers attended and observed the process which involved dosing the system with chlorine over a period of four hours.

A meeting was held with management of the aged care facility and officers from the Authority and SA Health. Routine maintenance, record keeping and emergency decontamination procedures were discussed. Management was cooperative and agreed to modify their maintenance program to comply with the new Regulations. Since the incident, Legionella has not been detected at the site.
Public Swimming Pools and Spas

Fifty-two public swimming pools and spas are located at 34 sites, of which 104 pool and spa assessments were carried out during the year. All pools are routinely inspected biannually.

Eleven swimming pools / spa were closed, some requiring numerous re-inspections before re-opening due to recurrent non-compliance with the Public and Environmental Health (General) Regulations 2006. The majority of closures were due to high combined chlorine levels and non-compliant pH levels. To prevent these incidents recurring, Environmental Health Officers recommended the employment of professionals, an increase in the frequency of testing and review of maintenance procedures. Because of this persistent approach, compliance improved during the second round of routine inspections.

Three complaints were received over the year, two implicating the same pool. There were allegations of patrons developing a skin rash after swimming. Test results indicated high combined chlorine levels, resulting in closure of the pool. As a result of the investigation, the water quality improved to a satisfactory level and no further complaints were received. The third complaint related to poor air quality and ventilation in the pool area.

The operator of one premises failed to adequately operate and maintain pool water quality in the manner prescribed by the Regulations. The pool did not have adequate disinfectant and pH levels, manual tests results were not documented and no system was in place to close the pool if its operation was not in compliance with the Regulations. As a result a notice was issued under section 15(1) of the Public and Environmental Health Act 1987. The notice was complied with by the due date and the pool has since been found to remain at a satisfactory standard.

Several inspections were conducted to determine the severity of the issue. An elaborate ventilation system has since been installed and no further complaints have been received. Such concerns can be seasonal, where odour issues and poor ventilation can be accelerated in summer months.
Number of Lodging Houses and Inspections

A lodging house is defined as premises where a room (or part of the premises) is available for occupation, with the permission of the owner. A boarding house is a lodging house where meals (or some other services) are provided. In reality, the terms are used interchangeably.

Routine inspections of four lodging houses were conducted in the past year and notable deficiencies in standards of accommodation were observed. While a notice under the Public and Environmental Health Act 1987 was not warranted, serious attention to structural defects was required. The State Government announced during 2009 that they would not pursue the proposed Accommodation Act that was intended to improve standards in lodging houses and supported residential facilities. Without a by-law or statewide legislation specific to lodging houses, Environmental Health Officers have found that they have limited powers to require significant structural works to be undertaken. As such, the Housing Improvement Branch (Department of Families and Communities) was informed and a ‘notice of intention to declare the property substandard’ was issued against a property.

CASE STUDY

Bedbugs are blood-feeding insects. Although they are not known to transmit disease, intense itching of the bites can lead to a secondary skin infection in severe cases. Their populations have recently grown worldwide and infestations often occur in accommodation venues.

A complaint regarding the presence of bed bugs in a lodging house resulted in a notice being served under Section 15(1) of the Public and Environmental Health Act 1987. Samples of the insects were identified by the South Australian Museum to be bedbugs of varying lifecycles indicating that the infestation had been present for some time. Assessment by a licensed pest control operator confirmed that bedbugs were active in approximately 75% of the bedrooms. The incident highlighted the importance of proper hygiene and preventative pest control, and the proprietor engaged the pest controller’s services on an ongoing basis.
Safe food is something we take for granted in Australia as we have access to a large variety of foods that are manufactured here and around the world. To ensure the food we consume everyday remains safe and does not become contaminated, legislation is in place and enforced by the Authority.

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

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

The Authority monitors and promotes food safety by:

- conducting regular assessments of food premises including vehicles and special events using the Australian Food Safety Assessment inspection tool
- investigating food related complaints, alleged food poisonings and food recalls
- ensuring receipt of notification from all food businesses
- maintaining Health Manager (electronic database) to ensure effective reporting to the Board of Management, constituent councils and SA Health
- providing advice and information to food proprietors and the community on matters relating to food safety
- providing training on food safety and hygiene principles to food handlers
- being involved with Environmental Health Australia and state and local government agencies to promote uniformity and professional consistency
- pursuing special initiatives that raise awareness of food safety amongst the community and food handler’s understanding of food hygiene.

FOOD BUSINESS NOTIFICATION

The notification process requires all proprietors to provide specific details about their food business. If any change occurs, such as ownership or food handling activities, the proprietor must again notify.

As at 30 June 2009, there were 1054 known food premises operating within the Authority’s jurisdiction. This is comparable to the same time last year. The table below provides a breakdown of the number of food premises per constituent council area.

<table>
<thead>
<tr>
<th>Constituent Council Area</th>
<th>Number of Food Premises</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burnside</td>
<td>249</td>
</tr>
<tr>
<td>Campbelltown</td>
<td>235</td>
</tr>
<tr>
<td>Norwood, Payneham &amp; St Peters</td>
<td>397</td>
</tr>
<tr>
<td>Prospect</td>
<td>142</td>
</tr>
<tr>
<td>Walkerville</td>
<td>31</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1054</strong></td>
</tr>
</tbody>
</table>

INSPECTIONS

During the year, 1580 inspections of food premises were carried out. Of these, 522 were re-inspections and 80 were complaint inspections. All other inspections are classified as routine, which includes unannounced inspections, temporary event inspections and pre-opening inspections. The table below gives the number of food inspections performed in each constituent council. The graph following shows a comparison of the types of food inspections performed over the last three years.

__Fly on a piece of uncovered cooked chicken__
The total number of inspections for 2008-09 increased when compared to 2007-08. Routine inspections increased from 841 to 978 and re-inspections increased from 204 to 522. The increase in re-inspections is primarily due to officers taking more enforcement action. The aim is to ensure businesses that continually fail to meet appropriate standards or put the public at risk by poor levels of cleanliness and hygiene are dealt with in accordance to the enforcement policy.

Over recent years there has been a significant increase in the number of new food proprietors with English being their second language. To ensure they are informed and have adequate skills and knowledge in food safety and hygiene, Environmental Health Officers are required to work closely with these food handlers to provide extra assistance. The food handler training initiative has been an important tool for this group of people.

In addition, material provided by SA Health in different languages has assisted officers communicate important food safety information.
IMPROVEMENT NOTICES

The Food Act 2001 provides for improvement notices to be issued for repeat offences or serious non-compliance with the Food Safety Standards.

Improvement notices specify the actions required for the business to achieve compliance. Where necessary, proprietors are invited to the Authority’s office to discuss significant deficiencies observed during inspections of their food business. This approach has been beneficial in building a professional relationship between the Authority and food proprietors.

During 2008-09, 171 improvement notices were issued under the Food Act 2001, in comparison to 68 during 2007-08. All improvement notices required action to address multiple non-compliances relating to:

- poor food storage
- temperature abuse of potentially hazardous food
- unacceptable standards of cleanliness
- inadequate sanitising of food contact surfaces
- obstruction of hand wash facilities (as depicted in the photo above)
- hand wash facilities without paper hand towels
- deteriorated fixtures and fittings
- deteriorated floors and walls
- vermin and pest infestations.

Failing to comply with an improvement notice is grounds for expiation under the Food Act 2001. Four expiations were issued for this reason.

EXPIATIONS

During the year, 23 offences were expiated under the Food Act 2001 resulting in $30,800 in fines. This number is comparable with the previous year in which 25 offences were expiated. Breaches of the Food Safety Standards are a serious concern and with sufficient evidence, an expiation notice may be issued. Environmental Health Officers continue to work with food proprietors to ensure all staff are aware of their individual responsibilities under the legislation and that breaches of the Food Safety Standards are resolved.

The following table itemises the expiations issued for offences under the Food Act 2001 for the 2008-09 period.
<table>
<thead>
<tr>
<th>Section</th>
<th>Offence</th>
<th>Expiations Issued</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Act 2001 Section 50</td>
<td>A person must not, without reasonable excuse, contravene or fail to comply with an improvement notice or a prohibition order served on the person under this Part.</td>
<td>4</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 6(1)a</td>
<td>A food business must when storing food, store the food in such a way that it is protected from the likelihood of contamination</td>
<td>3</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 15(4)(a)</td>
<td>A food handler must, whenever washing his or her hands: use the hand washing facilities provided.</td>
<td>1</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 17(1)</td>
<td>A food business must, for each food premises: maintain easily accessible hand washing facilities.</td>
<td>2</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 19(1)</td>
<td>A food business must maintain food premises to a standard of cleanliness where there is no accumulation of garbage, except in garbage containers; recycled matter, except in containers; food waste; dirt; grease or other visible matter.</td>
<td>5</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 19(2)</td>
<td>A food business must maintain all fixtures, fittings and equipment, having regard to its use, and those parts of vehicles that are used to transport food, to a standard of cleanliness where there is no accumulation of: food waste; dirt; grease; or other visible matter.</td>
<td>2</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 21(1)</td>
<td>A food business must maintain food premises, fixtures, fittings, equipment, and those parts of vehicles that are used to transport food, in a good state of repair and working order having regard their use.</td>
<td>1</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.2 Clause 24(1) (c)(d)</td>
<td>A food business must take all practicable measures to eradicate and prevent the harbourage of pests on the food premises and those parts of vehicles used to transport food.</td>
<td>3</td>
</tr>
<tr>
<td>Food Act 2001 Section 21 Food Safety Standard 3.2.3 Clause 5</td>
<td>Food premises must have a sewage and waste water disposal system that: will effectively dispose of all sewage and waste water; and is constructed and located so that there is no likelihood of the sewage and waste water polluting the water supply or contaminating food.</td>
<td>1</td>
</tr>
<tr>
<td>Food Act 2001 Section 86 Food Act - failure to notify</td>
<td>The proprietor of a food business must not conduct the food business unless the proprietor has given written notice, in the approved form, of the information specified in the Food Safety Standards that is to be notified to the appropriate enforcement agency before the business is conducted.</td>
<td>1</td>
</tr>
</tbody>
</table>
PROHIBITION ORDER
Two food businesses were issued with prohibition orders during 2008-09, which required that no food be handled on the premises. This had the effect of ceasing trade until a certificate of clearance was issued.

Both prohibition orders were made due to evidence of vermin infestation. The design and construction of the food premises also was unsuitable in one instance. This business has not re-opened but the prohibition order is still effective in case the premises are utilised for a similar activity.

PROSECUTION
Prosecution proceedings against a business concluded during 2008-09. A history of non-compliance led to the decision to initiate proceedings against Zen Chinese Restaurant after unsatisfactory standards of cleanliness, maintenance and food handling were observed during an inspection on 29 November 2007. The company pleaded guilty to seven offences and the director of the company plead guilty to one offence. Fines and costs issued to the director and company totalled $9192.25.

TEMPORARY EVENTS
Events pose unique challenges for food safety. They range from large organised functions, such as fairs and festivals, to small events such as sausage sizzle, and maybe held indoors or outdoors. Examples of temporary events include:

- community fundraisers/drives
- cake stalls
- school fetes
- charity events
- sausage sizzles
- shows
- festivals
- concerts.

With the onset of spring, an increase in outdoor community events is expected each year. During October 2008, an information session was held with Special Event Co-ordinators from the constituent councils to promote the importance of working together to achieve a higher standard of food safety at events. Following the information session, Special Event Co-ordinators assisted in the dissemination of a newly created temporary events information booklet that included notification forms tailored to event organisers and stallholders.

Nine events were attended this year, a slight increase upon previous years, and included:

- St Peters Annual Fair
- Prospect Road Food, Wine and Fashion Affair
- Prospect Fair
- Norwood Food & Wine Festival
- Campbelltown Proud Day
- Tour Down Under Burnside
- Walkerville Carols in the Village

To ensure proper standards of food safety are upheld, food businesses are assessed against the following criteria:

- provision of hand washing facilities
- safe food storage including good temperature control
- adequate cooking and heating facilities
- avoidance of cross contamination
- supply of sufficient potable water
- proper waste management
- sufficient toilet facilities for expected attendance
- adequate sanitation of facilities
- appropriate packaging and labelling of food.

Food unprotected from contamination and out of temperature control
Whilst an improved standard of food handling and food safety was observed, officers conducted follow up inspections to ensure issues such as hand washing, food storage (as depicted in the photo below) and temperature control were addressed.

FOOD COMPLAINTS

The Authority received 143 food related complaints during the reporting period as compared to 158 from the previous year. Poor food handling practices and alleged food poisoning cases contributed to 42% of the complaints received. There was a decline in the number of complaints relating to poor food handling practices with 19 complaints received this financial year compared to 34 last financial year. The following table shows a comparison of food complaints received over the last three years.

CASE STUDY

Following the onset of gastrointestinal symptoms several hours after eating a ready-to-eat, potentially hazardous food, a resident lodged a complaint of suspected food poisoning. The implicated food premises had a history of non-compliance with the Food Safety Standards.

Samples of ready-to-eat food were obtained during the investigation along with swabs of food contact surfaces that had recently been cleaned and sanitised. The microbiological results indicated poor food handling and food handler hygiene. For example, the microbial flora of a re-usable piping bag was three hundred times greater than the acceptable limit.

The results were provided to the business owner to emphasise the importance of hand washing, temperature control of potentially hazardous food, and proper cleaning and sanitising of food contact equipment. Cleaning and sanitising schedules have since been implemented, disposable piping bags are being used and alternative procedures employed to cool food. These improvements have been introduced at related stores across Adelaide.
FOOD RECALLS

Forty six recalls were issued by SA Health during 2008-09. These recalls were monitored and actioned by advising relevant businesses to prevent further distribution and sale of unsafe products.

FOOD SAFETY AUDITING

Following a two-year lead in period, Food Safety Standard 3.3.1 ‘Food Safety Programs for Food Service to Vulnerable Populations’ came into effect on 5 October 2008. The Standard requires businesses that serve vulnerable populations, such as hospitals, aged care, childcare and delivered meals organisations, to implement an audited food safety program.

As at 30 June 2009, seven Environmental Health Officers were approved by the Department of Health as auditors for the purpose of the Standard. To ensure transparency in the delivery of audit services under a business model:

- a policy defining an audit fee structure was adopted
- a standard operating procedure was developed to delineate auditor’s roles from their enforcement duties
- a ‘letter of engagement’ was created that is used to disclose an estimate of audit fees.

An extension granted by SA Health allowed businesses an additional six months to have their food safety program audited. All businesses who were required to implement a documented and audited food safety program have complied with Standard 3.3.1.

The Board of Management agreed to make audit services available to businesses outside the boundaries of the constituent councils. This filled an essential need as several local councils chose not to offer the services. As at 30 June 2009:

- 64 businesses within the boundaries of the constituent councils
- 18 businesses in other council areas engaged the Authority’s audit services
- four businesses engaged the services of an alternative local council
- 114 audits were conducted during the reporting period as shown in the table right.

Number of food safety audits performed for the period 1 July 2008 – 30 June 2009

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burnside</td>
<td>21</td>
</tr>
<tr>
<td>Campbelltown</td>
<td>18</td>
</tr>
<tr>
<td>Norwood, Payneham &amp; St Peters</td>
<td>24</td>
</tr>
<tr>
<td>Prospect</td>
<td>7</td>
</tr>
<tr>
<td>Walkerville</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>76</td>
</tr>
<tr>
<td>Other</td>
<td>38</td>
</tr>
</tbody>
</table>

CHANGE TO LEGISLATION

A new National Standard under the Food Standards Code titled ‘Primary Production and Processing Standard for Dairy Products’ commenced on 5 October 2008, prompting the change in regulatory arrangements. Dairy distributors will be regulated by local government under the Food Act 2001 effective from 1 July 2009. This means that they will need to comply with Food Safety Standards 3.2.2 and 3.2.3. The impact on the Authority’s resources is not expected to be significant.
SUPPORTED RESIDENTIAL FACILITIES

Supported residential facilities (SRFs) accommodate people with various disabilities including mental, intellectual, age-related and physical. Along with accommodation, the residents receive all their meals and assistance with medication and personal finances.

There are two types of SRFs within the Authority’s jurisdiction. In pension-only facilities, the resident pays up to 80% of their pension to cover the costs associated with the provision of accommodation and personal care services. Residents of pension-only facilities come from different backgrounds such as mental health institutions, intellectual disability organisations and correctional services. There can be frail and aged people living alongside young people who are experiencing acute symptoms of mental illness and who may be aggressive or have other challenging behaviours.

Hostels located at retirement villages are the second type of SRF. In these instances, residents are relatively independent but require limited assistance with daily living. These hostels have an entry fee and fortnightly rent.

The role of the Authority under the Supported Residential Facilities Act 1992 is to act as the ‘licensing authority’. This responsibility sees the Authority monitor and enforce the principles of the Act that relate to the management and administration of SRFs.

LICENSING

Licensing of SRFs occurs on an annual basis. Environmental Health Officers conduct a desktop and onsite review of documentation to ascertain the adequacy of record keeping. An inspection also takes place to assess factors such as maintenance, amenities, and meal service in order to determine the appropriateness of each facility.

These desktop reviews and onsite inspections were carried out at 17 facilities during 2008-09. Based on the findings, all 17 facilities were issued with a supported residential facility licence from 1 July 2009 to 30 June 2010. Licence conditions were imposed on seven SRFs in relation to inadequate documentation and outstanding fire safety breaches.

Unannounced inspections of SRFs occurred throughout the 2008-09 licensing period. This enabled Environmental Health Officers to gauge adherence to licence conditions, assess the daily operation of the facility and discuss any current issues.

During 2008-09, two applications were received seeking the approval of a person as a manager of a SRF and three applications for approval of an acting manager in the absence of the permanent manager. Environmental Health Officers assess the suitability of each applicant and consideration is given to documents supporting the application such as a police clearance, senior first aid certificate and training certificates. References were also checked to support each application.

FIRE SAFETY

The Building Fire Safety Committee (BFSC) of each council is responsible for evaluating a SRFs compliance with the fire safety provisions of the Building Code of Australia. Each council then provides the Authority with BFSC reports for consideration as part of the relicensing process.

Environmental Health Officers reviewed the BFSC report of each SRF to determine compliance with the fire safety requirements of the Supported Residential Facilities Regulations 1994. Licence conditions addressing fire safety deficiencies related to:

- breaches of firewalls
- installation of fire sprinkler systems
- provision of appropriate staffing at night until fire sprinkler systems are commissioned
License conditions remain in place until the proprietor can demonstrate compliance with building fire safety standards.

**COMPLAINTS AND QUERIES**

Eleven complaints were received during the year in relation to five SRFs. The concerns raised were varied and included:

- the quality and quantity of food served to residents
- inadequate maintenance
- poor standards of cleanliness at SRFs
- dignity and respect of residents.

South Australia experienced a significant heatwave throughout January and February of 2009. Environmental Health Officers were advised of two deaths at SRFs during this extreme weather. Officers responded to each case to discuss the circumstances surrounding the death and steps taken by staff.

A complaint was later received in relation to one of the deaths. Environmental Health Officers commenced a thorough investigation to determine whether any of the allegations were justified. A coroner’s report into the exact cause of death is pending.

**SOCIAL AND COMMUNITY ISSUES**

With a broad spectrum of residents with individual needs, it is a challenge for SRF managers to provide high levels of personal care. The State Government increased the Board and Care Subsidy in January 2009 to help cover the costs associated with caring for residents. The Board and Care Subsidy is now approximately $12.00/person/day.

**HOUSING IMPROVEMENT BRANCH**

In response to calls from local government for assistance in assessing the building standards of SRFs, the Housing Improvement Branch (Department of Families and Communities) funded the appointment of a building inspector for 12 months. All pension-only facilities were inspected and a report detailing maintenance defects was sent to each licensing authority.

Ten facilities were inspected within the Authority’s jurisdiction.

Proprietors and managers were each provided with the report about their facility and have been informed that they must undertake repairs within one year.

**NEW REGULATIONS**

The Department of Families and Communities released a background paper in 2006 discussing the State Government’s intent to introduce an ‘Accommodation Act’ to replace the Supported Residential Facilities Act 1992. In early 2009, the State Government advised that plans for this new Act had been cancelled. Instead, the Department of Families and Communities announced they would revise the Supported Residential Facilities Regulations 1994. Comment was provided during the consultation stage. The Regulations are expected to come into operation in late 2009.
A range of legislation, policies and guidelines addressing environmental health and environment protection are used to also address environmental management concerns. Environmental Health Officers perform educative, preventative and reactive duties that aim to reduce unwarranted pollution of the environment.

For the year ending 30 June 2009, 120 complaints relating to environmental management were received, as depicted in the graph below. The graph that follows provides a comparison of the complaints received in previous years. There was a 12% reduction in complaints received this year when compared with 2007-08.

### AIR QUALITY

Smoke from domestic wood heaters, dust, odours and chemical spray drift made up the majority of air quality complaints.

Over one third (35%) of air quality complaints related to domestic wood heaters. Wood smoke can cause breathing difficulties in vulnerable members of the community, however disruption of home comfort (e.g., smoke tainted laundry) accounted for most complaints. Neighbours were encouraged to resolve the problem utilising the Environment Protection Authority’s guidelines.
If the problem was not resolved, Environmental Health Officers conducted an inspection to ensure the guidelines were observed and wood smoke minimised. Mediation is also encouraged where a conciliatory approach between neighbours is unsuccessful.

During the warmer weather when there is minimal rainfall, dust complaints from building sites and vacant land are more frequent. Dust suppression methods were used on building sites during demolition and construction to minimise the impact on neighbouring properties from dust.

STORMWATER POLLUTION

During 2008-09, there was a reduction in the number of complaints received about stormwater pollution. A decline in complaints has been observed over several years, which indicates improved awareness and a behaviour change amongst business and the public. All complaints were dealt with through an educative approach. One third of complaints were regarding the discharge of dirt and waste onto the road (as illustrated in the photo below), many of which came from building sites. Other complaints received related to the discharge of substances such as wash down water and swimming pool backwash.

HAZARDOUS SUBSTANCES

Complaints and enquiries about hazardous substances received during the year predominantly related to discarded asbestos materials and structures containing asbestos. SafeWork SA and SA Health have worked together in creating the State Asbestos Action Plan. The Plan recognises that asbestos in the home environment is a cause for concern; as such, the Authority provided information from the EPA, SafeWork SA and SA Health to residents who are concerned about asbestos. Advice was also provided to residents regarding the correct disposal of asbestos in line with EPA requirements.

INFECTIOUS WASTES

As an ongoing service, syringe and needle disposal was provided for residents during the year. Full sharps containers were exchanged with a new container for a minimal fee. In addition, sharps discarded in public places were promptly collected by Environmental Health Officers in the interest of public safety. All infectious wastes were disposed of together with medical waste generated by the Authority’s immunisation service.
Emergencies are defined as “crisis events, actual or imminent, which endanger life, property or the environment, and which require a significant coordinated response”. They are an inherent part of the Australian environment. While we cannot prevent them, we can minimise the risks they pose.

During 2008-09, implementation of the Emergency Management Plan commenced. The Plan was developed the preceding year after successfully applying for a grant from the Government under the ‘Working Together to Manage Emergencies’ initiative. The intent of the Emergency Management Plan is to build capability of the Authority and increase integration with other emergency management organisations.

Initial implementation strategies have focused on internal communication. A workshop was held for staff to launch the Emergency Management Plan, and to familiarise them with the intent and content of the plan. Staff were taken through a flooding scenario, under which circumstances the Emergency Management Plan would be used to guide the Authority’s response.

An integral part of the Emergency Management Plan is the Business Continuity Plan. Further work was undertaken in conjunction with the constituent councils to ensure that arrangements are in place to ensure continuity of services should an emergency directly affect the Authority. Discussions took place about IT system support and retention of electronic data should the Authority’s office be destroyed, for example in the event of a flood or fire.

Recently Pandemic Influenza became a very real threat to world health, and global health authorities are taking the threat very seriously. Around the world an outbreak of influenza A (H1N1), more commonly known as Swine Flu, has occurred. On 26 May 2009, Board Members and elected members of the constituent councils were informed at a workshop about pandemic plans in place and how they relate to Swine Flu. A meeting took place with the constituent councils also during May 2009 to discuss co-ordination of pandemic planning and business continuity arrangements.

The Emergency Management Plan recognises pandemic disease as a hazard that may have significant environmental health implications for the region.

The Plan indicates that the Authority will deploy as required by SA Health and anticipates that actions may include: education of the public, immunisation and additional routine matters as SA Health concentrates on the Pandemic. This has proved to be accurate. The ‘Wash, Wipe, Cover – Don’t Infect Another’ initiative (described in section 5) commenced when Swine Flu emerged internationally. Immunisation programs against Swine Flu are anticipated to commence early in 2009-10 and direction from SA Health is awaited. Fortunately, no staff members have been infected with Swine Flu and activation of the Business Continuity Plan during the reporting period was not necessary.

Two staff representing immunisation and environmental health attended meetings with SA Health to discuss how to bridge the gap between state and local pandemic planning. This is ongoing and will take into account the Swine Flu experience.

Each year Environmental Health Australia presents awards to environmental health professionals and organisations who demonstrate leadership and excellence in the field of environmental health. This year the Department of Health (SA) Award for Excellence in Leadership was awarded to the Authority in recognition of its emergency management planning initiatives.
The importance of professional development cannot be understated. Education enables staff to maintain competency and the Authority to effectively fulfil its purpose. Staff seek to expand their knowledge through training and professional association.

**PROFESSIONAL DEVELOPMENT**

**Environmental Health Australia 31st State Conference**

Environmental Health Officers were given the opportunity to attend the 31st Environmental Health Australia State Conference held in historic Hahndorf. The conference theme ‘Putting Environmental Health Through the Mill, Local Actions with Global Impacts’ was intended to stimulate thought and conversation about the current global situation and the impact it will have on the role of Environmental Health Practitioners at a local level. Keynote speakers included the Minister for Health Honourable John Hill MP along with Senator Sarah Hanson-Young, Professor Mark Daniel and Ms Vickie Chapman MP currently the Shadow Minister for City of Adelaide.

The conference addressed a diverse range of public health issues including environmental health indicators, food safety, auditing, reducing greenhouse gases and heat waves.

It was clear by the final presenter that local actions and initiatives can impact on a global scale.

**Legionella**

Three officers undertook training provided by SA Health prior to the introduction of the new Public and Environmental Health (Legionella) Regulations 2008. The training provided an overview of the requirements of the Regulations as well as information on the types of systems that are captured by the Regulations.

An officer from the Authority attended a comprehensive training session addressing Legionella. The day long session covered a range of topics including microbial control of Legionella, the effects of Legionellosis, the nature of the Legionella bacteria, how cooling towers work and risk management. The training also included several interesting case studies in which there had been outbreaks of Legionellosis.

**Food Act Enforcement**

Four Environmental Health Officers attended the Environmental Health Australia seminar titled ‘Food Act Enforcement – When To Get the Whip Out, The Hurdles and Victories’. The seminar discussed the importance of a uniform approach when dealing with offences under the Food Act 2001 and included a workshop on appropriate enforcement action for different scenarios. This provided the opportunity for metropolitan and regional Environmental Health Officers to discuss their views and opinions whilst referring to a generic enforcement policy.

The seminar was found to be useful by all officers who attended. It gave them an understanding of enforcement activities that are being undertaken and the direction that enforcement agencies are working towards for the future.

**Report Writing**

A one-day training session by the Australian Institute of Management that addressed report writing skills was held in-house during July 2008. The session was attended by ten staff who routinely write correspondence and promotional material as well as reports. The training provided some helpful writing tips and addressed the importance of preplanning before commencing writing to convey information clearly to the intended reader.
Time Management is Self Management
In November 2008, ten staff members participated in an in-house Time Management Training Course conducted by the Australian Institute of Management. The objective of the training was to provide participants with the tools to plan and implement strategies that manage the demands on their time and to improve their effectiveness at work and home.

Putting the Pieces Back Together – Local Emergency Recovery
The State Recovery Office, in collaboration with the Engineering Functional Service and the Local Government Association, conducted a seminar to provide practical information to councils about emergency recovery. The seminar outlined the framework and process of emergency recovery in South Australia and provided practical resources to enhance emergency recovery in local government. Members from various metropolitan councils attended the seminar to discuss different roles that were being undertaken and what is happening in the future for local government.

Infection Control Workshop
SA Health facilitated a workshop tailored for Environmental Health Officers, exploring the skin penetration industry. The day consisted of theory based presentations discussing infections and risks associated with skin penetration procedures. A diverse selection of presenters allowed participants to gain information from every perspective of the industry. The final presentation detailed an investigation into poor practice and the health effects on clients. Officers gained a better understanding of the industry, which has advanced the quality of routine inspections, hence leading to a greater level of compliance and better health in the community.

Clandestine Drug Laboratories
An officer attended a seminar titled ‘Clandestine Drug Laboratories – A New Challenge for EHOs’ that was presented by Environmental Health Australia. The purpose of the training was to provide Environmental Health Officers with knowledge about clandestine drug laboratories, other agency involvement and the remediation process required to remove harmful chemicals. It is still not clear as to council’s role in dealing with premises that have been known to be a clandestine drug laboratory. Discussions are still occurring to formulate a position for all councils across the state based on advice from the Local Government Association and SA Health.

Mandated Notification Workshop
Three Immunisation nurses attended a one-day Mandated Notification workshop. Registered nurses are listed to report suspected child abuse under section 11(2) of the Children’s Protection Act 1993 (as amended in 2006).

Public Health Association 11th National Immunisation Conference
Two immunisation nurses had the opportunity to attend the 11th biannual Immunisation Conference from 16 - 18 September 2008, held on the Gold Coast, Queensland. The conference entitled – ‘Immunisation: Old and New Frontiers’ delivered topics on the prevention and control of vaccine preventable diseases through immunisation. The program featured outstanding international experts from New Zealand, United Kingdom, the United States and Europe.

The conference was a valuable professional update and a chance to attend the inaugural National Local Government Immunisation Providers meeting, initiated by the Victorian Immunisation Network Special Interest Group. A representative from each state gave an overview of their school and public immunisation programs, giving insight to the varied service delivery within Australia.
At the 2008 PHAA conference, there was a call for entries for a photographic exhibition – ‘Catching the Mood of Public Health in Australia’ by delegates attending. The Team leader Immunisation entered the photo shown in the camera lens of the finalist certificate below.

‘Rotavirus Vaccination Program – 18 months on’
The Immunisation Team Leader attended a Rotavirus seminar. Professor Geoffrey Davidson, a paediatric gastroenterologist at the Women & Children’s Hospital, spoke on the ‘National Rotavirus Surveillance Program: What’s new for Immunisation Providers to know?’. From the United States of America, Dr Barbara Kuter presented ‘Rotatetq vaccine – The U.S. Experience and the Latest Clinical Developments’.

National Human Papillomavirus (HPV) Vaccination Program Register
In December 2008, four immunisation staff attended a one-day training session for the new National HPV Register developed to keep track of clients HPV vaccinations. The workshop demonstrated how to use the secure web portal to upload data direct from the ImPS computer program, retrieve data and enter vaccination history. Local Government and other providers were requested to upload and transfer their data of HPV vaccines administered since the commencement of the 12 – 26 year old HPV program. The ongoing HPV vaccination data requires transfer quarterly.

Cardiopulmonary Resuscitation (CPR) Refresher
During February 2009, ten immunisation staff attended the annual CPR update presented by the Australian Red Cross. One immunisation nurse attended a two-day Senior First Aid course, which included the CPR update and detailed first aid procedures.

Vaccination – More Than Just a Shot in the Arm
In May 2009, immunisation nurses attended a thematic education session – ‘Vaccination, More Than Just a Shot in the Arm’, sponsored by Healthy Development Adelaide (A Research & Innovation Cluster in South Australia). Speakers included Professor James Paton presenting ‘Pathogenesis & Prevention of Pneumococcal Disease’ and Professor Eric Gowans, who established a virus research laboratory at the Women and Children’s Research Institute, spoke on ‘Problems in Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) vaccine design’.

PROFESSIONAL AFFILIATION
South Australian Immunisation Network
During the year, immunisation nurses attended meetings of the South Australian Immunisation Network, held every two months at a nominated local council.

‘Happy & Fully Immunised’ - children of a delightful Sudanese refugee family now residing in South Australia. The children are very happy to be fully vaccinated after many visits to our clinic for catch-up immunisations.
Guest speakers are invited to attend the meetings and present a variety of relevant topics. The annual country meeting, held as an opportunity for regional immunisation providers to attend, took place during July 2009 at Port Augusta. Presence was high from the northern region; over 100 attendees listened to the following guest speakers present on a wide range of immunisation related topics:

- Professor Ian Frazer – Human Papillomavirus vaccine technology and clinical trial review
- Ms Maureen Watson SA Health – Dealing with HPV Adverse Event Reporting
- Ms Mary Anne Williams Western Division of GP – Delivering mass vaccination clinics during a Pandemic Influenza Outbreak

Adelaide North East Immunisation Stakeholders Group
During the year, the Authority’s immunisation nurses attended quarterly meetings held by the Adelaide North East Division of General Practice. The meetings give providers the opportunity to work together to implement ideas for improved immunisation service and coverage in their geographic areas. The focus at the September 2008 meeting was on 4-year old coverage rates and the changes made to overdue notifications issued from Medicare to parents.

Disease Control / Emergency Management Special Interest Group (Environmental Health Australia)
The Disease Control / Emergency Management Special Interest Group (SIG) provides a forum for environmental health officers to advance matters of professional interest and encourage consistency in practice. Officers attended four out of six meetings held during the reporting period and were actively involved in the following:

- Development of checklists and guidelines for use by Environmental Health Officers when inspecting swimming pools, hairdressing salons and activities involving skin penetration.
- Pandemic Influenza Working Group established to determine how local and state government will work together to manage the environmental health issues likely to arise during a pandemic.

- Clandestine Drug Lab Working Party that wrote to the Public and Environmental Health Council seeking their guidance about how to respond to notifications from the SA Police about drug laboratories established in residential dwellings.
- Development of training to familiarise Environmental Health Officers with the operation, maintenance and inspection of warm water systems to prevent Legionella contamination.

Food Safety Special Interest Group (Environmental Health Australia)
During the past year, the role of the Food Safety Special Interest Group (SIG) has proven to be invaluable. The forum provided an opportunity for Environmental Health Officers to discuss current issues and obtain ongoing updates from SA Health. New food safety legislation requiring auditing of food safety programs by businesses that serve vulnerable populations was a topical discussion point.

With the proliferation of sushi bars across Adelaide, an officer from the Authority gave a presentation at a SIG meeting about recent inspection findings and insights into the unique aspects of sushi preparation.