

# **Modern Slavery Act Statement**

Reporting Period  
1 July 2024 – 30 June 2025

## **Modern Slavery Act Statement**

This Modern Slavery Statement is made pursuant to the Commonwealth *Modern Slavery Act 2018* (the Act) by Echuca Regional Health and relates to the financial year 1 July 2024 to 30 June 2025.

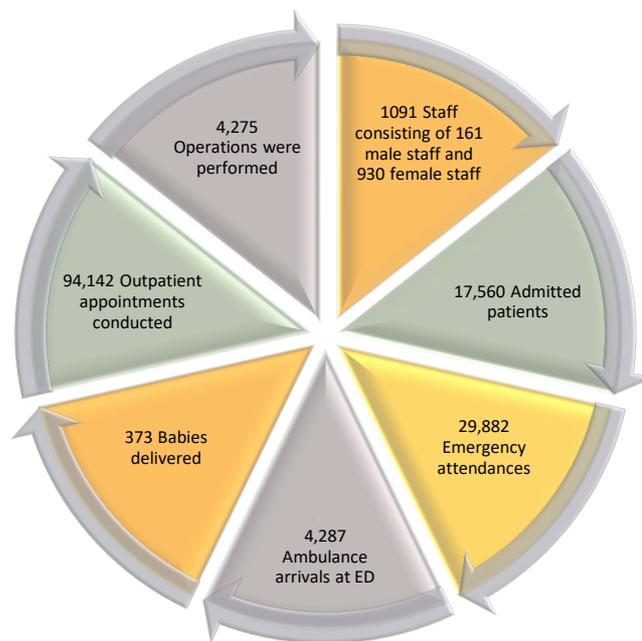
### **Mandatory Criteria One and Two**

#### **Identify the reporting entity and describe its structure, operations and supply chains:**

Echuca Regional Health (ERH) of 226 Service Street, Echuca, ABN 30 490 690 530, is a Schedule 1 Public Health Service incorporated pursuant to the provisions of the Health Services Act 1988 (Vic).

The original Echuca District Hospital opened in 1882 and was renamed Echuca Regional Health in 1993 following amalgamation with Echuca Community Health Service. It is approximately 208km north of Melbourne and is a border town situated on the Murray River with Moama located on the NSW border. The Shire of Campaspe (Victoria) with a population of 38,153 covers an area of 4,518 square kilometres and the Murray River Council (NSW) with an estimated population of 13,562 covers an area of 11,865 sq. km. Echuca Regional Health is a 159 bed service.

Our staff and Care at a Glance:



These services are complimented by a High Dependency Unit, Medical Ward, Surgical Ward, Obstetric & Paediatric Ward, Rehabilitation & Palliative Care Ward, High care Residential Aged Care, Cancer & Wellness Centre and 3 operating theatres.

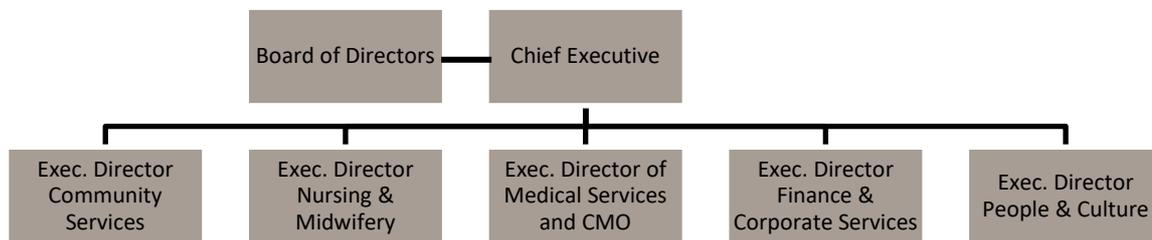
ERH provides services in emergency, maternity, women's health, medical imaging, pathology, rehabilitation, community services, residential aged care, community

dental, palliative care, cancer services and renal dialysis to the people of the Loddon Mallee region and Murray region.

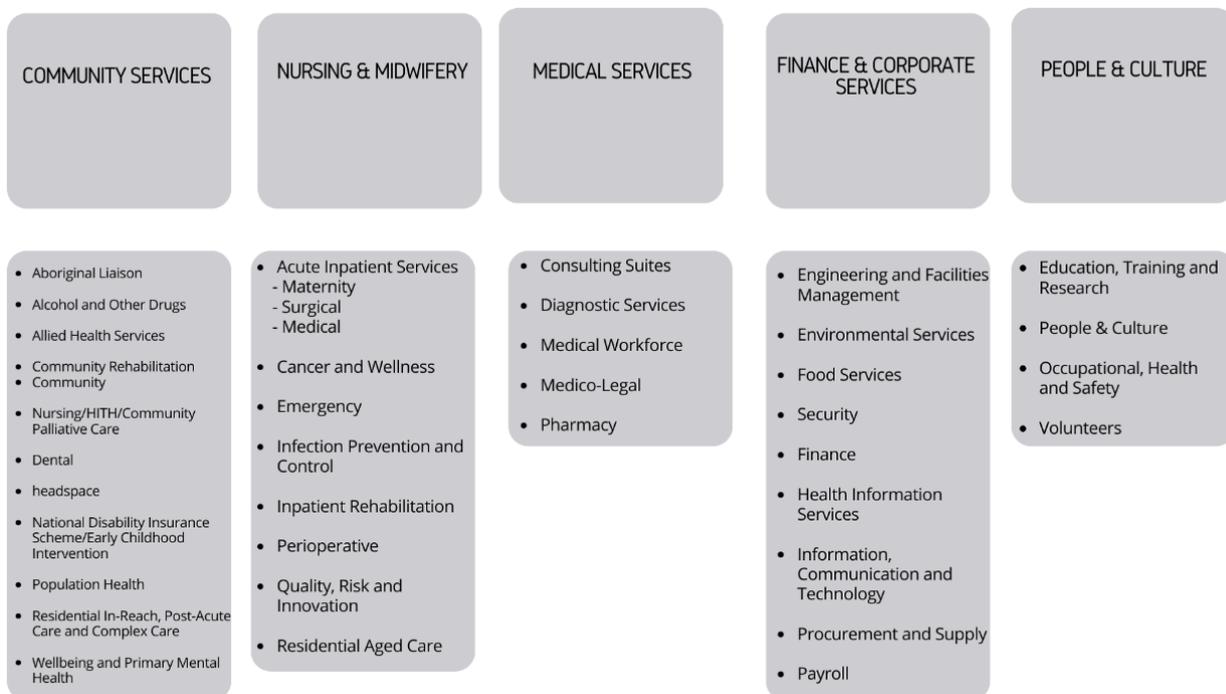
[ERH-Annual-Report-2024.pdf](#)

There is one main campus at ERH, with many services extended to other regional settings including Rochester, Cohuna and Kyabram. ERH and the Victorian Government are committed to delivering high quality health-care to the community of Echuca/Moama and surrounds.

### Echuca Regional Health’s Organisational Chart



### Supply Chain



ERH’s supply chain includes (but is not limited to) the products and services used to deliver healthcare services including medical equipment and consumables, personal

protective equipment and ICT equipment. ERH’s supply chain also includes products and services provided by contractors including (but not limited to) consultants, support and maintenance services. ERH also supports other external Hospitals with service support and also clinical and non-clinical consumables.

ERH also utilises the contracts under the HealthShare Victoria (HSV) arrangement. HSV is a state-wide procurement organisation that partners with Victoria’s public health services to procure best-value goods and services. HSV works in partnership with public health services to understand their requirements, facilitate large-scale collective tenders and manage common-use contracts on behalf of the state. ERH purchases the goods and services it needs from the suppliers who are party to HSV collective agreements. As such, it is recognised that HSV has a significant role in health service supply chains. Analysis of our annual spend data shows that ERH purchases approximately 23% of its annual spend through HSV collective agreements and 77% of purchases are undertaken directly by ERH. Of this 77%, some purchases by ERH are small and low risk, whilst others require greater scrutiny using various risk management practices.

In 2024-25, HSV has in place 66 collective agreements worth \$1.4bil in value.

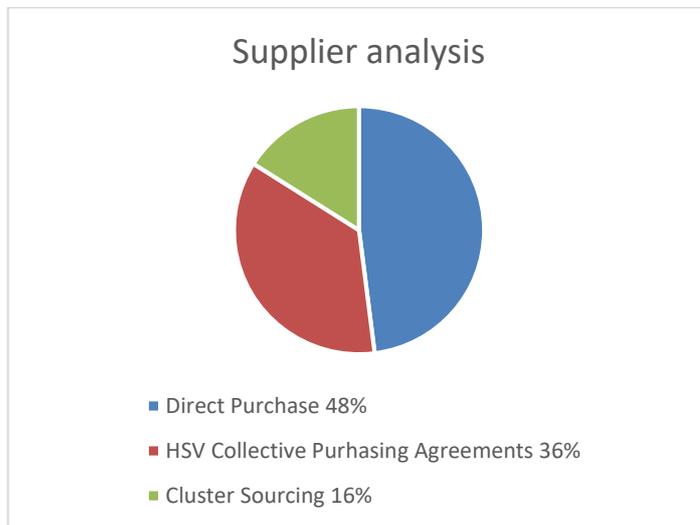
HSV contracts cover a broad range of services, equipment and supplies across a number of categories including ventilators, beds, mattresses, patient trolleys, treatment chairs, hypodermic needles and syringes, gloves, pharmaceutical products, IV fluids, agency labour, catering supplies, laundry and linen services and non-emergency patient transport. A full list of HSV’s sourcing categories can be found at:

<https://www.healthsharevic.org.au/contracts-and-documents/contracts>.

For this reporting period, ERH identified spend with 1133 suppliers/service providers with the top 10 suppliers representing 43 per cent of our overall category spend. The intent for this reporting period is to focus on these suppliers/service providers.

Analysis of the top 43 percent of suppliers ERH engaged with shows that 36% of these suppliers were also suppliers under HSV collective purchasing agreements.

This has assisted us to better focus our attention and risk review on suppliers.



## **Mandatory Criteria Three**

**Describe the risks of modern slavery practices in the operations and supply chains of the reporting entity and any entities the reporting entity owns or controls:**

As a health service with a largely skilled workforce, ERH considers the risk of modern slavery within its direct business operations to be relatively low. In line with a risk-based approach, these risks will be further examined in subsequent reporting periods.

ERH supply chain activities consist of the following procurement approaches to the market:

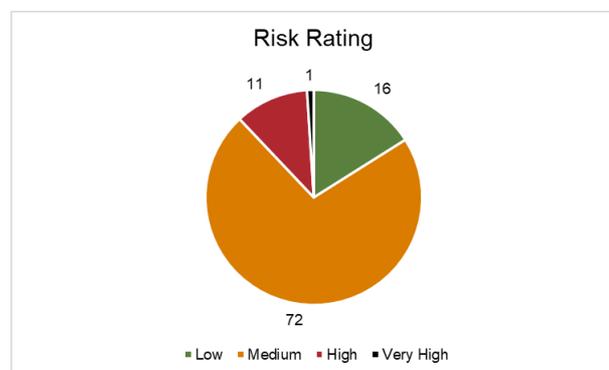
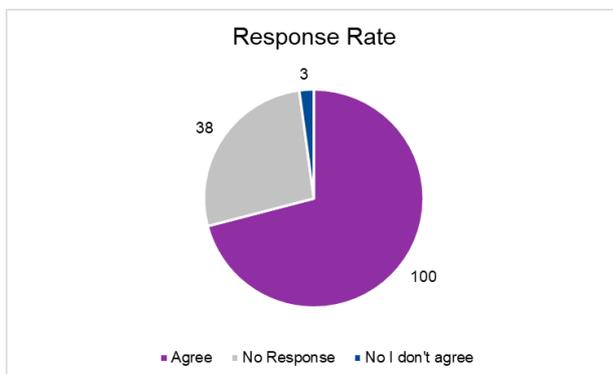
- Group sourcing activities:
  - HSV led cluster sourcing – collectively led by HSV on behalf of participating health services.
  - HSV led collective purchasing – collectively led by HSV on behalf of participating health services.
  - Health service led cluster sourcing – collaborative procurement by a group of health services, where the lead health service ensures modern slavery requirements.
- Direct sourcing activities where ERH directly engages with each supplier on its own.

### HSV Collective Purchasing Agreements

HSV assisted ERH with the assessment of modern slavery risk in the supply chains of our Collective Purchasing Agreements. In 2024-25 HSV has provided a support focus to the health service in fostering collaboration between HSV, Health Services and Suppliers to prioritise risk mitigation actions. There were 141 suppliers that were identified by HSV for the risk assessment survey for FY2024-25. Of the 141 invited suppliers, 100 responded, whilst 3 declined to respond and 38 did not respond.

In many instances those that did not respond are required to do a Modern Slavery Statement and so there is an understanding of their progress around modern slavery.

### **Response Rate & Supplier Risk Ratings**



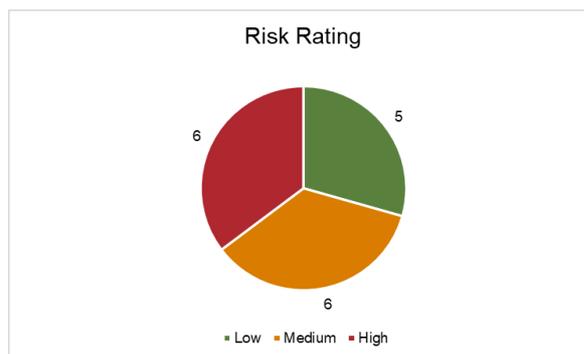
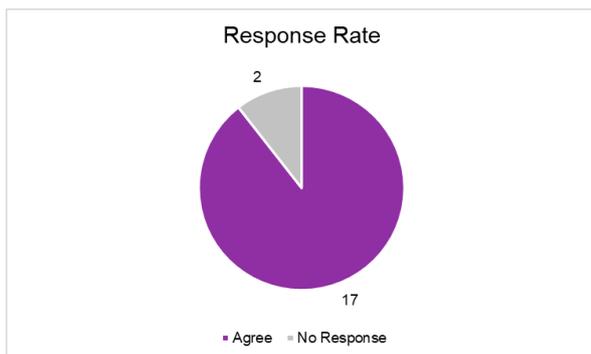
| Risk Rating  | No. of suppliers |            |
|--------------|------------------|------------|
|              | FY23             | FY24       |
| Very High    | 4                | 1          |
| High         | 11               | 11         |
| Medium       | 48               | 72         |
| Low          | 33               | 16         |
| <b>Total</b> | <b>96</b>        | <b>100</b> |

The HSV assessment identified 11 high risk suppliers and 1 very high-risk supplier within ERH’s supply chain. It should be noted that these results do not imply ERH has caused or contributed to modern slavery practices, but rather, ERH is linked to risks which exist offshore and in high-risk geographies.

### ERH Direct Sourcing Activities

For direct sourcing activities, ERH acknowledges that there is a risk of modern slavery practices, especially upstream within tier two suppliers (manufactures for our direct tier one suppliers) within the supply chain. We continue to progress in this space to better understand these risks; again, we use a risk-based approach which allows us to build on our focus and achievements from foundational levels.

Commencing this year, HSV assisted ERH with the assessment of modern slavery risk in the supply chains of our direct sourcing activities. In 2024-25 HSV provided a support focus to the health service in fostering collaboration between HSV, Health Services and Suppliers to prioritise risk mitigation actions. There were 19 direct suppliers that were identified for the risk assessment survey for FY2024-25. Of the 19 invited suppliers, 17 responded, whilst two did not respond.



We identified six high risk direct suppliers within ERH’s supply chain. It should be noted that these results do not imply ERH has caused or contributed to modern slavery practices, but rather, ERH is linked to risks which exist offshore and in high-risk geographies.

## **Mandatory Criteria Four**

**Describe the actions taken by the reporting entity and any entities that the reporting entity owns or controls to assess and address these risks, including due diligence and remediation processes:**

- Echuca Regional Health prepared its Modern Slavery policy and this was approved in January 2023 by ERH Non-Clinical Policy and Procedure Committee and communicated to ERH staff via the ERH newsletter.
- A risk assessment template has been created for all market approach procurement activities.
- A short form AND long form supplier questionnaire has been created to assist with determining risk-appropriate modern slavery clauses for inclusion in the contract documents, dependant on the risk assessment rating.
- A modern slavery register has been created to populate and monitor, and will be maintained by the Procurement/Contracts team.
- A modern slavery clause has been incorporated into ERH's contract template.
- Supplier Code of Conduct Commitment is included in all RFX documents.
- All ERH procurement staff have been provided with training modules via LMS to educate and spread awareness. ERH has recently changed from ECHO to LMS which allows better tracking of training completion by staff of modern slavery training/initiatives.
- The very-high and high-risk collective agreement suppliers were requested to provide a copy of their modern slavery policies for review and feedback. Of the 1 very high and 11 high risk suppliers, six suppliers provided their modern slavery policy and received feedback.
- The high-risk direct sourcing suppliers were requested to provide a copy of their modern slavery policies for review and feedback. Of the six high risk suppliers, two suppliers provided their modern slavery policy and received feedback.
- Additionally, five of the 11 high risk collective agreement suppliers attended HSV supplier engagement sessions throughout the year, along with two out of the six ERH direct sourcing suppliers. The sessions focussed on actions to mitigate modern slavery risk (for further details see criteria five).
- In the 2024-25 period, the Supply/Procurement Manager attended 6 out of 10 HSV MS Community of Learning sessions. Topics covered include: last minute tips for reporting; 2023 supplier risk assessment results; Sector focus on the freight industry; KPI's for effectiveness; and, what a good statement looks like.
- The Supply/Procurement Manager also attended six focussed 1:1 sessions with HSV on modern slavery risk mitigation training.

## **Mandatory Criteria Five**

**Describe how the reporting entity assesses the effectiveness of actions being taken to assess and address modern slavery risks:**

Over the 2024-25 period, 63 suppliers on HSV Collective Agreements and two ERH direct sourcing suppliers attended HSV's supplier engagement sessions. Supplier engagement topics over this period included:

Introduction to Modern Slavery Risk;

Modern slavery focus on the freight sector and;

Victorian Government Supplier Code of Conduct.

As future introduction sessions become available, ERH will continue to engage with direct sourcing suppliers to participate. ERH will also continue to risk assess suppliers ERH directly engage with utilising the HSV-developed Supplier Risk Assessment Tool.

One on one discussions are held with representatives when they visit on-site. If their company has a high/very high-risk rating, ideas are put forward on how they can improve by directing them to free training resources, tools and templates.

The success of supplier responses and engagement from ERH, along with continued support and education will lead to a reduction in the risk rating of suppliers against modern slavery through a continual improvement method.

ERH will continue to mature in our understanding of the Modern Slavery Act and work actively with HSV to embed the learnings and risk management tools into our end to end procurement cycle.

ERH will continue to work collaboratively with HSV to greater understand the 1 very high and 11 high risk level suppliers identified under the collective purchasing agreements, and which appear in our supply chain, in addition to the six high risk suppliers that supply to our health service directly and actions that can be taken to reduce these modern slavery risks.

## **Mandatory Criteria Six**

**Describe the process of consultation with any entities the reporting entity owns or controls:**

Echuca Regional Health does not own or control any other entities.

## **Mandatory Criteria Seven**

**Any other relevant information:**

Echuca Regional Health will continue to plan, review and implement the measures required to further enhance the HSV implementation guidance provided to assist Health Services. Further, ERH will also continue to work closely with HSV to continue to develop and enhance the practices and processes that underpin a successful Modern Slavery framework. This will include reporting on numbers of staff completing the LMS Modern Slavery training modules, details of risk ratings of suppliers directly engaged and measures taken by ERH to engage with them for the purposes of raising awareness.

## **Closing Statement**

Echuca Regional Health recognises the importance of implementing a robust Modern Slavery framework and is committed to continually improve our approach, assessment and awareness to eradicate Modern Slavery in our contract, procurement and supply chains. ERH also recognise there is more to do and remains highly committed to continually improving our approach by working closely with HSV and partnering with our stakeholders.

This statement was approved by the Board of Echuca Regional Health on 4 Dec 2025.



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Board Chair: Stacy Williams