# WORKING TOWARDS A FAIRER WORLD FOR ALL

#### Teachers Health Modern Slavery Statement 2024

Under the Modern Slavery Act 2018 (Cth)





Teachers Health respectfully acknowledges the Traditional Custodians of this land. We also recognise that Aboriginal and Torres Strait Islander peoples were the first educators and healers and have held the knowledge of this land for many thousands of years. We pay respect to Elders past, present and emerging and extend that respect to all Aboriginal and Torres Strait Islander peoples and celebrate their enduring connections to and knowledge of the land, waterways and sky.

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## 1. Introduction and Board Approval

Modern Slavery continues to be a **growing global problem**, impacting over 50 million individuals<sup>1</sup>. It exists across all industries and in virtually all countries. **Modern Slavery is a terrible reality in Australia.** During the 2023/24 financial year, the Australian Federal Police received 382 reports of human trafficking and slavery. This represents a 12% increase in reports of alleged slavery incidences from the previous reporting<sup>2</sup>.

Teachers Health welcomes the opportunity to continue to report our annual efforts to identify, assess and address potential areas of elevated modern slavery risk within our supply chains and operations. Teachers Health is committed to developing, implementing, and maintaining a robust, group-wide response to modern slavery.

This is our fifth statement under the *Modern Slavery Act 2018 (Cth),* and we have been a reporting entity since the Act's commencement.

All numbers, statistics and facts described in this Statement are as at 30 June 2024, unless otherwise stated.

This Modern Slavery Statement was approved by the Board of **Teachers Federation Health Ltd** (ABN 86 097 030 414) in its capacity as the principal governing body on 11 December 2024. Further details for the statutory approval of this Statement, including the signature of the duly authorised person is contained in **Annexure 1** to this Statement.

# 2. Teachers Health's structure, operations and supply chains

Teachers Federation Health Ltd (Teachers Health) is the reporting entity covered by this Statement.

Teachers Health is an Australian profit-for-member public company registered under the *Corporations Act 2001 (Cth)* and a registered restricted access Private Health Insurer under the *Private Health Insurance Act 2007 (Cth)*. Teachers Health is a company limited by guarantee and has no contributed equity.

Teachers Health's principal activities are:

- Underwriting private Health insurance;
- Delivering other health-related services to our members; and
- Investing and managing member funds.

For the reporting period, Teachers Health's provided coverage for 422,098 lives through 193,134 active policies. Teachers Health provides private health insurance under our brands:



For the education community.



For the nursing and midwifery

community.



For the higher education community.

<sup>1</sup>Walk Free 2023, The Global Slavery Index 2023, Minderoo Foundation; Available at https://www.walkfree.org/global-slavery-index/ [accessed on 23/09/2024]. <sup>2</sup>AFP, Media Release, "World Day Against Trafficking in Persons", 30/07/2024; Available at: https://www.afp.gov.au/news-centre/media-release/world-day-against-trafficking-persons-12-cent-increase-reports-human#:~:text=In%20the%202023%2D24%20financial%20year%2C%20the%20AFP%20received%20382,were%20more%20 than%20just%20numbers [accessed on 26/09/2024].

#### 2.1 Structure and owned /controlled entities

Teachers Health had two wholly owned subsidiaries for part or all of the reporting period:



#### **Teachers Healthcare Services Pty Ltd**

Provides care coordination services to Teachers Health members, including hospital substitute programs and chronic disease management programs. Effective 1 April 2024, the activities of Teachers Healthcare Services Pty Ltd were merged into the operations of the parent company and the subsidiary was voluntarily de-registered.



#### **Teachers Federation Health Foundation Pty Ltd**

The trustee of the Teachers Health Foundation. The Foundation provides grants for medical research regarding conditions that affect the health and wellbeing of the teaching, nursing and midwifery communities.

The operations and supply chains of Teachers Federation Health Foundation Ltd (and Teachers Healthcare Services prior to its merging) are substantially integrated. As a result, full consultation occurred with these entities in connection with the preparation of this Statement, including:

- Engaging stakeholders from across the Teachers Health Group in regular meetings of our Modern Slavery Working Group
- The Board of Teachers Health receiving updates on the activities of the owned/controlled entities. Teachers Health Executive Leadership reviewed this Statement, prior to its approval by the Teachers Health Board.

Our initiatives to address modern slavery risks are driven by a cross-functional working group with broad representation across the business. During the reporting period, the Modern Slavery Working Group met on ten (10) separate occasions.

#### 2.2 Operating locations and key workforce characteristics

Teachers Health's registered office is at Level 4, 260 Elizabeth Street in Sydney, which is where most of our team members work. We also have smaller teams based at Health Centres in New South Wales, Victoria, and South Australia. A small number of Business Development Officers work remotely across Australia.

Some key characteristics of the Teachers Health team include:

- Over 450 people employed throughout Australia. This is comprised of 333 full-time, 58 part-time, and 29 casual employees as well as 25 fixed-term contractors. In addition, we engage with 34 independent contractors, mainly across our six Health Centres.
- Employees, independent contractors, and casuals are retained directly by Teachers Health, with limited use of work hire agencies.



Figure 1: Teachers Health Group operations and supply chains

#### 2.3 Supply chains

Teachers Health engaged 568 direct suppliers during the reporting period, the vast majority of which are Australia-based. Over 98.3% of our procurement spend is with 242 suppliers.

In terms of total number of individual suppliers within categories, procurement for our Health Centres (optical, dental & medical suppliers) make up the largest supplier group (64), followed by corporate services such as office supplies, training and transport (50) and technology services (47).

Most of our procurement spend is technology services-related (31%), followed by advertising (14%) and consulting services (14%).



Figure 2: Breakdown of the supply chain of Teachers Health Group (inner ring is annual dollar spend and outer ring is share of suppliers)\*

\*Analysis based on direct suppliers with spend over \$10,000.00 (over 98.3% of total spend) and excluding hospital, medical and ancillary providers.

### 3. Identifying, Assessing and Addressing Modern Slavery Risk

Teachers Health's overall modern slavery risk profile remains comparatively low. Key contributing factors for this include that we are an Australian-based company, operating in a highly regulated professional services industry, and purchasing mainly from other Australian-based services companies.

No incidences of actual or suspected modern slavery came to our attention during the reporting period.

#### **3.1 Updated Grievance Procedures**

Teachers Health continues to have a robust governance framework and policies to promote ethical behaviour within our operations to address potential modern slavery risk factors.

As an employer, we comply with the Fair Work Act 2009 (Cth), the Work Health and Safety Act 2011 (Cth) as well as relevant federal and state-based legislation.

Customer service staff are employed under a triennial Enterprise Agreement, approved by the Fair Work Commission and in force until 2026 (when we anticipate it will be renewed and reapproved). All employees have access to a range of workplace protections, including our Whistleblower Policy and Grievance Policy and Procedure (with embedded Employee Assistance Program).

During the reporting period, Teachers Health engaged a specialised service provider to provide a new Whistleblower and Modern Slavery Reporting Tool that replaced our internally managed reporting system.

The new reporting pathways include online phone, email and post as well as expert advisory services. By shifting this process to an experienced external service provider with experience and knowledge to handle whistleblowing cases effectively, Teachers Health ensures continuous improvement and maximises objectivity in the reporting of concerns and complaints.

The Teachers Health internal Whistleblower Policy was also externally reviewed and updated to ensure it continues to reflect good practice. In introducing the new service provider and the updated Teachers Health Whistleblower Policy to employees, whistleblower training was rolled out and completed by 314 employees across the organisation.



#### **3.2 Internal Governance and Policy Measures**

While identifying modern slavery risk is a shared organisation-wide responsibility, ultimate oversight and ownership of our response to modern slavery resides with the Executive level and Board of Teachers Health.

Teachers Health believes in bringing its HEART values to life through good corporate citizenship. Modern slavery forms part of a broader approach to sustainable business and minimising negative impacts on community, society, the environment, and the economy.

Our expectations of suppliers have been captured in the development of a **Supplier Code of Conduct** which reflects our expectations of suppliers on a range of ESG topics, including human rights and modern slavery. It is anticipated that the Supplier Code of Conduct will be socialised with stakeholders from across the business during the next reporting period.

Our **Modern Slavery Working Group** and the **Vendor Management Forum** maintain an internal self-service platform for vendor management. The platform features resources relating to addressing modern slavery specific issues.

During the reporting period, the Modern Slavery Working Group and Vendor Management Forum worked collectively in the development of our **Modern Slavery Tool Kit.** The purpose of the tool kit is to provide a high-level guide to support and educate vendors on Modern Slavery. It is anticipated that the tool kit will be fully operationalised, including though our internal self-service platform for relationship managers, in the next reporting period.

Employees are required to comply with the Teachers Health anti-bribery and corruption policy as well as our Corporate Code of Conduct. These measures reflect our HEART values that are at the core of our corporate culture.

During the reporting period, the WH&S Committee met bi-monthly, with each meeting actively promoted through internal communication channels and within business units, to encourage WH&S matters to be raised from across the organisation. The WH&S Committee is a forum for employee representatives from across the Teachers Health Group, to facilitate cooperation between departments to identify, address and resolve health and safety concerns from within the workplace. Within its scope of authority, the WH&S Committee makes recommendations for corrective actions to help reduce hazards, and develop plans or procedures to resolve identified WH&S issues. The WH&S Committee assists the Teachers Health Group in developing health and safety standards, rules and processes to protect workers in the workplace.

#### 3.3 Supply chain risk assessment and due diligence

From a modern slavery risk perspective, Teachers Health's overall supply chain has not significantly changed since the last reporting period.

Our internal risk assessment processes are focused on assisting our business units to procure goods and services from reputable suppliers that Teachers Health uses to supply goods and services to our members and patients.

# **Case Study** Supplier Specific Due Diligence and "Deep Dive"

During the reporting period, our Modern Slavery Working Group completed four (4) 'deep dive' reviews of identified Tier 1 suppliers from across the organisation.

The deep dive assessment is a new process introduced during the last reporting period. Using a custom risk assessment framework, the assessment is completed by gathering information from the supplier's Modern Slavery Self-Assessment Questionnaire (the Questionnaire) and a comprehensive review of a wide range of publicly available information sources. The deep dive assessment aims to go beyond face value representations and interrogate broader information sources that can provide insights about the supplier's:

- 1. Compliance with the Act,
- 2. Risk identification processes for its own operations and its supply chains,
- 3. Governance framework for managing modern slavery risk exposures,
- 4. Actions taken in day-to-day operations and managing supply chain risks including monitoring and measuring, and
- 5. Incident management, i.e. identification and resolution.

After reviewing the nature and sufficiency of available information for each of the above areas, Teachers Health makes an overall determination about whether the supplier appears to be adequately managing modern slavery risks. Any issues for further investigation which arise during the assessment are shared with the relationship manager for direct discussion with the supplier.

The selected four (4) suppliers were based on industry and company spend and included two (2) information technology vendors and two (2) suppliers to our Health Centres. The complexity, key inputs and highly globalised nature of information technology and medical supply chains equates to an inherently elevated risk profile, which heightens the importance of individual companies implementing effective risk mitigation frameworks.

The deep dive results did not reveal any matters of critical concern. Some apparent discrepancies were noted in relation to one supplier's approach to mandatory modern slavery reporting.

Following investigation, we contacted the supplier who promptly responded providing the clarifications sought.

Teachers Health recognises the limitations inherent for "desktop" based due diligence. However, given the modern slavery risk exposure in Teachers Health's operations is highest in deeper supply chain tiers, alternative forms of due diligence such as random supplier site inspections or supplier worker interviews, is not considered to be the most appropriate approach. Rather, we are hopeful that the direct supplier engagement that can occur through such desktop due diligence (as was necessary with this round of assessments) will continue to raise broader awareness of deeper supply chain risks and increase the opportunities for future positive collaboration and cooperation with our suppliers.

At Teachers Health, procurement is decentralised and driven from within business units. Internal procurement processes are regularly reviewed and updated. Business partners work closely with the legal and risk functions of Teachers Health to ensure our contracts reflect good practice.

During the reporting period, a cross-functional Vendor Management Forum was established to streamline and uplift the procurement process. To effectively and efficiently support business partners, weekly Vendor Management Clinics are conducted with representatives from the legal, risk and information security teams.

Compared with our direct suppliers, our visibility over potential modern slavery risk is reduced for suppliers at the 2nd, 3rd and deeper tiers. Our core approach is that improved transparency into deeper supply chain tiers can be most effectively achieved through positive and ongoing direct supplier engagement. In addition, the efficacy of this approach improves when applied on an industry-wide basis, such as the Private Health Insurance Community of Interest on Modern Slavery (PHI Modern Slavery CoI), which is a key industry group for collaborative modern slavery response efforts.

#### 3.4 Potential areas of elevated supply chain risk

As reported in previous Modern Slavery Statements, Teachers Health periodically engages the services of external consultants specialising in modern slavery, to undertake a high-level risk assessment across our entire supply chain. The risk assessment uses a balanced, global Multi-Regional Input-Output (MRIO) table to perform the supply chain mapping, which links supply chain data from 208 countries, and 37,318 unique industry/country combinations. The applied data universe comprises over 35,000 local industry categories, which represents more than 98% of global GDP. The MRIO is regularly updated and draws from the most comprehensive and credible global data inputs available, including the United Nations' (UN) System of National Accounts; UN COMTRADE databases; Eurostat databases; the Institute of Developing Economies, Japan External Trade Organisation (IDE/JETRO); and official statistical data from many national agencies worldwide, including the Australian Bureau of Statistics.

The synthesis of global economic supply chain data is overlayed, via a proprietary algorithm, with the best available research and estimates of modern slavery incidences at the national and industry levels, including the Walk Free Foundation's Global Slavery Index (last updated in May 2023); the International Labour Organisation's Global Estimates of Modern Slavery; official reports published by the United States on International Child Labour, Forced Labour and Human Trafficking, and the database of modern slavery risk factors by country and sector developed internally by our external consultant.

The third party proprietary risk assessment tool has provided Teachers Health with a comprehensive understanding of where potentially elevated areas of risk may be most concentrated in our supply chain.

The risk assessment has flagged industries such as business and professional services, health related services (including suppliers to our optical and dental centres) and uniform providers. Figure 3 below sets out a further summary of the industry categories with potentially elevated modern slavery risks, based on Teacher Health's spend in the respective sectors and the risks associated with the inputs used by these industries.

Figure 3: Allocation of Teachers Health's modern slavery risk exposure by industry category



The proprietary risk assessment has also confirmed that Teachers Health's modern slavery footprint is, on a cumulative basis, highest in Australia, India and China. This is based on a combination of our overall spend and risks in the supply chains of our direct suppliers. Teachers Health is not directly engaging with suppliers based in all these countries, but our direct suppliers, or suppliers further down the supply chain are likely reliant on inputs sourced from these geographies.

Figure 4: Allocation of Teachers Health's modern slavery risk exposure by geography.



#### 3.5 Supplier engagement

Teachers Health continues its risk-based priority engagement with existing and new suppliers.

In conjunction with participating members of the PHI Modern Slavery CoI (Platform Participants), we leverage an external provider's specialist Supplier Platform to distribute a targeted Supplier Self-Assessment Questionnaire and manage supplier responses. We progressively distribute our Supplier Self-Assessment Questionnaire to existing suppliers which have been identified as higher risk. For new suppliers, the Questionnaire is issued to relevant suppliers as part of our third-party vendor onboarding process. This approach encourages an efficient use of resources and promotes consistency across Platform Participants.

20 new suppliers received targeted Questionnaires from the Supplier Platform during the reporting period, with 6 of these suppliers providing substantive responses.

Teachers Health continues to incorporate provisions in direct supplier contracts that specifically address modern slavery issues. This includes an express requirement for suppliers to notify us of reasonably suspected and known instances of modern slavery in their own supply chains and operations.

In last year's Statement, we described our ongoing engagement with selected suppliers through the development and implementation of five (5) individual remediation plans within our Supplier Platform.<sup>3</sup> By way of progress update, as at the date of finalising this Statement, two (2) suppliers have completed the remediation plans; two (2) are at the Implementing Action phase and three (3) remain at the Preparing Action Stage.

Teachers Health has developed a Modern Slavery Tool Kit and a Supplier Code of Conduct which provide guidance regarding the modern slavery processes at Teachers Health and our proposed approach to positive supplier engagement and collaboration. Suppliers will receive a copy of the Supplier Code of Conduct during the onboarding process. The Code of Conduct affirms Teachers Health's approach of open dialogue about modern slavery risks, working together to reach better outcomes for employees, members, and communities. The Modern Slavery Tool Kit and Supplier Code of Conduct are planned for full implementation in the next reporting period.

#### 3.6 Hospital, medical and ancillary providers

Teachers Health considers hospital, medical and ancillary providers, who provide services to Teachers Health members, to be Tier 1 suppliers. However, our access to hospitals and certain medical and ancillary providers is mediated through members and purchasing groups, such as the Australian Health Service Alliance (AHSA) or the Australian Regional Health Group (ARHG). Therefore, the practical reality is that there is no direct contractual relationship between Teachers Health and these suppliers. The AHSA's Business Partner Agreement with Hospitals includes a standard provision that specifically addresses issues relating to modern slavery risk, including requirements for hospitals to:

- Carry out due diligence in their operations and supply chains to understand and address modern slavery risk.
- Train employees and contractors to identify and respond to modern slavery risk.
- Annually audit compliance with modern slavery laws.
- Notify the AHSA of any actual or suspected concerns relating to potential modern slavery practices within their operations or supply chains.

<sup>3</sup>In this context, "remediation" refers to an identified substantive gap or other issue with some aspect(s) of the supplier's modern slavery response framework. It does not relate to any allegation of a modern slavery practice

We have contractual relationships with over 295 independent hospitals and 45 hospital groups. These contracts are largely negotiated by the AHSA, representing 24 private health insurers. We also contract with medical providers through the ARHG and directly with a small number of medical providers through Healthcare Services (as part of our Broader Health Cover offering).

The AHSA remains an important player in progressing the PHI Modern Slavery Col's modern slavery agenda with hospital providers.

Due to the sheer number of ancillary providers and our relatively low spend (most below the \$10,000 threshold), Teachers Health continues to consider industry-wide engagement as the most appropriate approach to engagement with ancillary providers on modern slavery issues.

# 3.7 Assessing and managing risk in Teachers Health's Investments

Our approach in this area remains consistent with previous reporting periods.

Teachers Health receives investment strategy advice through a third-party investment advisor who incorporates consideration of modern slavery risk issues in its wider Environmental, Social and Governance (ESG) due diligence process in evaluating investment managers and/or investment strategies.

Our investment advisor also:

- Utilises Third-party data providers to assist with modern slavery risk assessments of its listed equity Trusts, including the Select Exclusions Australian Share Trust and the Select Exclusions Global Share Trusts in which Teachers Health is invested.
- Applies modern slavery risk analysis results as a basis for engaging with investment managers, including increasing their awareness of the potential modern slavery risk exposures in the supply chains of their investee companies.

#### 3.8 Internal Training and Awareness Raising

Within the entire Teachers Health organisation, we are seeking to continually increase awareness of modern slavery issues. Employees are required to complete an online training module as part of their induction process with refresher training every two years thereafter.

The module is reviewed bi-annually to ensure information is current and broadly covers the following topics:

- Compliance and reporting obligations under the Act
- Types of modern slavery and what it entails
- Risk factors increasing the potential for modern slavery
- Corporate responsibilities regarding modern slavery
- The incidence of modern slavery in Australia
- How to identify the existence of modern slavery
- Transparency within supply chains and operations.

As at the end of this reporting period, 397 current and former Teachers Health employees had completed the updated online training module (97.5% completion rate).

## 4. Measuring Effectiveness

As described in last year's Statement, Teachers Health has developed and implemented a Multi-Year Modern Slavery Roadmap for responding to modern slavery risks across our operations and supply chain on a longer-term basis than deploying actions / initiatives and tracking their progress only across the timeline of a single reporting period. The Roadmap currently covers a 3-year period from 2024 – 2027.

Our Modern Slavery Roadmap identifies four categories (tasks, actions to accomplish tasks, consequences for risk assessment and stakeholder outcomes) that informs objectives for the following reporting period. These are monitored by our Modern Slavery Working Group.

Teachers Health also recognises the importance of transparency in showing continuity of performance between planned measures described for an upcoming reporting period and what is actually achieved throughout that year. With that focus in mind, Teachers Health has compiled a list of such of planned measures from last year's Statement and have, in the following Table, included details on where we have landed in terms of implementation:

Planned Action in Teachers Health FY23 Modern Slavery Statement	Level of Delivery in Subject Reporting Period
Implementation of External Grievance Mechanism "The new [grievance mechanism provider] supplier offers new reporting pathways including online phone, email and post as well as expert advisory services. The deployment of new reporting tools as well as training for all stakeholder groups is scheduled to take place during the next reporting period. As part of a general uplift, the Teachers Health Whistleblower Policy will be externally reviewed to ensure it continues to reflect best practice During the next reporting period, the new grievance mechanism will be launched and as part of the implementation, tailored training will be provided with a particular focus on staff involved in the procurement process."	<b>Completed.</b> External provider was onboarded, and whistleblower facility operationalised. The provider also reviewed Teachers Health pre-existing internal policy and procedure. Internal training on the new mechanism was also rolled out to raise awareness and understanding. The overall completion of this training was approximately 60%.
For the next reporting period, Teachers Health is integrating the Modern Slavery Guidance as well as the webinar recording in a Modern Slavery Tool Kit. The tool kit will feature practical guidance to support business partners and suppliers. Teachers Health will also embed the Modern Slavery Tool Kit in our third-party provider onboarding and ongoing management processes.	<b>Partially complete.</b> Teachers Health has substantially developed the tool kit, currently in final stages. Full rollout is now planned for the next reporting period. Supplier distribution and implementation is planned for the next reporting period. While developing the tool kit, Teachers Health has shifted away from the inclusion of the webinar, focusing on alternative sources and optimising integration with our internal self-service platform.
Continue working with the PHI Modern Slavery Col to: • review and improve the effectiveness of activities undertaken to address modern slavery risks, and • undertake assessments or deep dive reviews of industry-wide suppliers (such as hospitals)	<b>Completed.</b> Continued engagement in PHI Modern Slavery Col. As part of this forum, Teachers Health used the questionaire responses from multiple suppliers to guide the selection of supplier specific due diligence / deep dive reviews.

Planned Action in Teachers Health FY23 Modern Slavery Statement	Level of Delivery in Subject Reporting Period
During the reporting period, Teachers Health took the lead on five (5) suppliers who are progressing through the remediation module within the Supplier Platform. We will be reporting on outcomes of the remediation process in the next reporting period.	<b>Completed (and ongoing).</b> Details of remediation plan status for each of these five (5) suppliers is described above in our description of our supplier engagement (see above, p13)
Teachers Health is currently operationalising the remediation process integrated with the Supplier Platform's remediation module. Once the remediation process has concluded, we will be in a position to evaluate the effectiveness of the overall process and identify areas for improvement.	In progress and under review. Teachers Health is still finalising the remediation engagement process, with several supplier plans still active. A determination as to approach that Teachers Health will take with future supplier remediation plans, including whether to retain or replace the approach to date, is planned for the next reporting period.
Teachers Health completed a pilot deep dive review of a single Tier 1 supplier, with a view to expand the operation of this due diligence initiative.	<b>Completed (and ongoing).</b> During the reporting period Teachers Health increased the coverage of its deep dive assessment process, targeting a total of four (4) suppliers, with further details of our approach and outcomes detailed above in our Case Study: Supplier Specific Due Diligence and "Deep Dive" (see above, p10)







### 5. Modern Slavery Act 2018 (Cth) – Statement Annexure

#### **Principal Governing Body Approval**

This modern slavery statement was approved by the principal governing body of

**Teachers Federation Health Ltd** 

as defined by the Modern Slavery Act 2018 (Cth)1 ("the Act") on

11 December 2024

#### Signature of Responsible Member

This modern slavery statement is signed by a responsible member of

**Teachers Federation Health Ltd Board** 

as defined by the Act<sup>2</sup>:

Maree O'Halloran Chairperson

Mandatory criteria - Please indicate the page number/s of your statement that addresses each of the mandatory criteria in section 16 of the Act:

Mandatory criteria	Page number/s
a) Identify the reporting entity.	4
b) Describe the reporting entity's structure, operations and supply chains.	5-7
c) Describe the risks of modern slavery practices in the operations and supply chains of the reporting entity and any entities it owns or controls.	8-14
d) Describe the actions taken by the reporting entity and any entities it owns or controls to assess and address these risks, including due diligence and remediation processes.	8-14
e) Describe how the reporting entity assesses the effectiveness of these actions.	15-16
f) Describe the process of consultation on the development of the statement with any entities the reporting entity owns or controls (a joint statement must also describe consultation with the entity covered by the statement).*	5
g) Any other information that the reporting entity, or the entity giving the statement, considers relevant.**	N/A

\* If your entity does not own or control any other entities and you are not submitting a joint statement, please include the statement 'Do not own or control any other entities' instead of a page number.

\*\* You are not required to include information for this criterion if you consider your responses to the other six criteria are sufficient.

<sup>1</sup> Section 4 of the Act defines a principal governing body as: (a) the body, or group of members of the entity, with primary responsibility for the governance of the entity; or (b) if the entity is of a kind prescribed by rules made for the purposes of this paragraph — a prescribed body within the entity, or a prescribed member or members of the entity.

<sup>2</sup> Section 4 of the Act defines a responsible member as: (a) an individual member of the entity's principal governing body who is authorised to sign modern slavery statements for the purposes of this Act; or (b) if the entity is a trust administered by a sole trustee—that trustee; or (c) if the entity is a corporation sole—the individual constituting the corporation; or (d) if the entity is under administration within the meaning of the *Corporations Act 2001*—the administrator; or (e) if the entity is of a kind prescribed by rules made for the purposes of this paragraph—a prescribed member of the entity.



#### Teachers Health Modern Slavery Statement 2024

Teachers Federation Health Ltd ABN 86 097 030 414. TFH-MSS-11/24.