Modern Slavery Act Statement

Financial Year 21-22



Introduction

As one of Victoria's leading healthcare institutions, Austin Health understands that we play a key role in combating modern slavery.

A core Austin Health value is that through our actions, we show we care. We are committed to increasing awareness of the risks of slavery, human trafficking and other exploitative activities and taking positive action to eradicate this practice from local and global supply chains.

This Modern Slavery Act Statement is made pursuant to the Commonwealth Modern Slavery Act 2018 (the Act) by Austin Health and relates to the financial year 1 July 2021 to 30 June 2022.

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About Us

Austin Health (ABN 96 237 388 063) is a health service established under section 181 of the Health Services Act 1988 (Vic).

Austin Health serves Melbourne's north-east, providing high levels of care to meet the rapidly changing needs of people in one of Melbourne's fastest growing regions. Serving a population of over 350,000 people, our hospitals include Austin Hospital (incorporating the Olivia Newton-John Cancer Wellness & Research Centre), Heidelberg Repatriation Hospital, and Royal Talbot Rehabilitation Centre.

The right care in the right places

Austin Health provides a range of health services throughout the communities we serve. These services include the specialists at the Health and Rehabilitation Centre, a range of Health Independence programs, a robust and effective mental health service, and an innovative Hospital in the Home service.

An array of specialist care services

We offer specialist care for specialist needs including cancer, infectious diseases, obesity, liver transplant, spinal cord injury, intensive care medicine, neurology, endocrinology, mental health, and rehabilitation.

Internationally recognised clinical teaching and training

Austin Health is recognised around the world for our high standards of teaching, professional education and training. We foster the next generation of care providers through affiliations with 16 universities and four TAFEs. We are also the largest training provider for specialist physicians and surgeons in Victoria.

An extraordinary record of research successes

Our centre of excellence for hospital-based research brings together over 800 world-leading researchers and leading research institutes. Austin Life Sciences has a strong focus on responsive, collaborative research in partnership with:

- University of Melbourne departments of Medicine, Surgery, Psychiatry, and Physiotherapy
- Florey Institute of Neuroscience and Mental Health
- Olivia Newton John Cancer Research Institute (ONJCRI)
- Institute for Breathing and Sleep (IBAS)
- Parent-Infant Research Institute (PIRI)
- Spinal Research Institute



- Mercy Hospital for Women
- Austin Medical Research Foundation.

The multidisciplinary alliance comprises world-class scientific leaders who conduct research into cancer, neurosciences, transplantation including xenotransplantation, heart disease and hypertension, immunology, infectious diseases and microbiology, endocrinology, sleep disorders, and spinal cord injury.

Responding to the care and need of all Victorians

We provide the following specialist services to residents across Victoria:

- Acquired Brain Injury Unit
- Austin Toxicology Service
- Child Mental Health Inpatient Unit
- Victorian Liver Transplant Unit
- Victorian Poisons Information Centre
- Victorian Respiratory Support Service
- Victorian Spinal Cord Service.

Centres of Care

Austin Hospital

Austin Hospital cares for the current and future needs of the people living in the north-east.

The hospital has 16 wards accommodating medical, surgical and speciality services and over 560 beds including a 23-bed intensive care unit, 20-bed short stay unit, and an 82-bed precinct purpose built for the care of mental health patients.

The hospital includes a substantial 42 cubicle Emergency Department – including a dedicated six-bed children's area – and 11 operating theatres. These theatres provide agile, responsive emergency surgery and are available for selected elective surgery and procedures.

The hospital is home to many unique teaching, training, and research facilities. These include state-wide specialty care services: Austin Toxicology Service, Victorian Liver Transplant Unit, Victorian Poisons Information Centre and Victorian Respiratory Support Service.

Heidelberg Repatriation Hospital

The Heidelberg Repatriation Hospital has evolved from a returned services hospital to a thriving care centre for a growing community. Offering 152 beds, the hospital provides responsive and proactive care services for the community.

These services include:

- Surgery the hospital has eight operating theatres, specialists at the hospital are able to perform a large proportion of elective surgeries
- Mental health our mental health precinct houses the state-wide Psychological Trauma Recovery Service, Community Recovery Program and Transition Support Unit
- Ageing the Heidelberg Repatriation Hospital provides aged care community programs including assessment and management services for older people moving into Residential Aged Care, or support for them to return home after receiving inpatient care
- Outpatient offerings
- Rehabilitation Services our Health and Rehabilitation Centre provides rehabilitation services, programs, and clinics, including the Kokoda Gym, hydrotherapy pool and consulting rooms.

The hospital is also helping to lead proactive care in the community, through the Northern Centre Against Sexual Assault.

Royal Talbot Rehabilitation Centre

Royal Talbot Rehabilitation Centre is a 77-bed facility offering specialist care and leading, intensive rehabilitation for people with spinal trauma and brain disorders.



The centre is home to two crucial state-wide services: the Victorian Spinal Cord Service and the Acquired Brain Injury Unit.

The centre provides leading multi-disciplinary rehabilitation services for patients following amputation, stroke, spinal injury, surgery and other illnesses and injuries.

The centre also provides a range of mental health services. These incorporate a Brain Disorders Program, including a Community Brain Disorders Assessment and Treatment Service, a 33-bed specialist ward and a behaviour consultancy service for people with acquired brain injuries.

A range of creative therapies including art, music and garden therapy further aid recovery and treatment.

Olivia Newton-John Cancer Wellness & Research Centre (ONJ Centre)

Incorporated into Austin Hospital, the ONJ Centre has become a leading cancer research and treatment institute. The Centre provides world-leading treatment, evidence-based wellness programs and supportive care that nurture the physical, psychological and emotional wellbeing of patients and families.

With more than 200 clinical trials undertaken every year, the centre is a world leader in cancer medicine. Our recent successes include new advances in immunotherapy, targeted therapy and personalised medicine diagnostics.

In line with contemporary best practice, researchers and clinicians work together with laboratories located adjacent to where patients are cared for and receive treatment. This co-location of treatment and research facilities enables the rapid translation of scientific discovery into clinical trials and treatments. This results in further discovery and development of better therapies to improve health outcomes.

Taking radiation oncology services to regional residents

Austin Health operates two regional radiation oncology services in partnership with Ballarat Regional Health (Ballarat Austin Regional Oncology Centre) and Stawell Regional Health (Stawell Austin Radiation Oncology Service).

This provides regional residents with easy local access to radiation treatment which dramatically shortens the time required for treatment. It also ensures patients are closer to home to start post-treatment recovery sooner.

Our Strategic Priorities

Our Strategic Plan 2018–22 sets the direction for our health service. The plan ensures we can continue providing safe, progressive, high-quality care that meets the evolving needs and expectations of the communities we serve. We have six strategic priorities:

- Reliable, safe person-centred care: We partner with consumers to create a reliable, safe and distinct approach to care that puts the patient at the centre of what we do
- Community integration and collaboration: We collaborate with local partners to improve the lives of people in our community
- Digital transformation: We continue to transform Austin Health's digital environment
- National leader in research and teaching: We will advance the research and learning precinct in Melbourne's north-east
- Innovation in specialist care: Grow our delivery of specialised care in regional and state-wide services
- Talented, capable, and engaged people: We will ensure the right support and culture is in place to take our team to the next level.

Our purpose

"Helping people live healthy, productive and fulfilled lives"



Our vision

"Shaping the future through exceptional care, discovery and learning"

Our Values

Our values reflect what is most important to us, what we care about and support us to deliver our organisational Strategic Plan. They drive the qualities and behaviours that we will need individually and collectively to be successful.

Our values define who we are, and shape our culture and the behaviours, practices and mindsets of our people. They guide how we work with each other, and with consumers, the community and our partners.

Figure 1 – Austin Health values









Together we achieve

Our workforce

As of 30 June 2022, we had 6,868 Full Time Employees (FTE). Nurses make up the largest portion of 39.43% followed by administration/clerical staff 16.3% and medical support services 12.55%.

Annual Report

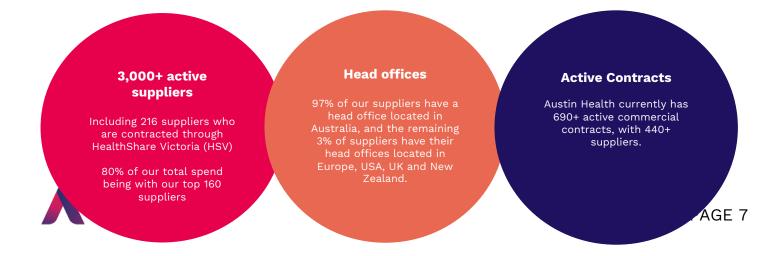
The FY21-22 Austin Health Annual Report had not been published at time of completing this Statement.

Goods & Services

Austin Health is a major metropolitan hospital, providing a range of specialist services both in the hospital, community and patient homes. Austin Health sources a vast range of goods and services.

As a public health agency, Austin Health benefits from state-wide contracts that have been negotiated by Health Share Victoria (HSV). Where such contracts do not exist, the sourcing approach for each purchase is determined by value and risk considerations.

Below showcases the variety and breadth of the supplier and contracts landscape portfolio over FY21-22.



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. Austin Health purchases goods and services from suppliers who are party to HSV collective agreements. As such, it is recognised that HSV have a significant role in health service supply chains.

HSV contracts cover a broad range of services, equipment and supplies. Examples of sourcing categories covered are 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://healthsharevic.org.au/contracts-and-tenders/contracts-and-documents.

During FY21-22, Austin Health purchased a wide array of goods and services:

Clinical

- Medical consumable products & PPE
- Medical equipment
- Medical instruments
- Implants
- Food & nutrition
- Pharmaceuticals & vaccine
- Laboratory & radiology services

Non-Clinical

- Medical equipment service & maintenance
- Fleet / motor vehicles
- Agency labour
- Facility management & utilities
- Consultancy services
- IT and marketing

Our Supply Chain

Austin Health recognises the extensive nature of our global supply chains may expose us to modern slavery risks. Below are some general examples of where risks may exist in Austin Health's supply chain:

- Surgical and examination gloves manufacturing usually occurs in Malaysia, Thailand, and Sri Lanka
- Surgical instruments such as scissors, scalpels and forceps manufacturing in Pakistan
- Linens, gowns and patient clothing manufacturing in India and Pakistan
- Healthcare equipment manufacturing mostly occurring in Asia.

Please see Criterion 3 for a more detailed analysis.

Given the level of complexity in such extensive supply chains, Austin Health in partnership with HSV will continue to refine our risk assessment methodology to further improve the visibility of high-risk areas within our health supply chains.

Additionally, for contracts entered into by Health Share Victoria and other Government entities that Austin Health uses, we are relying on these entities to complete appropriate supplier due diligence. Therefore, there may be some unknown exposure to Modern Slavery risks through gaps in oversight outside of Austin Health's control.



Risks in our operations and supply chains

Criterion 3

In FY21-22, HSV advised that they would take responsibility for engaging and assessing the modern slavery risk of all suppliers used by Health Services, not just those on HSV agreements per the current approach. This change in approach meant Austin Health's focus for our third reporting period was no longer on preparing to conduct all of our own risk assessments, but instead on identifying the Suppliers that require risk assessment and creating a reporting mechanism to supply this information to HSV. Additionally, we aimed to review and understand the Modern Slavery Risk Assessment Report undertaken by HSV and how this impacts Austin Health.

Supplier Assessment Scope

In FY21-22 HSV worked in partnership with Public Health services to determine the optimum method to perform annual risk assessments on Health Services suppliers and their supply chains. The HSV 'Modern Slavery Position Statement' and 'Modern Slavery Risk Mitigation Program' were approved at the HSV October 2022 Board meeting. This includes HSVs commitment to undertake annual risk assessments for health service suppliers (Mitigation Program, clause 5.1,b,i) and not just HSV centralised contracts as was the previous approach. This will remove workload from health services and reduce duplicated requests for suppliers.

In alignment with the new approach, Austin Health has identified 3,119 suppliers from Spend Data for the period FY21-22 that require risk assessment. 216 of these suppliers are under Collective Purchasing Agreements, meaning an additional 2,903 suppliers will now be assessed by HSV.

Supplier Assessment Methodology

In FY21-22 Austin Health identified the suppliers which have been grouped into three annual spend thresholds, in alignment with Austin Health's Procurement Policy:

Threshold 1: \$0 - \$25kThreshold 2: \$25k - 250k

• Threshold 3: >\$250k.

Austin Health's active suppliers and thresholds.

Threshold	Spend Value	Total Suppliers
1	\$0 - \$25k	2429
2	\$25k – \$250k	485
3	\$250k+	205



Risk Assessments and Reporting Tools

The Modern Slavery Risk Assessment, which will be delivered by HSV on behalf of Austin Health, is split into a Macro Assessment and Micro Assessment.

The Macro assessment identifies modern slavery risks across four categories. This involves considering whether there is a high prevalence of modern slavery in a certain sector or industry (Sector/Industry Risks), or associated with a particular good or service (Product/Services Risks), or in the location that the product or service is sourced or produced from (Geographic Risks). The Macro assessment also considers whether the nature of the supply chain model carried a greater risk of modern slavery (Entity Risks). The Macro assessment provides a general understanding of the scope of modern slavery risks that suppliers may carry.



The Micro assessment facilitates a detailed analysis by identifying and assessing possible modern slavery risks and in determining what risk mitigation strategies suppliers already have in place and what risks would need to be managed.

The Micro assessment involves risk identification across four categories.



Both the Macro and Micro assessments include assigned weighting, rating, and risk scales, designed to allocate a modern slavery risk rating to suppliers. Suppliers are then allocated one of the following risk ratings: **very low, low, medium, high, or very high.**





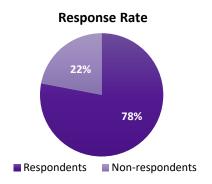
Assessment Operationalisation

The Tools were operationalised in the form of a Modern Slavery Supplier Questionnaire (Questionnaire) for collective agreements on the Informed365 platform in the second reporting period on HSV's supply chain management platform.

We expect wider operationalisation of these Tools in FY22-23 for identified Suppliers not on HSV collective arrangements.

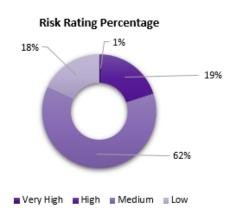
Response Rate (FY21-22)

The Modern Slavery Supplier Questionnaire for collective agreements provided a response rate of 78 percent.



Supplier Risk Ratings

The below left diagram illustrates the all-inclusive, combined macro and micro risk assessment outcomes.



Supplier Risk Categories

Risk Category	No. Suppliers
Very High	1
High	30
Medium	96
Low	29



Risk Rating insights and Modern Slavery in the health care sector

In August 2021, HSV provided health services a Modern Slavery Risk Assessment Report. This assessed all suppliers on the Macro and Micro dimensions.

Specifics were not provided on which dimension(s) positively or negatively impacted the categorisation of a supplier. Suppliers with a 'very high' risk categorisation may not have provided training on their modern slavery policy to suppliers, and/or had limited supply chain visibility, and/or did not intend to implement prequalification processes. In contrast, suppliers with a 'low' risk categorisation may have had such measures in place.

While Austin Health is not directly involved in the production and/or manufacturing activities of medical goods, surgical equipment and medical suppliers, the highest modern slavery risk we face is in the procurement of these items from offshore suppliers in high risk geographies. We recognise that these sectors involve hazardous working conditions, labour exploitation including child labour, particularly at lower tiers of a supply chain and in countries with less human rights regulation.

Some of the examples where the health sector is facing these types of modern slavery risks include:

- The glove manufacturing industry. With an estimated 150 million gloves produced annually, the nature and size of the industry is known to expose workers to hazardous working conditions
- A cleaning brand known for its hospital-grade disinfectant uses palm oil plantations from Malaysia and Indonesia were subjecting female workers to physical and sexual abuse and unsafe working conditions
- To meet unprecedented demand during COVID-19 pandemic, rapid procurement of personal protective equipment (PPE) carried high risks of modern slavery
- The production of garments as well as medical electronics and surgical instruments such as scalpels, scissors, forceps, and surgical machines are linked to labour and human right violations.

More broadly, the COVID-19 pandemic has heightened the risk of modern slavery world-wide. The urgency and increase in demand for medical goods and other supplies caused by COVID-19 have aggravated worker vulnerability and exploitation due to poor labour practices.

The number of people in modern slavery has risen significantly after COVID-19 pandemic. According to global estimates, 50 million people were living in modern slavery in 2021 (an increase of 10 million since 2016).

Of these people, 28 million were in forced labour and 22 million were trapped in forced marriage.





Actions taken

Criterion 4

Actions undertaken by Austin Health

The FY21-22 Actions Austin Health committed to were:

Modern Slavery Framework Component	Planned actions FY21-22	Details
Modern Slavery Risk Assessment	Modern Slavery Risk Assessment	Threshold 3 suppliers assessed, and high-risk suppliers engaged. Note: This item is addressed in Criterion 3 (above)
Due Diligence	Update procedures and templates	Develop modern slavery supplier questionnaire to insert into tender documentation and develop evaluation process.
Due Diligence	Risk Register	Develop Risk Register, including how to document modern slavery risks, root causes and controls in a central location.
Remediation	Establish and confirm membership of an Austin Health modern slavery working group.	Establish and confirm membership of the modern slavery working group. Working group to drive initiatives to address modern slavery risks within the organisation and to assess and implement the modern slavery implementation plan.
Contracts	Contract Review	Review all active contracts with Threshold 3 category prior to the implementation of the updated templates.
Training	Complete Probity Training	Procurement Team to complete Home Affairs Probity training and complete HSV Probity training module.

Note: No specific 'Policy' component updates were committed to or required, but Border Force reporting guides suggest all Framework Components are listed, hence the minor Policy update below.



The Austin Health Procurement Policy did not have any changes during FY21-22. It is scheduled for review in FY22-23 by the Austin Health Board. The Policy currently outlines Austin Health's commitment to addressing Modern Slavery by detailing Austin Health's: position on Modern Slavery, Modern Slavery Policy, Roles and Responsibilities for implementation of the Modern Slavery Framework, Modern Slavery Statement and the Modern Slavery Remediation Process.

Due Diligence (Updated Procedures and Templates; Risk Register)

Strategic Procurement focus for the third reporting period was to update Procedures and Templates and develop a Risk Register.

The Procedure and Template updates are in the form of three Modern Slavery (MS) tools to aid in assessment of Modern Slavery risk within the tender process:

- MS ITS ("Invitation to Supply") Pre-Tender Risk Assessment
- MS ITS Supplier Questionnaire
- MS Risk Evaluation Template

Developing the Risk Register was delayed while the team focused on understanding and developing the procedures and tools to assess modern slavery during tenders, which eventually input to the Risk Register. This has been assigned as an updated action point for FY22-23.

The below flow chart shows the components of the newly developed ITS process:

MS ITS Pre-Tender Risk Assessment

- •The ITS Pre-Tender Risk Assessment has been created to indentify the potential modern slavery risk source and possible controls that Austin Health may employ before a Tender project commences.
- Results are documented and presented in the Executive Sourcing Propsal (ESP).

MS ITS Supplier Questionnaire

- •The ITS Supplier Questionnaire sits within the ITS documentation and is a mandatory requirement in accordance with the *Conditions of Participation* of the tender process.
- •The Supplier Questionnaire comprises of six Modern Slavery specific questions and consists of yes/no, multiple choice and written answers.

MS Risk Evaluation Template

- •Following shortlisting, supplier responses are scored in the Modern Slavery Risk Evaluation Template.
- •This consists of six questions, each given a weighted score. Responses are tallied to give an overall Supplier risk rating, these ratings are then used to determine if a corrective engagement plan is required.
- •The Supplier Risk Ratings form part of the risk assessment which will be outlined in the Executive Sourcing Report (ESR) and, when operational, recorded in the centralised Modern Slavery Risk Register.

Modern Slavery Risk Register

- •A centralised Modern Slavery Risk Register that can capture Modern Slavery risks identified through the ITS or risks identified outside of the tender process
- •Will be overseen and administered by the Modern Slavery Working Group.

Non-Tender MS Risks

• Modern Slavery risks identified outside of the tender process will also be captured in the Modern Slavery Risk Register.

Note: Purple indicates completed and to be operationalised, Orange is still to be developed.



Operationalisation

Strategic Procurement has scheduled for the procedures and templates to be operationalised in FY22-23.

Remediation (Establish and confirm membership of an Austin Health modern slavery working group)

Austin Health has an established Procurement Governance Committee. The committee is responsible for the governance of Austin Health's Modern Slavery Framework. The committee will also be accountable for:

- Oversight of the Modern Slavery Working Group (MSWG) actions and outcomes, and
- When established, reviewing the risk register and addressing any complaints or risks that arise.

The MSWG includes a diverse set of Austin staff. The group aims are to drive initiatives to address modern slavery risks within the organisation and to assess and implement the modern slavery implementation plan.

The members of the MSWG include:

- Group Procurement Manager (Chair)
- Procurement Specialist (Modern Slavery Statement owner)
- Senior Contracts Manager (Contracts)
- Clinical Products Manager (Clinical)
- Cleaning Services Manager (Support Services Cleaning, FM, Food etc.)
- Employee Relations Advisor (Talent, Workforce Planning and Employee Relations).

The initial MSWG meeting will confirm the scope and goals, including driving the actions detailed on the following page. Group membership may need to change over time to ensure these goals are met.

The working group will further establish the mechanisms of:

- Identifying modern slavery practices
- Assessing and investigating the practice
- Remediating the effects of the practice.

Contracts (Contract Review)

In February 2021 Austin Health updated all contract template to include Modern Slavery clauses, and Austin Health reviews supplier contracts to ensure appropriate clauses are included. For this Contracts Review, we therefore focused on Austin Health's active contracts within threshold 3 (>\$250k) that were entered into prior to February 2021.

Active contracts with 125 suppliers >\$250k in FY20-21:

Contracts with MS clauses	1
Contracts without MS clauses	192

This review identified approximately 99% of these contracts do not have Modern Slavery clauses.

Whilst this is a key issue that needs to be addressed, it should be noted that as suppliers are changed or refreshed onto new agreements over time, this number should naturally decrease.

In FY 22-23, Austin Health will review the risk of these findings with Legal and assess if any action (for example contract remediation) is required (see Criterion 5).



Training (Complete Probity Training)

Probity Training Sessions

Strategic Procurement committed to completing the HSV Probity training through the HSV's online portal (encouraged by HSV in the Modern Slavery Community Learning sessions). The probity training comprises of three programs designed to support healthcare organisations to maintain good probity practices.

Unfortunately all Procurement staff experienced system issues during the training and were unable to complete it. HSV was advised of the issue but it has yet to be resolved.

HSV have advised the commencement of their modern slavery specific e-learning modules, with the anticipation to go live FY22-23. The Strategic Procurement team will complete this training once it is made available from HSV.

In the interim, Strategic Procurement Team and the Modern Slavery Working Group will complete the elearning modules provided through the Australian Border Force Modern Slavery Register portal.

Modules include:

- Modern Slavery in Public Procurement
- Identifying and Assessing Modern Slavery
- Managing Modern Slavery Risks.

Link: https://modernslaveryregister.gov.au/resources/

Community Learning Sessions

During FY21-22 Austin Health participated in HSV provided Modern Slavery community learning sessions, which assisted Austin Health in advancing our understanding of Modern Slavery as an organisation.

Session comprised of:

- July 2021 Modern Slavery Statements
- August 2021 Modern Slavery Risk Assessments
- September 2021 Demonstrating Progress
- October 2021 Good Practice Reporting
- November 2021 Australian Border Force Presentation
- March 2022 HSV Work Program Update
- April 2022 Supplier Risk Remediation
- May 2022 Modern Slavery Act 2018 (Cth)
- June 2022 HSV Modern Slavery Position Statement.

The sessions aided Austin Health to collaborate with other Public Health services on the implementation of the Modern Slavery Act and the issues surrounding the impact of the COVID-19 pandemic.



Assessing the effectiveness of actions taken

Criterion 5

Assessment mechanisms undertaken by Austin Health

Austin Health understands the importance of assessing the effectiveness of actions taken to assess and address modern slavery. However, before measures of effectiveness are implemented, Austin Health is first focusing on setting up and implementing the Modern Slavery Framework and the appropriate tools to capture modern slavery risks. The FY22-23 planned activities below support this approach.

Planned activities for FY22-23

Table 2 - Austin Health modern slavery planned activities FY22-23

Modern Slavery Framework Component	Planned actions FY22-23	Details
Modern Slavery Risk Assessment	Modern Slavery Risk Assessment	Submit threshold 2 and 3 suppliers to HSV to support the new centrally led HSV approach of completing risk assessments of all healthcare suppliers, not just HSV centralised contracts.
Due Diligence	Develop Risk Register	Develop Modern Slavery Risk Register, including oversight from Working Group.
Due Diligence	Operationalisation of Procedures, Templates & Risk Register	Operationalise the MS ITS Pre-Tender risk assessment, MS ITS Supplier Questionnaire, MS ITS Risk Evaluation Template, the Modern Slavery Risk Register and how these input into the ITS ESP and ESR.
Due Diligence	Supplier Corrective Engagement Plan	Develop a Supplier Corrective Engagement Plan that focuses on higher risk suppliers
Contracts	Evaluation	With Legal, review the risk of agreements identified as not having Modern Slavery clauses and assess if any action (for example contract remediation) is required.
Remediation	Establish Modern Slavery Working Group meetings	Formally establish Modern Slavery Working Group meetings and goals.
Training	Australian Border Force e-learning modules	Strategic Procurement Team and Working Group to complete e-learning modules to increase knowledge.



Consultation

Criterion 6

Consultation with owned or controlled entities

Austin Health does not own or control any other entities.



Closing statement

Austin Health is confident that the steps taken this year have continued to build a strong foundation for a robust modern slavery framework. We recognise there is more to do, and Austin Health is committed to continually improving our approach, partnering with our stakeholders, and working to eradicate modern slavery.

The Austin Health Board is pleased to see Health Share Victoria taking a leading role in assessing and managing the sector wide risks of Modern Slavery. We look forward to seeing this central leadership role grow further, with the support of the Victorian Public Health Service.

This modern slavery statement was approved by the principle governing body of Austin Health as defined by the Modern Slavery Act 2018(Cth) ("the Act") on 8 December 2022.

This modern slavery statement is signed by a responsible member of the Austin Health Board, as defined by the Act:

Ross Cooke Board Chair

8 December 2022



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Austin Health acknowledges the Traditional Custodians of the land and pays its respects to Elders past, present and emerging.

