

Northern Health

Northern Health
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Modern Slavery Statement

1 July 2024 to 30 June 2025

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Introduction

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

Overview of Northern Health

Northern Health provides quality health care services to the rapidly expanding communities in the Northern suburbs of Melbourne and is the major provider of acute, maternity, sub-acute and ambulatory specialist services in the region.

Northern Health services a region with high levels of industry, communities with diverse economic circumstances and high numbers of families from a refugee or migrant background. These are some factors which combine to have a significant impact on the health and wellbeing of the population. Northern Health presents a strong philosophy of working within the local community, to address these challenges and deliver excellent inpatient care.

Northern Health's campuses comprise Broadmeadows Hospital, Bundoora Centre, Craigieburn Community Hospital, Kilmore District Health and Northern Hospital in Epping. In addition, Mental Health Services are provided at Epping, Broadmeadows, Jacana, Preston, Mill Park and Coburg.

Northern Health provides a range of primary, secondary and some tertiary health care services. In the past financial year, it delivered the following:

- Emergency and intensive care:
 - +110,000 patients visit the Emergency Department,
 - +250,000 patients in the Virtual ED,
 - + 30,000 ambulance arrivals,
 - +25,000 paediatric emergency presentations.
- Acute medical, surgical and maternity services:
 - +3,300 babies are delivered,
 - +125,000 hospital admissions,
 - +24,000 elective surgeries performed.
- Sub-acute, palliative care and aged care:
 - +3,000 patients treated each year.
- Specialist clinics and community-based services.
 - +300,000 specialist clinic appointments

Northern Health has a capable, accountable and high performing workforce of approximately 6,076 Full Time Equivalent (FTE) employees.

Structure, Operations and Supply Chain

What we buy

Medical consumable products, implants, medical equipment (including maintenance), pharmaceuticals, food and nutrition, linen services, utilities, agency labour, radiology services, vaccines and pharmaceuticals, PPE, textiles, consultancy services, facility management, IT and marketing.

Who we buy from

Northern Health has more than 5000 suppliers from whom we buy goods and services valued at approximately \$450M across various contracts including small, medium and global organisations. Out of these 5000 suppliers, Northern Health has transacted with approximately 2000 suppliers during this reporting period. Some of the contracts are sourced and managed via HealthShare Victoria and the remaining are directly through Northern Health.

HSV is a state-wide procurement organisation that partners with Victorian 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. Northern Health 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.

HSV works with more than 500 tier-one suppliers and is responsible for more than 100 contracts with a spend value of over \$1.5 billion. HSV is also engaging with federal and state representatives to gain a better understanding of modern slavery risk in health supply chains.

HSV contracts cover a broad range of services, equipment and supplies across several 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.HSV.org.au/contracts-and-documents/contracts> .

Outside HSV contracts, Northern Health has contracts valued at approximately \$300M. Eighty percent of this spend is spread across the top 10, tier-one suppliers. Supplier categories include Medical Specialty Services, Pharmaceuticals & IV Fluids, Clinical Support Services & Supplies and Facilities Management.

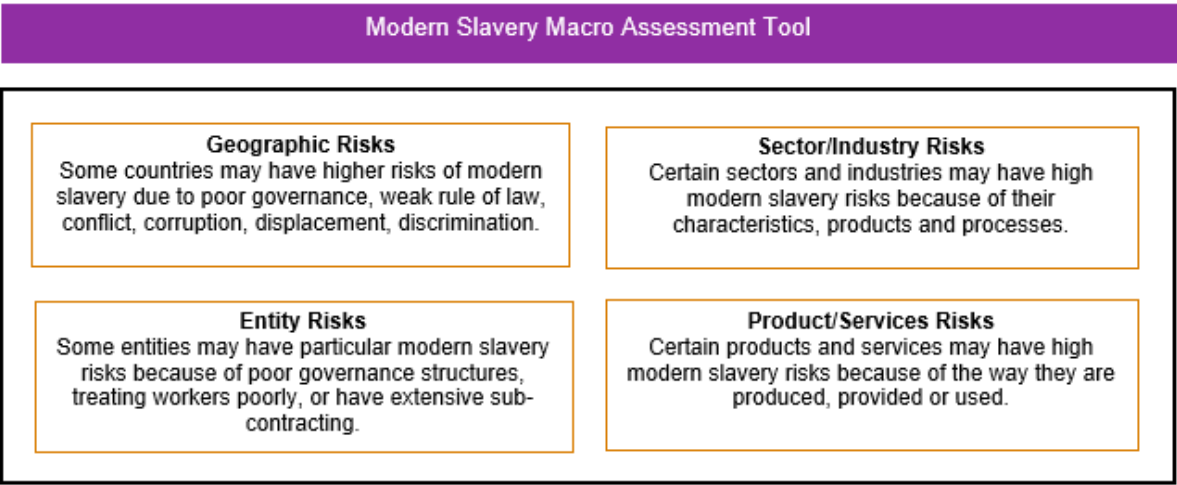
The tier-one suppliers engaged by Northern are based in Australia, United States, Germany, Denmark and Ireland. All these countries show a low prevalence with high government response to modern slavery on the Global Slavery Index. (<https://www.globalslaveryindex.org/2018/data/maps/#prevalence>)

Modern Slavery Risks for Northern Health

There is growing evidence that demonstrates a high occurrence of modern slavery in the sourcing of raw materials and in production of health care goods, including: gloves; surgical instruments; patient clothing; uniforms and footwear of health care professionals; sheets, towels, and other textiles; and electronic health care equipment. Daily, health services use these goods to ensure the overall health and well-being of Australians. Australia is reliant on these imports from global supply chains for the supply of these essential products to health services.

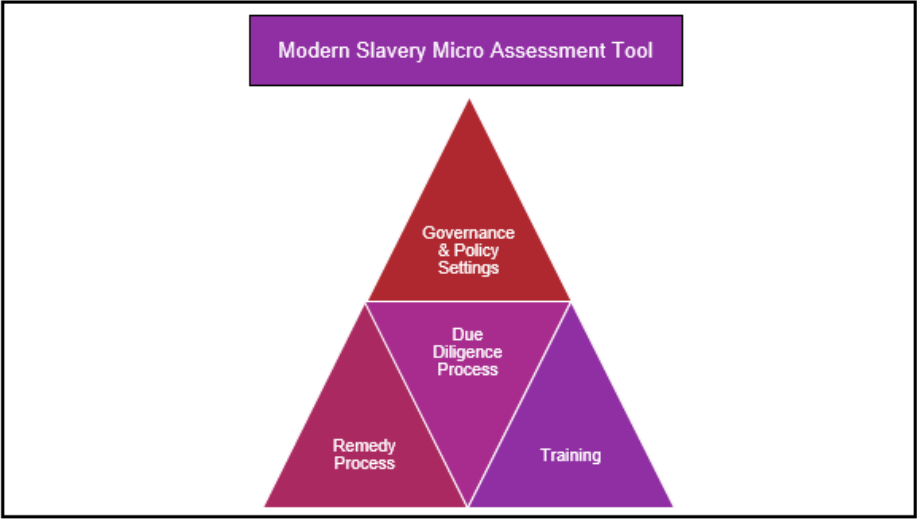
In assessing suppliers, a modern slavery risk assessment tool (“the risk assessment tool”), comprising a macro assessment and micro assessment component was utilised.

The macro assessment identified modern slavery risks across four categories.



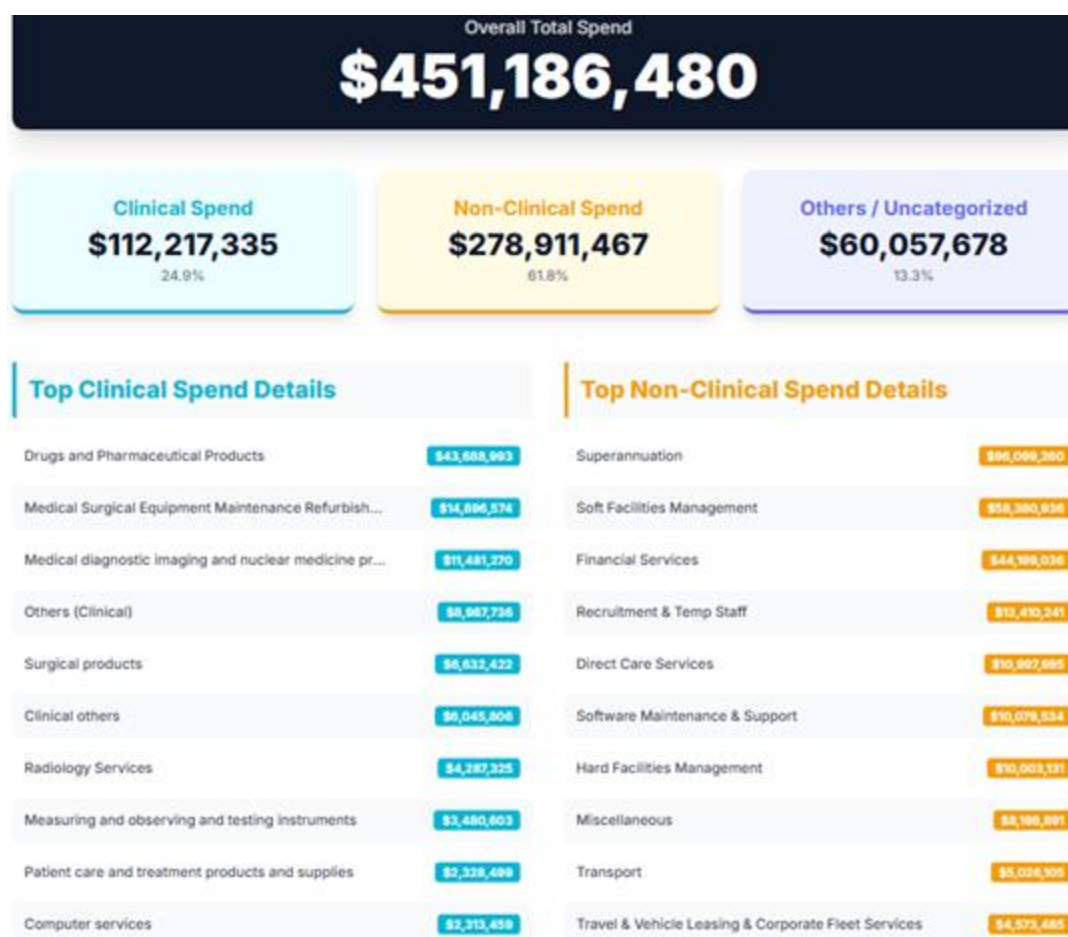
This involved considering whether there is a high prevalence of modern slavery in a particular sector or industry, or associated with a particular good or service, or in the location that the product or service is sourced or produced from. The macro assessment also considered whether the nature of the supply chain model carried a greater risk of modern slavery. This type of assessment provided a general understanding of the scope of modern slavery risks that suppliers may carry.

The micro assessment facilitated a detailed analysis by identifying and assessing possible modern slavery risk and in determining what risk mitigation strategies suppliers already had in place and what risks would need to be managed. Micro assessment involved risk identification across four areas as follows:



Both the macro and micro components included assigned weighting, rating, and risk scales, designed to allocate a modern slavery risk rating to suppliers. Suppliers were allocated one of the following risk ratings: low, medium, high or pending assessment.

A high-level snapshot of Northern Health's supplier category spend and risk profile using the risk assessment tool is provided below.



Northern Health is pleased to confirm that no supplier spend categories have been identified as high risk within its supply chain.

Summary

As a health service with a largely skilled workforce, Northern Health 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 continue to be examined in subsequent reporting periods.

Northern Health recognises that the extensive nature of its global supply chains may expose it to modern slavery risks. These risks include:

- **Global Sourcing of Goods:** Northern Health often source medical supplies, equipment, personal protective equipment (PPE), and pharmaceuticals from countries where labour regulations may be weak or poorly enforced. This opens the risk of forced labour, exploitative practices, and unethical labour conditions in factories or supplier sites overseas.

- **High Demand for Low-Cost Products:** Pressure to procure cost-effective supplies can inadvertently push procurement to suppliers with lower labour standards, who may rely on exploitative practices to meet demand and control costs.
- **Complex, Multi-Tiered Supply Chains:** Hospital supply chains often involve multiple layers of suppliers, making it difficult to monitor and ensure that each link in the chain is free of forced labour. Sub-tier suppliers, particularly in regions with lax labour laws, can pose hidden risks of modern slavery.
- **Temporary and Low-Skilled Labour in Domestic Operations:** At a local level, there can be a reliance on temporary or migrant labour for roles such as cleaning, laundry, and food services within hospitals. Without proper oversight, these workers can be vulnerable to exploitative practices, including underpayment and poor working conditions.
- **Humanitarian and Emergency Procurement:** During times of crisis, such as pandemics or natural disasters, health service may face urgent needs for supplies. Rapid procurement can lead to bypassing usual due diligence, increasing the risk of modern slavery within the supply chain as organizations seek immediate sources to meet demand.
- **Limited Supplier Transparency:** Suppliers may lack transparency regarding their own sources of raw materials, components, or labour, making it challenging for hospitals to fully assess the risk of modern slavery across their supply chains.
- **Risk in Ancillary Services:** Services like hospital construction, facilities maintenance, and waste management can also present risks. These industries may rely on low-wage labour or subcontracting models where exploitative practices are more common.

In collaboration, Northern Health and HSV will continue to assess and address additional risks within healthcare supply chains. To date, Northern Health has not identified any specific instance of modern slavery harm during this reporting period.

Actions to Assess & Address Modern Slavery Risks

During the last reporting periods, Northern Health has implemented the following actions and imbedded them in practice:

- **Training:** Northern Health Procurement team have undertaken the Modern Slavery learning module published by HealthShare Victoria to increase knowledge and awareness of modern slavery. Northern Health has also been actively participating in the HSV led Modern Slavery Risk Mitigation Working Group to develop a supplier risk assessment tool to improve efficiency and reduce duplication during assessment of Modern Slavery practices.
- **Procurement Procedures:** Procurement procedures have been updated to include the required due diligence and remediation requirements, including the incorporation of modern slavery risk identification and management in procurement planning processes. A modern slavery risk assessment is now a mandatory part of the tender evaluation process based on the risk assessment of category of goods and service being tendered
- **Raising Awareness:** To raise awareness and encourage action against modern slavery, information posters have been designed for display across key departments. They aim to inform staff about the signs of exploitation, highlight the importance of speaking up, and provide clear pathways for reporting concerns. By increasing visibility and awareness, we can help protect vulnerable individuals and support a safer, more ethical community.
- **Modern Slavery Policy:** A Modern Slavery Policy was developed in consultation with the Legal and Organisational Risk, approved by the Audit & Risk Committee and incorporated into Northern Health's Procurement Policy to establish its position on modern slavery. The updates were communicated to the organisation via email.
- **Modern Slavery clause in contracts:** All new contracts entered into by Northern Health include clauses that prohibit conduct or activities that would constitute Modern Slavery and compel suppliers to comply with the Modern Slavery Act. To date there has been no non-compliance reported or detected.
- **Supplier due diligence questionnaire:** Implementation of supplier due diligence questionnaires for tender documentation, to understand the risk of modern slavery in its supply chain and the actions taken (or not taken) by suppliers to respond to those risks. Where a category is rated as having a high risk of modern slavery, a weighting is applied in the evaluation stage of the tender process.
- **Supplier Code of Conduct** As well as specific modern slavery provisions, suppliers wishing to conduct business with Northern Health must aspire and commit to meet the Supplier Code of Conduct. Under the Supplier Code of Conduct, suppliers are expected to proactively identify, address and – where required by legislation – report on risks of modern slavery practices in their business operations and supply chains.
- **Mandatory Minimum Standards** As part of HealthShare Victoria's (HSV) efforts to reduce the risk of modern slavery in the goods and services it sources on behalf of Victorian health services, Mandatory Minimum Standards are being introduced for suppliers under HSV collective purchasing agreements. The introduction of Mandatory Minimum Standards for all suppliers on HSV collective purchasing agreements supports the reduction of modern slavery risk in the Victorian public healthcare sector, through building capacity and raising awareness amongst HSV suppliers. These include:
 - Modern Slavery Policy
 - Due diligence
 - Grievance Mechanism, response and remediation

- Training
- Determining Effectiveness

Implementation of the Mandatory Minimum Standards amongst HSV will reflect a gradual uplift in modern slavery risk capability and awareness, given the nature and context of the Supplier's operations and supply chain. The focus areas for the next reporting period are:

- **Improving due diligence:** Northern Health has recently refreshed all our contracts to ensure they are current and include the appropriate clauses based on:
 - procurement value;
 - supplier size; and
 - modern slavery risk; and
 govern how suppliers respond to modern slavery risk within their supply chain and operations.

Supplier Onboarding: Further improve the supplier on boarding process for NH to mitigate any risk of modern slavery harm for low value and low transaction suppliers; and

- **Stakeholder Engagement:** Modern Slavery Stakeholder Engagement Plan has been developed and will be communicated to the relevant departments.

Complaints Handling

Northern Health is committed to ethical practices across all areas of the business and encourages reporting of any information regarding misconduct, the existence of an improper state of affairs, illegal activities, unethical behaviour, breaches of legislation, behaviour which is oppressive, discriminatory or grossly negligent, unsafe work practices, serious risks to public health, safety of the environment or any conduct which poses a serious risk to health and safety of any person at the workplace.

Northern Health recognises that complaints are to be treated seriously to ensure compliance with relevant legislation. The investigation process documented in the Northern Health complaints procedure supplements the complaints mechanism for Whistleblowers by dealing with investigations for all complaints not falling within Whistleblower legislation.

Assessing the Effectiveness of Actions

The focus of the fourth reporting period under the Modern Slavery Act 2018 (Cth) was to leverage the previous periods work and improve governance to combat modern slavery risks and foster collaboration between Northern Health and suppliers to seek to address these risks.

Northern Health is committed to identifying, preventing, and addressing modern slavery within its operations and supply chain. As part of our governance and controls framework, we have established policies and procedures that ensure compliance with the Modern Slavery Act. This includes regular supplier risk assessments, stringent procurement processes, and staff training to recognize and respond to potential modern slavery risks. Additionally, Northern Health engages in continuous monitoring and reporting to maintain transparency and accountability, ensuring that our health service upholds ethical standards across all areas of operation and procurement. These measures collectively reinforce our dedication to a safe and fair workplace and supply chain, aligned with legal and ethical obligations.

Consultation with Reporting Entities

Northern Health controls the Northern Health Foundation. Northern Health has not consulted with the Foundation as it undertakes all procurement and supply activities on behalf of the Foundation.

Closing Statement

Northern Health continues to strengthen its governance, frameworks, and practices to mitigate modern slavery risks. This includes embedding robust procurement processes, contractual safeguards, and supplier engagement mechanisms to minimise the risk of modern slavery across tier-one suppliers and the broader supply chain. Northern Health recognises that there is more to do and remains committed to continually enhancing its approach through collaboration with stakeholders and sustained efforts to eradicate modern slavery.

This statement was approved by the Board of Northern Health in November 2025

A handwritten signature in blue ink, appearing to be 'Alan Lilly', with a stylized 'A' and 'L'.

Adjunct Professor Alan Lilly
Board Chair
Northern Health