

National Coronial Information System (NCIS)

NATIONAL PARTNERSHIP AGREEMENT ON SPECIFIED PROJECTS

PRELIMINARIES

1. This Schedule will support the ongoing administration, maintenance and improvement of the NCIS, a national database of coronial data, and the production of annual mortality data reports for publication. It continues the previous Schedule H to the Project Agreement on Specified Projects (Victoria) which replaced the former Project Agreement for the National Coronial Information System.

FORMALITIES

Parties to this Schedule

2. This Schedule is between the Commonwealth of Australia (the Commonwealth) and Victoria.

Term of the Schedule

3. This Schedule will commence as soon as it is signed by the Commonwealth and Victoria and will expire on 30 June 2020 or on completion of the project, including final performance reporting and processing of final payments against performance milestones or benchmarks, unless terminated earlier or extended as agreed in writing by the Parties.

OUTPUTS

4. The outputs of this Schedule will be:
 - (a) administration, maintenance and improvement of the data storage and retrieval system of coronial information including the provision of support and training to NCIS users in coronial offices to facilitate their access to NCIS data, to:
 - (i) assist coroners in their role as death investigators; and
 - (ii) provide an early warning system for hazard identification including the provision of subscription services; and
 - (b) production of annual Mortality Data Reports for publication.

ROLES AND RESPONSIBILITIES

Role of Victoria

5. To realise the outputs in this Schedule, Victoria has specific roles and responsibilities in addition to those in the National Partnership Agreement on Specified Projects ('the Agreement'), as outlined below:
 - (a) providing a financial or in-kind contribution to support the implementation of this Schedule;
 - (b) ensuring database security and integrity to prevent unauthorised access of the NCIS data; and
 - (c) increasing data quality and validity systems to establish reliability, consistency and integrity of the NCIS data.

Role of other States and Territories

6. Under the Memorandum of Understanding for the National Coronial Information System (MoU) signed on 12 July 2012, to which New South Wales, Queensland, Western Australia, South Australia, Tasmania, the Australian Capital Territory and the Northern Territory are parties, those jurisdictions are responsible for:
 - (a) providing a financial contribution to support the operation of the NCIS;
 - (b) providing representation on the NCIS Board of Management as described in the MoU;
 - (c) complying with the licence agreement with the Victorian Department of Justice that permits the transfer of coronial information for storage and dissemination via the NCIS; and
 - (d) transferring information to the NCIS in accordance with State and Federal Privacy legislation.

Role of the NCIS Board of Management

7. The role of the NCIS Board of Management is described in the MoU and includes the following responsibilities:
 - (a) overseeing and ensuring strong governance of the NCIS including the effective implementation of appropriate risk management measures;
 - (b) setting the strategic vision and objectives of the NCIS including through the endorsement of a strategic plan;
 - (c) monitoring expenditure and use of resources in the operation of the NCIS;
 - (d) ensuring that all legal and financial responsibilities are complied with and that an audit report is prepared annually; and
 - (e) ensuring maintenance and fostering of the NCIS' relationships with stakeholders.

PERFORMANCE MONITORING AND REPORTING

8. The following table summarises the milestones for the project and due dates. The Commonwealth will make the payment subject to the reports demonstrating the milestones have been met.

Table 1: Performance requirements, reporting and payment summary

Outputs	Performance milestones	Report due	Payment
Administration, maintenance and improvement of the data storage and retrieval system of coronial information and production of annual Mortality Data Reports for publication	Having the following reports ready for publication: <ul style="list-style-type: none"> 2013 Drug Strategy Mortality Data Report; 2013 Injury Mortality Data Report; and 2013 Intentional Self Harm Mortality Data Report. 	1 Feb 2017	\$400,000
	Having the following reports ready for publication: <ul style="list-style-type: none"> 2014 Drug Strategy Mortality Data Report; 2014 Injury Mortality Data Report; and 2014 Intentional Self Harm Mortality Data Report. 	30 Apr 2017	\$400,000
	Having the following reports ready for publication: <ul style="list-style-type: none"> 2015 Drug Strategy Mortality Data Report; 2015 Injury Mortality Data Report; and 2015 Intentional Self Harm Mortality Data Report 	30 Apr 2018	\$400,000
	Having the following reports ready for publication: <ul style="list-style-type: none"> 2016 Drug Strategy Mortality Data Report; 2016 Injury Mortality Data Report; and 2016 Intentional Self Harm Mortality Data Report. 	30 Apr 2019	\$400,000
	Having the following reports ready for publication: <ul style="list-style-type: none"> 2017 Drug Strategy Mortality Data Report; 2017 Injury Mortality Data Report; and 2017 Intentional Self Harm Mortality Data Report. 	30 Apr 2020	\$400,000

9. Victoria will provide Mortality Data Reports in accordance with Table 1 during the operation of the Schedule. Victoria will draft these Reports in consultation with personnel from the relevant drug, suicide and injury policy areas of the Commonwealth Department of Health (DoH). Victoria will submit draft report outlines to the DoH for comment, and will build on previous Mortality Data Reports to continue time series data and allow trends to be identified over time.

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Each report will include a breakdown of the age and gender of the deceased, and a brief analysis of the data and relevant recommendations made by the coroner:

- (a) **Drug Strategy Mortality Data Reports** will provide a brief overview of specified drug related deaths reported to the coroner in the specified year. Each Report will include a two page section each on deaths relating to, at a minimum: Alcohol, Amphetamines, Benzodiazepines, Cannabis and Cannabinoids, Cocaine, Heroin, Opioid narcotics, and new and emerging drugs if relevant and as agreed between the NCIS Manager and the DoH. Each report will include information on polydrug use, and whether the drug made a primary or secondary contribution to death.
- (b) **Intentional Self Harm Mortality Data Reports** will provide a brief overview of specified mental health mortality reported to the coroner in the specified year. The scope of each Report will be as agreed between the NCIS Manager and the DoH, and is likely to include mental health related deaths Foo-F9g and suicide – intentional harm X6o-X84.
- (c) **Injury Mortality Data Reports** will provide a brief overview of specified injury related deaths reported to the coroner in the specified year. The content will include a two page section on each of the following: falls deaths; burns deaths; injury deaths in rural and remote areas, injury deaths occurring on farms; injury deaths involving off-road motorcycles; and alcohol related injury deaths.

FINANCIAL ARRANGEMENTS

Financial contributions

10. The Commonwealth’s and Victoria’s estimated financial contribution to this project, including through National Partnership payments to the States paid in accordance with Schedule F – Payment Arrangements of the IGA FFR, are shown in Table 2.

Table 2: Estimated financial contributions

(\$)	2016-17	2017-18	2018-19	2019-20	Total
Estimated total budget (1)	1,317,100	1,402,100	1,435,100	1,470,100	5,624,400
Estimated National Partnership payments made under the Project Agreement for the National Coronial Information System (2)	800,000	400,000	400,000	400,000	2,000,000
Commonwealth own purpose expense (3)	-	-	-	-	-
Total Commonwealth contribution (4) = (2) + (3)	800,000	400,000	400,000	400,000	2,000,000
Balance of non-Commonwealth contributions (5) = (1) – (4)	517,100	1,002,100	1,035,100	1,070,100	3,624,400

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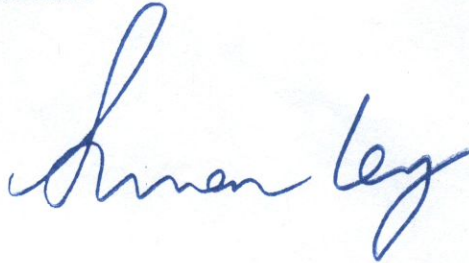
The Parties have confirmed their commitment to this schedule as follows:

Signed for and on behalf of the Commonwealth
of Australia by

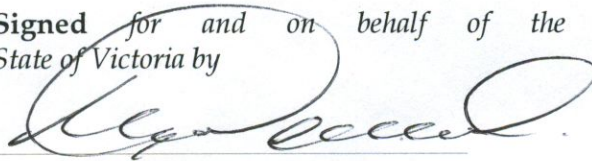
20 December 2016

The Honourable Sussan Ley MP
Minister for Health and Aged Care

[Day] [Month] [Year]



Signed for and on behalf of the
State of Victoria by



The Honourable Martin Pakula MP
Attorney General

[Day] [Month] [Year]

1 / 4 / 2017.