TAS REVISED WORKPLAN

Element 2: Antenatal care, pre-pregnancy and teenage sexual and reproductive health

Plan period: 2009-2014 Area A: Teenage sexual and reproductive health

Milestone (eg. General Primary Health Care Services)	What are we trying to do? (Aim)	Who will do it? (Roles and responsibilities)	How are we going to do it? (Strategies) How will we know how we are going? (Measures)	How long will it take? (Timeframe)
Service Delivery Area A	Improve access to sexual and reproductive health services, information and support for young	Dept Health and Human Services (DHHS) Population Health is lead agency	I. Consultation Strategy Develop an IECD consultation strategy to include: O Collaboration with areas responsible Meetings held/	Nov 2009 Completed Ongoing
	Indigenous people (women and men)	Service Development Integration Committee to oversee development and	for Elements 1 and 3 to identify approaches identified	
	Ensure Indigenous young people have the knowledge to make	implementation Project team (DHHS) to	organisations with Aboriginal organisations with Aboriginal Workplan	June - August 2009 Completed
	informed decisions about their sexual and reproductive health	administer project and reporting, conduct consultations and oversee	 Preparation of Background/ Discussion Paper Produced 	January 2010 Completed
	(Outcome: Increased proportion of Indigenous teenagers accessing sexual and reproductive	NGO/consortium to be contracted to deliver sexual health education and	 Consultations with other key stakeholders Consultations documented, issues identified & included in Workplan 	July 2009 - June 2010 Completed
	health programs.)	promotion and strategies Population Health (DHHS)	 Consultations with young Aboriginal people As above	Jan – June 2010 Completed
		to provide in kind support	 2nd round consultations with As above Aboriginal organisations 	Jan - June 2010 Completed
			2. Project Team Establish Project Team to support, coordinate and administer strategies developed under Element 2. Project Team established	August 2009 Completed

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resources. and distributed to Aboriginal services	December 2009 – March 2010 Completed
education and health promotion strategies selected that support Aboriginal young people to be better informed in making decisions Funding Agreement	March 2010 Completed May 2010 Completed
education and health promotion strategies. people attending	July 2010 – July 2014 Ongoing
programs for workers working with young Aboriginal people identified and costed Deliver sexual health training to workers Training programs	January 2010 Completed March 2010 – June 2014 Ongoing
6. Aboriginal Cultural Competency Training Deliver Aboriginal Cultural Competency training to mainstream services that provide sexual health & relationships education to young people, including Training Program Developed Training Program	March 2010 Completed July 2010-2014 Ongoing

Management Area A	Ensure the project is managed effectively through a project team with appropriate skilled staff in key positions within DHHS	Lead agency is Population Health (DHHS) Project Team will support implementation of strategies within this Workplan	Project Team Project Team (established as above) for Element 2 to be responsible for implementing Workplan: Developing and implementing consultation strategy Negotiating with service providers and developing and monitoring funding agreements Developing and implementing communication strategy Distributing resources Establishing advisory groups Monitoring and reporting for each strategy Developing and implementing training strategy.	Project team established Reviews of project workplan achievements and timelines Meetings held	August 2009 Ongoing Ongoing
		Project Team will support advisory groups	2. Advisory Groups Established as required to oversee various elements of the Workplan	Advisory groups established & meeting regularly	Ongoing
		Project Team will manage funding agreement/s between DHHS and non- government sector	3. Funding Agreements Services outsourced to community organisations will be managed through agreements that will specify governance arrangements, implementation strategies, desired outcomes, data collection, monitoring and reporting, etc	Signed Funding Agreement	May 2010 - ongoing

Linkages and Coordination Area A	Ensure the IECD elements are integrated and consistent	Lead agencies for Elements 1, 2 & 3 will rotate secretariat support of Service Development Integration Committee	I.	Service Development Integration Committee (SDIC) Establish inter-agency Service Development Integration Committee to coordinate activities across Elements I, 2 & 3 - to include reps from lead agencies for each Element plus reps from key service delivery areas as appropriate.	SDIC established Terms of Reference developed Meetings held	Sep 2009 - Dec 2009 Completed 2009 – 2014 Ongoing
	Inform and engage key stakeholders	Project Team in collaboration with teams implementing Elements I & 3 Service Development Integration Committee to oversee development and implementation	2.	Develop list of key stakeholders across IECD Elements Develop appropriate strategies to share information with different groups — to include: o email network o regular consultations with existing networks and forums	Stakeholder list developed Communication Strategy developed Network formed Meetings held Information shared	Nov 2009 Completed Nov 2009 Completed Nov 2009 Completed August 2009 – 2014 Ongoing
	Integrate strategies within Element 2 into services for ongoing sustainability	Project Team, in collaboration with Service Development Integration Committee	3.	Sustainability Workplan Develop post IECD workplan to ensure strategies are well-integrated into Aboriginal organisations and mainstream services for ongoing sustainability	Sustainability workplan for 2014 & beyond developed	Jan – June 2014

Community Involvement Area A	Engage with Aboriginal organisations and individuals in the implementation of the Workplan	Project Team will be responsible for ensuring community involvement	I.	Community Liaison Project Team will liaise with external stakeholders including Aboriginal services, young Aboriginal people, antenatal clinics, youth organisations via: Consultations (see Consultation Strategy) Advisory groups with community representation Email Network (Aboriginal organisations and individuals to be invited to join) Established forums Other means as identified during consultations	Consultation Strategy developed, as above Consultations documented Groups formed Network reach Attendance at existing networking meetings	Sept 2009 Completed July 2009- January 2010 Completed Ongoing Ongoing Ongoing
Data and Reporting Area A	Establish baseline data to inform project Explore data sharing between services to improve continuity of care	The Project Team will be responsible for data collection and reporting The Project Team will collect baseline data, investigate current data collection capabilities and gaps.	1.	Data Collection Investigate current data collection capabilities within DHHS and key non government agencies Work with relevant services to fill data gaps Work with relevant services to improve data sharing	Overview of relevant data sources New data collections established Data sharing arrangements in place	Dec 2009 Completed July 2010 Completed 2011-2014 On track, ongoing
	care		2.	Monitoring & Reporting Develop monitoring, reporting and evaluation processes for each strategy Produce requisite reports to State and Commonwealth Governments.	Monitoring and reporting processes in place Timely reports submitted.	January 2010 Ongoing As required
Risk Management Area A	Reduce potential risk of key strategies being seen to be imposed by governments and rejected by Aboriginal communities	Project Team will be responsible for managing all risk	1.	Risk Management Strategy Develop Risk Management Strategy Implement Consultation & Communication strategies, to ensure key stakeholders are fully informed and have opportunity to participate	Strategies developed and progressively implemented	

TAS REVISED WORKPLAN

Element 2: Antenatal care, pre-pregnancy and teenage sexual and reproductive health

Plan period: 2009-2014 Area B: Antenatal Care

Milestone (eg. General Primary Health Care Services)	What are we trying to do? (Aim)	Who will do it? (Roles and responsibilities)	How are we going to do it? (Strategies)	How will we know how we are going? (Measures)	How long will it take? (Timeframe)
Service Delivery Area B	Improve access to, and take-up of, antenatal services for young Aboriginal women aged under 20 (Outcome: Increased proportion of pregnant Indigenous women aged under 20 years with an antenatal contact in the first trimester of pregnancy)	Dept of Health and Human Services (DHHS) Population Health is lead agency Service Development Integration Committee to oversee development and implementation Project Team (DHHS) to administer project and reporting, oversee funding processes and conduct consultations Population Health to provide in kind support DHHS health professionals in antenatal areas and Aboriginal Health Liaison Officers to provide support	 Consultation Strategy Develop an IECD consultation strategy to include: collaboration with areas responsible for Elements I and 3 to identify common approaches Ist round consultations with Aboriginal organisations and other key stakeholders Preparation of Background/Discussion paper 2nd round consultations with Aboriginal organisations (as per Area A above) Consultations with key service delivery areas Consultations with antenatal clinics in Area Health Services 	Issues included in 1st Workplan Background paper developed Consultations documented, issues identified & included in 2nd Workplan As above As above	December 2009 Completed January 2010 Completed November 2009 Completed January – July 2010 Completed June 2010 Completed

			2.	Project Team Establish Project Team (as per Area A, above)	Project Team established	August 2009 Completed
		Project Team	3.	Scope current practice Scope current antenatal data collection, service delivery and practice	Info included in Background/ Discussion Paper	October - December 2009
				Identify barriers to young Aboriginal women accessing mainstream antenatal services.	As above	As above Completed
		Project Team in collaboration with AHLO's, Family & Child Services, Aboriginal organisations, Child & Parenting Centres and hospitals		Develop collaborative practice Strengthen links Aboriginal Health Liaison Officers (AHLO) with antenatal services Link Family and Child Services, Aboriginal organisations and Child and Parenting Centres Facilitate the development of a shared care agreement between hospitals and GP's	Linkages strengthened, protocols developed Collaborative arrangements in place Shared care protocols developed	November 2010 Completed Ongoing 2011 Revised date - draft by Jan 2012
		Project Team, in collaboration with Service Development Integration Committee	5.	Aboriginal Cultural Competency training Deliver Aboriginal Cultural Competency training to mainstream services that provide antenatal care	Training programs delivered	July 2010 – 2014 Ongoing
Abo to po early your and	rease capacity of original health services provide support and ly intervention for ling pregnant women their partners in mania	Project Team and Aboriginal Health Services	6.	Community based pregnancy support Explore options to increase community based pregnancy support to young Aboriginal women in the North, NW and South	Funding Agreements in place No. of referrals	March 2010 – June 2014
appr	vide a holistic roach to antenatal e for young Aboriginal ents	Project team and antenatal services	7.	Hospital antenatal services Increase capacity for new/ innovative models of service delivery – eg. outreach clinics	Outreach clinics established in community settings	2010 – 2014
				Ensure opportunistic screening and referrals re. smoking, alcohol and other risk factors are part of antenatal visits	No. of brief interventions conducted Decrease in	2010 - 2014

	Reduce risk factors such as smoking, alcohol consumption, poor nutrition and physical inactivity among young pregnant Aboriginal women and their partners, in Tasmania	Project Team and staff in a range of identified health settings	9.	Brief intervention training Provide brief intervention training in smoking cessation, alcohol/ drug minimisation etc for workers in antenatal care settings, Children & Family Services, NGO's and Youth Health Services Child & Family Centres Ensure provisions for antenatal and postnatal care are included in planning	No. of training sessions x participants Provisions in place	January 2010 - 2014 2010 - 2014
Management Area B	As per Area A above					
Linkages and Coordination Area B	As per Area A above					
Data and Reporting Area B	As per Area A above					
Risk Management Area B	As per Area A above					

Summary of Milestones and Commonwealth Payments

Explanatory notes

Outcomes from NPA on IECD (performance measures for element 2)

- (e) increased proportion of pregnant Indigenous women aged under 20 years with an antenatal contact in the first trimester.
- (f) increased proportion of Indigenous teenagers accessing sexual and reproductive health services
- (g) reduced proportion of Indigenous babies with low birth weight each year
- (h) reduced mortality rates of Indigenous infants
- (i) reduced proportion of Indigenous women who use substances during pregnancy each year
- (j) reduced proportion of hospital admissions in Indigenous children 0-4 years.

Issues with Tasmanian Data

There is a range of issues specifically related to Indigenous data In Tasmania which will have a significant impact on Tasmania's ability to achieve all of the above outcomes. Information on use of services in Tasmania by Aboriginal people is based on self-identification and, while data collection is improving, the numbers of clients who choose to self-identify can fluctuate. Also, as service usage numbers are very small, particularly when broken down by service type, yearly variations in numbers are generally not statistically significant and cannot be reported as trend data.

In relation to the antenatal components of this plan, for example, 41 Aboriginal women aged under 20 in Tasmania gave birth in 2008 (ABS, Births, Australia 2008). This number is too small to be used as a reliable benchmark on which to determine future changes.

Currently antenatal visits are not part of the National Perinatal Data Collection (NPDC). It also important to note that in general women (including non Indigenous women) do not routinely access antenatal care in the first trimester. Antenatal clinics do not routinely book women for their first visit until the second trimester.

Tasmania is currently seeking additional data on Aboriginal infant mortality rates, however, based on the size of the population it is not going to be possible to show significant changes in this area.

From June 2011 more specific targets will be included in this plan. At this stage it is not possible to have specific targets until further work has been completed during the first two years of the project on establishing strategies and enhancing data collection systems.

Summary of Milestones and Commonwealth Payments

Element 2 - Antenatal care, pre-pregnancy and teenage sexual and reproductive health

- (a) Teenage sexual and reproductive health
- (b) Antenatal care

Reporting Period	Agreed Milestones for the Period	Basis of Payment	Commonwealth Payment Amount *
July 2009- Jan 2010	 (a) and (b) Project Established project team commenced monitoring and reporting strategy developed communication strategy paper developed and included in work plan (a) and (b) Background scoping and consultations completed and documented (a) and (b) Collection and analysis of current Tasmanian data and data collection systems completed (a) Distribution of resources for young people commenced 	Receipt of Progress Report 31 January 2010 describing satisfactory progress or satisfactory achievement of Milestones	\$225,000
Jan-June 2010	 (a) Sexual health and relationships training for workers Training program identified/ developed. (a) NGO contracted to deliver sexual health education and health promotion to young people (a) and (b) Development of Cultural Competency Training Package (a) Model for community based pregnancy support and hospital antenatal services identified and developed (b) Consultation with antenatal services completed (b) 2 sessions of Brief Intervention Training held. 	Receipt of Annual Report 31 August 2010 describing satisfactory achievement against Milestones	\$225,000
July – Dec 2010	 (a) and (b) Aboriginal cultural competency training 6 training sessions delivered (a) Sexual health education and health promotion strategies Minimum of 100 young people attending 	Receipt of Progress Report 31 January 2011 describing satisfactory progress or satisfactory achievement against Milestones	\$300,000

	 6 sessions held focussing on areas identified as highest need (a) Distribution of resources for young people - round 2 (a) Sexual health and relationships training 5 staff commence training course (b) Increased capacity and new models of community based pregnancy support and hospital antenatal established (b) Brief intervention Agreement developed Data collection commences Referrals and interventions recorded. 		
Jan –June 2011	 (a) and (b) Development/identification of specific targets for outward years (a) Sexual health education and health promotion strategies 100 young people attending 6 sessions (a) Sexual health and relationships training 2 training programs delivered (b) Community based pregnancy support and hospital antenatal services Numbers of young people accessing support (to be determined based on previous year's data) (b) Brief intervention training 10% increase in referrals brief interventions conducted in 75% of all antenatal intakes (b) Develop collaborative practice Shared care protocols developed. 	Receipt of updated Workplan Receipt of Annual Report 31 August 2011 describing satisfactory achievement against Milestones	\$300,000

July – Dec 2011 Note: Targets to be established for July 2011 to June 2014	 (a) Sexual health education and health promotion strategies 100 young people attending 6 of sessions held (a) Sexual health and relationships training delivered I two day workshop for health workers and youth workers (Flinders Island) Introduction to adolescent sexuality workshop for teachers Chlamydia presentation to Aboriginal Health Workers (AHW) (a) Distribution of resources for young people - round 3 (b) Community based pregnancy support and hospital antenatal services I0% increase in the number of Aboriginal women accessing antenatal support (b) Brief intervention I0% increase in referrals Brief interventions conducted in 75% of all intakes 	Receipt of Progress Report 31 January 2012 describing satisfactory progress or satisfactory achievement against Milestones	\$345,000
Jan –June 2012	 (a) Sexual health education and health promotion strategies 200 young people attending 12 sessions held 4 sessions for parents held Health promotion at Aboriginal community events (a) Sexual health and relationships training Two Mooditj Leader Training Programs delivered A 2 day workshop for Aboriginal Education Officers: Adolescent sexuality, contraception and STIs Professional development workshop for teachers delivered (b) Community based pregnancy support and hospital antenatal services 	Receipt of Annual Report 31 August 2012 describing satisfactory achievement against Milestones	\$345,000

	 10% increase in the number of Aboriginal women accessing antenatal support (b) Brief interventions 10% increase in referrals Brief interventions conducted in 75% of all intakes Smokechange training session for IECD Midwives delivered 2 Core of Life Facilitator Training sessions delivered to IECD midwives and selected AHWs, Pregnancy Support Workers (PSW) and youth workers from Aboriginal organisations state wide, FPT educators, Aboriginal funded CFC staff and Aboriginal Education Officers 		
July – Dec 2012	 (a) Sexual health education and health promotion strategies 200 young people attending 12 sessions held 4 sessions for parents held (a) Sexual health and relationships training Two Sex and Ethics training programs delivered Professional development workshop for teachers delivered (a) Distribution of resources for youth health workers delivered (a) Distribution of resources for young people - round 4 (b) Community based pregnancy support and hospital antenatal services 10% increase in the number of Aboriginal women accessing antenatal support (b) Brief interventions 10% increase in referrals Brief interventions conducted in 75% of all intakes Drug and Alcohol in Pregnancy training delivered to IECD midwives and PSWs Core of Life program delivered to Aboriginal youth in community and school settings. 	Receipt of Progress Report 31 January 2013 describing satisfactory progress or satisfactory achievement against Milestones	\$360,000

Jan –June 2013	 (a) Sexual health education and health promotion strategies 200 young people attending 12 sessions held 4 sessions for parents held Resource development – Sex and Ethics (a) Sexual health and relationships training Professional development workshop for teachers delivered Workshops for youth health workers delivered (b) Community based pregnancy support and hospital antenatal services 10% increase in the number of Aboriginal women accessing antenatal support (b) Brief interventions 10% increase in referrals Brief interventions conducted in 75% of all intakes Core of Life program delivered to Aboriginal youth in community and school settings. 	Receipt of Annual Report 31 August 2013 describing satisfactory achievement against Milestones	\$360,000
July – Dec 2013	 (a) Continued delivery of sexual health education and health promotion strategies including 10-20 sessions with young people (a) Continued delivery of sexual health and relationships training sessions for health professionals, teachers and youth workers (a) Distribution of resources for young people - round 5 (b) Continued delivery of Community based pregnancy support and hospital antenatal services (b) Continued delivery of brief interventions to young Aboriginal people including Core of Life education programs delivered in community and school settings and training to health professionals including smoking, drug and alcohol use 	Receipt of Progress Report 31 January 2014 describing satisfactory progress or satisfactory achievement against Milestones	\$375,000

	in pregnancy(a) and (b) Commence review and evaluation of programs			
Jan – July 2014 Note: Aboriginal Midwifery Outreach Project (including Core of Life program) will continue until December 2014	 (a) Continued delivery of sexual health education and health promotion strategies including 10-20 sessions with young people (a) Continued delivery of sexual health and relationships training including professional development workshop for teachers (b) Continued delivery of Community based pregnancy support and hospital antenatal services (b) Continued delivery of brief interventions to young Aboriginal people including Core of Life education programs delivered in community and school settings. (a) and (b) Complete review and evaluation of programs, including consultation with user groups, relevant services and organisations 	Receipt of Annual Report 31 August 2014 describing satisfactory achievement against Milestones	\$375,000	
• Total Australian Government Payment • \$3.21m				

 Payments can be made on a pro-rata basis if milestones for the period are only partially completed. If this occurs, the remaining portion of the payment will be made available immediately following completion of relevant milestone.