

Health Innovation Fund – Stage Two

FEDERATION FUNDING AGREEMENT - HEALTH

Table 1: Formalities and operation of schedule	
Parties	Commonwealth Tasmania
Duration	This Schedule is expected to expire on 31 December 2022 or on completion of the project, including final performance reporting. This Schedule may be extended by agreement in writing between the parties. The Schedule may also be terminated as agreed in writing by the parties.
Purpose	<p>This Schedule will support delivery of Phase 1 of a Rapid Access Specialist Inreach Service trial.</p> <p>The service is being rolled out through two complementary but distinguishable phases. This Schedule applies only to the implementation of Phase 1.</p> <p>The trial will provide primary care professionals with rapid access to staff specialists, predominantly general physicians, to support early care for people with chronic and complex healthcare needs, particularly during early acute exacerbations of chronic conditions. The service will support the target patient cohort to receive their care in the community before their condition deteriorates to the point they require lengthy or repeated periods in emergency departments or hospital inpatient beds.</p> <p>Phase 1 of the trial will operate for 12 months and commence in the first half of 2021, covering urban population centres in northern Tasmania, spanning west Launceston suburbs to Deloraine and its surrounding areas. This 'Western Corridor' has been identified based on data that indicates a higher impact of potentially preventable hospitalisations for chronic conditions and has greater levels of socio-economic disadvantage than southern Tasmania.</p> <p>Funding for Phase 1 will also support establishment of a dedicated analytical function within the service to gather evidence and data to inform an expanded service planned under Phase 2 and a future proposal to the Independent Hospital Pricing Authority for a flexible funding model (subject to the outcomes of the trial and progress of national work under the relevant NHRA reform stream).</p>

<p>Estimated financial contributions</p>	<p>The Commonwealth will provide an estimated total financial contribution to Tasmania of \$1.052 million in 2020-21 in respect of this Schedule. This contribution will help fund Phase 1 of the Specialist in-reach service trial. Tasmania will meet the remaining costs of implementing Phase 1 if and as required.</p> <hr/> <p>Table 1 (\$ million)</p> <table border="1"> <thead> <tr> <th></th> <th style="text-align: right;">2020-21</th> <th style="text-align: right;">Total</th> </tr> </thead> <tbody> <tr> <td>Estimated total budget</td> <td style="text-align: right;">1.052</td> <td style="text-align: right;">1.052</td> </tr> <tr> <td>Less estimated National Partnership Payments</td> <td style="text-align: right;">1.052</td> <td style="text-align: right;">1.052</td> </tr> <tr> <td>Balance of non-Commonwealth contributions</td> <td style="text-align: right;">0.0</td> <td style="text-align: right;">0.0</td> </tr> </tbody> </table>		2020-21	Total	Estimated total budget	1.052	1.052	Less estimated National Partnership Payments	1.052	1.052	Balance of non-Commonwealth contributions	0.0	0.0
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<p>Additional terms</p>	<p>Health Service activity will not be funded through this Agreement if the same service, or any part of the same service, is funded through any other Commonwealth program or agreement, including the <i>Addendum to the National Health Reform Agreement 2020-25</i> and Hospital Services Payments under the <i>National Partnership on COVID-19 Response</i>.</p>												

Table 2: Performance requirements, reporting and payment summary

Performance milestones	Report due	Payment
A draft project plan which sets out: <ul style="list-style-type: none">• The project description/scope, activities, milestones (including timeframes), budget breakdown, target population, stakeholder engagement (including co-design), governance, risk management approach (with consideration of privacy impact if required), success measures and evaluation.	18 June 2021	\$1.052m
Final project plan	30 July 2021	Nil
Progress report for the period from commencement of the project to 31 December 2021, including details of establishment activities undertaken, and any project risks, issues and learnings.	28 February 2022	Nil
Submission of a final evaluation report. Tasmania will determine the scope and methodology for a final evaluation of the benefits and learnings from the projects. The final evaluation report will detail outcomes of the project, key achievements and challenges, with supporting data where available. Evaluation reports will be shared with all jurisdictions. Tasmania will consider including a mix of quantitative and qualitative measures, such as: <ul style="list-style-type: none">• General Practitioners perspectives of the service.• Patient outcomes and experiences.• Recommendations for improvements prior to expansion. The report is to include supporting data, where available. Performance indicators should be meaningful, simple and comprehensible to the public. Indicators should be limited to those necessary to measure performance and inform the public about progress of the project (Clause 25 of HFFA).	30 November 2022	Nil

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

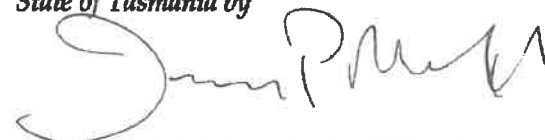
*Signed for and on behalf of the Commonwealth
of Australia by*



The Honourable Greg Hunt MP
Minister for Health and Aged Care

2021 2021

*Signed for and on behalf of the
State of Tasmania by*



The Honourable Jeremy Rockliff MP
Minister for Health

15 June 2021