Implementation Plan for the National Perinatal Depression Initiative

NATIONAL PARTNERSHIP AGREEMENT ON HEALTH SERVICES

PRELIM NARIES

- 1. This Implementation Plan is created subject to the provisions of the National Partnership Agreement on Health Services and should be read in conjunction with that Agreement. The objective of the National Partnership is to commit to improving the health and wellbeing of Australians through the delivery of high quality health services.
- 2. All parties have agreed to collaborate on the development and implementation of a National Perinatal Depression Initiative (NPDI), which aims to improve prevention and early detection of antenatal and postnatal depression and provide better support and treatment for expectant and new mothers experiencing depression.

TERMS OF THIS IMPLEMENTATION PLAN

- 3. This Implementation Plan will commence as soon as it is agreed between the Commonwealth of Australia, represented by the Minister for Health and Ageing, and at least one State or Territory (State), represented by its respective Minister.
- 4. This Implementation Plan will cease on completion of the project as specified in this Implementation Plan, including the acceptance of final performance reporting and processing of final payments against performance benchmarks specified in this Implementation Plan.
- 5. This Implementation Plan may be varied by written agreement between the Ministers.
- 6. A party to the Implementation Plan may terminate its participation in the Implementation Plan by providing 30 days notice in writing. The Commonwealth's liability to make payments to a terminating State is limited to payments associated with performance benchmarks achieved by the State up to the date of effect of the termination of its participation in the Implementation Plan.
- 7. The parties to this Implementation Plan do not intend any of the provisions to be legally enforceable. However, that does not lessen the parties' commitment to this Implementation Plan.

PROJECT OBJECTIVE

8. The objective in this Implementation Plan is to improve prevention and early detection of antenatal and postnatal depression and provide better support and treatment for expectant and new mothers experiencing depression through the development and implementation of the NPDI.

ROLES AND RESPONSIBILITIES

Role of the Commonwealth

- 9. The Commonwealth is responsible for reviewing the States' performance against the performance benchmarks specified in this Implementation Plan and providing any consequential financial contribution to the State for that performance.
- 10. The Commonwealth will provide ongoing policy leadership for coordination, implementation and evaluation of the NPDI; including the development of national data capability.
- 11. The Commonwealth will agree, by 30 June 2011, to baseline data on current levels of screening and treatment derived from the National Infant Feeding Survey for the purpose of monitoring overall progress of implementation against the NPDI.
- 12. The Commonwealth will provide funding contributions to assist the States in implementing the NPDI, in accordance with Table 1 set out in this Implementation Plan.

Role of the State

- 13. Each State is responsible for all aspects of project implementation including:
 - 13.1. undertaking activities in line with the aim of the Initiative, as per Clause 8;
 - 13.2. fully funding the project, after accounting for financial contributions from the Commonwealth and any third party;
 - 13.3. completing the project in a timely and professional manner in accordance with this Implementation Plan;
 - 13.4. meeting all conditions including providing deliverables in accordance with this Implementation Plan;
 - 13.5. working with the Commonwealth and other state governments and key stakeholders, including *beyondblue*, to implement a nationally consistent and collaborative initiative;
 - 13.6. establishing and maintaining mechanisms and infrastructure to enable nationally consistent and comparable data collection and measurement of the NPDI, in alignment with the Framework:
 - 13.7. contributing to national discussion and collaboration on the ongoing monitoring and evaluation of the Initiative, including agreement to baseline data on current levels of screening and treatment for the purpose of monitoring the progress of implementation against the NPDI, as per clause 11 above;
 - 13.8. developing new activities or programs (or modifying existing activities or programs) to enable implementation of the NPDI, in relation to the areas of perinatal depression screening, workforce training and development, follow-up treatment, care and support, and community awareness in accordance with National Health and Medical Research Council (NHMRC) clinical practice guidelines for depression and related disorders in the perinatal period;
 - 13.9. having systems in place for the monitoring of progress of implementation against the NPDI, as a result of the State's activity; and

13.10. utilising *beyondblue* and *beyondblue* resources in, but not limited to, the key areas of support and care, workforce training and development, research and community awareness.

PERFORMANCE REPORTING AND FINANCIAL ARRANGEMENTS

Budget

14. The maximum financial contribution to be provided by the Commonwealth under this Implementation Plan is \$24.6 million, payable in accordance with performance benchmarks set out in Table 2. GST is not payable on the funding provided in this Implementation Plan

Table 1: Maximum Commonwealth funding available

National Perinatal Depression	2010-11	2011-12	2012-13	Total
Initiative				
NSW	\$1,805,278	\$2,712,172	\$2,478,135	\$6,995,585
Victoria	\$1,499,968	\$2,249,118	\$2,055,789	\$5,804,875
Queens l and	\$1,267,679	\$1,896,812	\$1,734,455	\$4,898,946
South Australia	\$444,604	\$648,484	\$595,869	\$1,688,957
Western Australia	\$787,530	\$1,168,589	\$1,070,252	\$3,026,371
Northern Territory	\$211,989	\$295,683	\$274,085	\$781,757
Tasn a ni a	\$205,990	\$286,583	\$265,785	\$758,358
Australian Capital Territory	\$176,962	\$242,559	\$225,630	\$645,151
TOTAL	\$6,400,000	\$9,500,000	\$8,700,000	\$24,600,000

- 15. Any Commonwealth financial contribution payable will be processed by the Commonwealth Treasury and paid to the State Treasury in accordance with the payment arrangements set out in Schedule D of the *Intergovernmental Agreement on Federal Financial Relations*.
- 16. Having regard to the estimated costs of projects specified in the overall project budget, a State will not be required to pay a refund to the Commonwealth if the actual cost of the project is less than the agreed estimated cost of the project. Similarly, a State bears all risk should the costs of a project exceed the estimated costs. The Parties acknowledge that this arrangement provides the maximum incentive for a State to deliver projects cost-effectively and efficiently.

Outputs

- 17. The objective of this agreement will be achieved by:
 - 17.1. routine and universal screening for perinatal depression;
 - 17.2. follow up support and care for women assessed as being at risk of or experiencing perinatal depression;
 - 17.3. workforce training and development for health professionals;
 - 17.4. research and data collection; and
 - 17.5. community awareness activities relating to the importance of detection, treatment and management of perinatal depression.

Performance Benchmarks

- 18. States must demonstrate, through data contained in mid-year summary reports and annual financial year performance reports:
 - 18.1. that they have met the State specific performance benchmarks outlined in Schedule A; and
 - 18.2. improvement in the provision and uptake of screening and treatment provided by the State as a result of this project's funding.
- 19. Further to the agreement of baseline data by 30 June 2011 on current levels of screening and treatment for the purpose of monitoring the progress of implementation against the NPDI, agreed baseline data will contribute to informing assessment of achievement of performance benchmarks.

Performance Reporting

20. The overall project budget is set out in Table 1 above.

Table 2: Performance benchmarks and associated payments

Del iverable	Due Date	NSV	VIC	QLL D	VA	SA	TAS	ACT	NI	TOTAL
Agreement by the Commonwealth of the Performance Benchmarks following provision of these to the Commonwealth.	15 April 2011	\$722,111	\$599,987	\$507,072	\$315,012	\$177,842	\$82,396	\$70,785	\$84,796	\$2,560,000
Acceptance of progress-to-date report at an agreed level of progress against key outputs of the Initiative.	15 May 2011	\$1,083,167	\$899,981	\$760,607	\$472,518	\$266,762	\$123,594	\$106,177	\$127,193	\$3,840,000
TOTAL 2010-11		\$1,805,278	\$1,499,968	\$1,267,679	\$787,530	\$444,604	\$205,990	\$176,962	\$211,989	\$6,400,000
Acceptance of progress report at an agreed level of progress against benchmarks for the 2010-11 financial year.	5 July 2011	\$1,084,869	\$899,647	\$758,725	\$467,436	\$259,394	\$114,633	\$97,024	\$118,273	\$3,800,000
Acceptance of mid-year progress report at an agreed level of progress against benchmarks for the 2011-12 financial year.	5 December 2011	\$1,627,303	\$1,349,471	\$1,138,087	\$701,153	\$389,090	\$171,950	\$145,535	\$177,410	\$5,700,000
TOTAL 2011-12		\$2,712,172	\$2,249,118	\$1,896,812	\$1,168,589	\$648,484	\$286,583	\$242,559	\$295,683	\$9,500,000
Acceptance of Dec - June progress report at an agreed level of progress against benchmarks for the 2011-12 financial year.	5 July 2012	\$991,254	\$822,316	\$693,782	\$428,101	\$238,348	\$106,314	\$90,252	\$109,634	\$3,480,000
Acceptance of mid-year progress report at an agreed level of progress against benchmarks for the 2012-13 financial year.	5 December 2012	\$743,441	\$616,737	\$520,337	\$321,076	\$178,761	\$79,736	\$67,689	\$82,226	\$2,610,000
TOTAL 2012-13		\$1,734,695	\$1,439,052	\$1,214,119	\$749,176	\$417,108	\$186,050	\$157,941	\$191,860	\$6,090,000
Acceptance of Dec - June progress report at an agreed level of progress against benchmarks for the 2012-13 financial year.	7 July 2013	\$743,441	\$616,737	\$520,337	\$321,076	\$178,761	\$79,736	\$67,689	\$82,226	\$2,610,000
TOTAL 2013-14		\$743,441	\$616,737	\$520,337	\$321,076	\$178,761	\$79,736	\$67,689	\$82,226	\$2,610,000

Reporting Arrangements

- 21. Each State will provide performance benchmarks to the Commonwealth for agreement at the commencement of the Implementation Plan. Performance benchmarks will stipulate planned increases in the outputs identified at Schedule A.
- 22. Each State will provide two reports throughout each financial year to the Commonwealth to demonstrate its achievement against the performance benchmarks.
- 23. Each Mid-year Summary Report is to contain a short description of actual performance of the State in the period to date against the performance benchmarks.
- 24. Each Performance Report is to contain a description of actual performance of the State in the period to date against the performance benchmarks.
- 25. The final project report is due on 30 August 2013 or at the completion of the project or termination of this Implementation Plan.
- 26. The final project report will be a stand-alone document that can be used for public information dissemination purposes regarding the project and must:
 - a) describe the conduct, benefits and outcomes of the project as a whole;
 - b) evaluate the project, including assessing the extent to which the objective in this Implementation Plan has been achieved and explaining why any aspects were not achieved; and
 - c) include a discussion of any other matters relating to the project, which the Commonwealth notifies the State should be included in the final project report at least 30 days before it is due.

Performance Benchmarks

(STATE)

Output	Financial Year	Activity	Performance Benchmark
Routine and Universal Screening for perinatal depression	2010-11	Disseminate toolkits to all GPs on the EPDS	Proportion of services providing screening
	2011-12		
	2012-13		
Follow up support and care for women assessed as being at risk of or experiencing perinatal	2010-11		Proportion of services providing treatment
depression	2011-12		
	2012-13		
Workforce training and development for health professionals	2010-11		Number of training programs delivered

ı	2011-12	
	2011-12	
	2012-13	
Research and	2010-11	
data collection		
	2011-12	
	2011-12	
	2012-13	
Community	2010-11	
awareness		
relating to the importance of		
detection,		
treatment and		
management of perinatal depression		
depression	2011-12	
depression		
	2012-13	
	2012-13	
	1	I