

Cradle Coast Connected Care (4C) Clinical Repository

NATIONAL PARTNERSHIP AGREEMENT ON IMPROVING HEALTH SERVICES IN TASMANIA

PRELIMINARIES

- B1 The outcomes and outputs of this Schedule will facilitate the expanded deployment of electronic advance care planning across residential aged care facilities in Tasmania.
- B2 In 2012-13, the Commonwealth will provide \$250,000 to support the continued operation of the Cradle Coast Connected Care (4C) clinical repository. This funding is in addition to funding previously provided via the 2011-12 tripartite Funding Agreement between the Commonwealth, Tasmanian Government and the National E-Health Transition Authority (NEHTA) for the 4C eHealth site in the North West of Tasmania.
- B3 The 4C clinical repository stores advance care plans (ACPs), which document a person's preferences about health, personal care and preferred health outcomes; and guide decision making at a future time when that person cannot make or communicate his or her decisions.
- B4 The goals of the tripartite Funding Agreement included development of ACPs, as a component of an electronic health record, to support the implementation of a palliative and supportive model of care for people with advanced life limiting disease.

TERM OF THIS SCHEDULE

- B5 The Schedule takes effect from the date that it is signed by the Commonwealth and Tasmania. The Schedule may be terminated earlier or extended, as agreed in writing by the Parties, in accordance with Part 6 – Governance Arrangements, of the National Partnership Agreement on Improving Health Services in Tasmania.

OUTCOMES AND OUTPUTS

Outcomes

- B6 Patients with advanced, life-limiting diseases will receive treatment and care which respects their wishes, as a result of the improved information sharing and communication between healthcare providers, care givers, patients and their families.

Output

- B7 The outcome of this agreement will be achieved through the operation of the 4C clinical repository to enable ongoing access to shared electronic ACPs by healthcare providers.

ROLES AND RESPONSIBILITIES

- B8 To realise the outcomes and outputs of the Schedule, Tasmania has specific roles and responsibilities in addition to the roles and responsibilities set out in the National Partnership Agreement.

Role of Tasmania

- B9 Tasmania agrees to be accountable for the following additional roles and responsibilities:
- (a) operation of the 4C clinical repository by the Tasmanian Department of Health and Human Services;
 - (b) effective monitoring of the use of, and access to, the clinical repository including the number of new ACPs placed in the repository and the number of accessed records by healthcare providers;
 - (c) supporting the continued use of the repository for existing ACPs and encouraging new ACPs to be uploaded and accessed; and
 - (d) meeting the performance monitoring and reporting requirements of this Schedule.

PERFORMANCE MONITORING AND REPORTING

- B10 Tasmania will provide an initial status report and a final project report to the Commonwealth.

Initial Status Report

- B11 On commencement of this Schedule, Tasmania will provide a status report to the Commonwealth which accurately describes the status of the repository, including the number of ACPs in the repository and the number of accessed records as at 1 January 2013. This report will be used as a baseline for measuring progress during the period.

Final Project Report

- B12 Tasmania will submit a final project report for the period covered by this Schedule.
- B13 The final project report will include:
- (a) review and evaluation of whether the outcomes and outputs described in this Schedule were achieved and if not, the reasons why;
 - (b) the number of new ACPs uploaded to the clinical repository from 1 January 2013;
 - (c) the number of accessed records;
 - (d) consideration of risks and issues arising during the period; and
 - (e) lessons learnt and findings, detailing strategic, systemic and operational lessons learnt and feedback from the project, including any recommendations.

FINANCIAL ARRANGEMENTS

Financial contributions

- B14 Under this Schedule, the Commonwealth will provide Tasmania \$250,000 in 2012-13.
- B15 Following the commencement of this Schedule, 50% of the total Commonwealth financial contribution will be payable on the Commonwealth's receipt of the initial status report.
- B16 The remaining 50% will be payable on the Commonwealth's acceptance of the final project report due on 17 May 2013.

Table B1: Commonwealth financial contributions

Payment #	Requirement	Anticipated timing	Amount
Payment 1: Execution of this Schedule	Signed Schedule. Receipt by the Commonwealth of Initial Status Report on the repository as at 1 January 2013.	On commencement of the Schedule	50% \$125,000
Payment 2: Final Payment	Acceptance by the Commonwealth of the Final Report (due to the Commonwealth by 17 May 2013).-	June 2013	50% \$125,000
Total			\$250,000

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

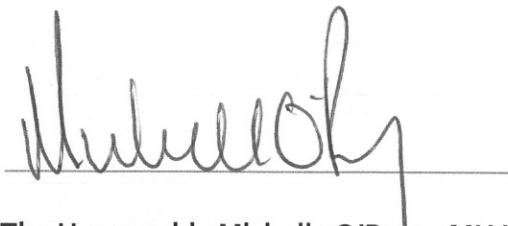
Signed for and on behalf of the Commonwealth of Australia by

A handwritten signature in blue ink, reading "Tanya Plibersek", written over a horizontal line.

The Honourable Tanya Plibersek MP
Minister for Health

26  April 2013

Signed for and on behalf of the State of Tasmania by

A handwritten signature in black ink, reading "Michelle O'Byrne", written over a horizontal line.

The Honourable Michelle O'Byrne MHA
Minister for Health

10 April 2013