

Innovative Flexible Funding for Mental Health

NATIONAL PARTNERSHIP AGREEMENT ON IMPROVING HEALTH SERVICES IN TASMANIA

PRELIMINARIES

- C1 The outcomes and outputs of this Schedule are to address gaps in the Tasmanian mental health system with a particular focus on populations not traditionally served well by mainstream approaches.
- C2 The Commonwealth will provide up to \$4.15 million over four years from 2012-13 for packages of care to provide intensive short term support that is individualised, community based, flexible and recovery-focussed.
- C3 Packages of care are intended to assist clients improve their mental health before transitioning to mainstream mental health services.
- C4 Packages of care involve an assessment of client needs and the development and coordination of individualised care plans. Care plans outline services to be purchased on behalf of the client to support them to access and maintain accommodation, education, employment and social supports. Care plans are agreed between the client, clinical service providers and a care management service provider.
- C5 The services to be funded through this Schedule are intended to support clients who are either at-risk children or youth (12 to 18 years of age) with mental health issues and potentially alcohol and other drug issues, or clients with complex mental health needs who have comorbidities and/or access services across multiple sectors, such as disability or forensic services.
- C6 The nature and complexity of service delivery through these packages of care will vary significantly depending on the assessed needs and circumstances of individual clients. These varying support needs, and the costs associated with them, mean that within the fixed funding available for each financial year, the number of clients receiving care may vary.
- C7 The services to be funded through this Schedule are separate from, and in addition to, those being delivered by the state through the National Partnership Agreement Supporting National Mental Health Reform, as outlined in the agreed Tasmania Implementation Plan.
- C8 Requirements and performance benchmarks specified in this Schedule will be in addition to those specified in the National Partnership Agreement Supporting National Mental Health Reform and Tasmania Implementation Plan.

TERM OF THIS SCHEDULE

- C9 The Schedule takes effect from the date that it is signed by the Commonwealth and Tasmania and will expire on 30 June 2016, or on completion of the project, including acceptance of final performance reporting and processing of final payments against milestones.
- C10 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

- C11 The outcome of the Schedule will be improved mental health service delivery for two priority groups in Tasmania:
- (a) Priority Group 1: at risk children and youth (12 to 18 years of age) with mental health issues, and potentially co-morbid alcohol and other drug issues; and
 - (b) Priority Group 2: people with complex mental health needs who have comorbidities and/or access services across multiple sectors.
- C12 The Schedule will develop the capacity of the Tasmanian community sector to meet the needs of these clients through the coordination and delivery of mental health and other services across multiple sectors including, but not limited to, alcohol and other drug, disability, general health, child protection and justice services.

Outputs

- C13 The outcomes will be achieved through development of care plans and delivery of packages of care to a cohort of clients over the period of the Schedule. Packages of care will provide short-term and intensive support that is individualised, community-based, flexible, recovery-focused and will assist clients to access and maintain safe accommodation, education, employment and social supports.
- C14 Service delivery strategies will ensure that transitional arrangements are implemented for clients and providers once care plans expire. All care plans will be finalised by 30 June 2016.

ROLES AND RESPONSIBILITIES

- C15 To realise the outcomes and outputs of the Schedule, each Party has specific roles and responsibilities in addition to the roles and responsibilities set out in the National Partnership Agreement.

Role of Tasmania

- C16 Tasmania agrees to be accountable for the following additional roles and responsibilities:

- (a) developing a service delivery model in consultation with the Commonwealth and engaging appropriate service providers to deliver packages of care to the priority groups specified in this Schedule;
- (b) providing targeted packages of care to address the mental health needs of at-risk children and youth aged 12 to 18 years and of people with extremely complex mental health needs and comorbidities;
- (c) providing individualised packages of care to deliver short term flexible and recovery-focussed intensive support to access and maintain safe accommodation, education, employment and social supports; with a focus on coordination across multiple service sectors; and
- (d) meeting the performance monitoring and reporting requirements of this Schedule.

Shared roles and responsibilities

C17 The Commonwealth and Tasmania share the following roles and responsibilities:

- (a) jointly conducting a review by 30 August 2014 to assess the extent to which the project objectives, outcomes and/or outputs of this Schedule are being met, and recommending actions to address any shortcomings to promote the successful delivery of this Schedule. This will inform the Review of Agreement which covers all Schedules to the Agreement, as set out in Clause 27 of the Agreement.

PERFORMANCE BENCHMARKS

C18 Performance benchmarks are set out in Table C1 below:

Table C1: Performance benchmarks

	2012-13	2013-14	2014-15	2015-16
Packages of care	Not Applicable	6 to 16 clients receiving care throughout the year	6 to 16 clients receiving care throughout the year	6 to 16 clients receiving care throughout the year

- C19 The target range for clients receiving care throughout the year (Table C1) recognises that the total number of packages that can be funded in a single year under this Schedule is dependent on the assessed care needs of the individual clients concerned and the resulting cost of their packages of care, and therefore cannot be predicted in advance.
- C20 The Commonwealth will consider that Tasmania has met the minimum required performance targets for 2013-14 to 2015-16 if a minimum of 6 clients have received packages of care each financial year, and these packages are demonstrated to be for those clients at the highest end of severe and complex mental illness, and assessed as requiring high intensity and/or high cost care (as documented in monthly reports and corresponding progress reports).

PERFORMANCE MONITORING AND REPORTING

C21 Tasmania will provide an Action Plan, Progress Reports at six month intervals and a Final Report.

Action Plan

C22 In accordance with Clause 12(b) of the Agreement, Tasmania will develop an Action Plan in consultation with the Commonwealth that sets out Tasmania's strategy for delivering outputs under the Schedule. The Action Plan, to be developed immediately following execution of this Schedule, will outline actions for each financial year and include consideration of a transition strategy for clients receiving packages of care at the expiry of the Schedule.

Progress Reports

C23 Commencing in 2013-14, Tasmania will provide detailed reports on progress of implementation as set out in the agreed Action Plan and against the agreed performance benchmarks every six months during the operation of the Schedule.

C24 Progress Reports are due by 31 October (for the reporting period 1 March to 31 August) and by 30 April (for the reporting period 1 September to 28 February) of each year. Each six-monthly progress report will include:

- (a) progress in the reporting period consisting of a brief summary of steps that have been taken to implement the package;
- (b) a summary of promotional activities in the reporting period and planned for future reporting periods;
- (c) reporting against performance benchmarks, with a summary for each of the two priority groups specified in this Schedule, on the number of clients assessed for their support needs, the number of clients commencing a new package of care, the number of continuing clients and the number of clients who exited from care arrangements (and reason for exit) in the reporting period;
- (d) benefits provided to people with a mental illness, on a de-identified basis, including a summary of the service sectors and organisations that each client has accessed, the total number of hours of support provided to each client during the reporting period, and a brief description of the nature and intensity of the package of care being provided to each client over the period;
- (e) examples of successful practice or outcomes;
- (f) next steps including a short summary of activities that are expected to occur in the next reporting period and the expected dates of completion;
- (g) information on any delays that have been experienced, details of the causes of delay/s and actions completed or planned to mitigate future delays; and
- (h) advice on any other sensitive issues that may impact on achieving performance benchmarks, or sensitivities of which the Commonwealth should be aware.

Final Project Report

- C25 Tasmania will submit a final project report for the period covered by this Schedule. The final project report will include:
- (a) review and evaluation of the outputs of the Schedule and the degree to which they have contributed to achieving the outcomes described at Clauses C11 and C12, including any barriers to implementation, or other issues identified during the project;
 - (b) the number of clients who received a package of care, reported against each of the two priority groups and the length of time that clients were supported by this funding;
 - (c) the total number of hours of support and types of support provided to each client, reported against each of the two priority groups;
 - (d) a report on transition arrangements for clients receiving packages of care at the expiry of the Schedule;
 - (e) the number of organisations funded through this Schedule to provide support to clients and a detailed summary of the types of support provided; and
 - (f) lessons learnt and findings detailing strategic, systemic and operational lessons learnt and feedback from the project, including any recommendations.

Monitoring and assessment

- C26 The Commonwealth will make an assessment of the progress achieved against the performance benchmarks under this Schedule.

FINANCIAL ARRANGEMENTS

Financial contributions

C27 Under this Schedule, the Commonwealth will provide up to \$4.15 million to Tasmania over the period 2012-13 to 2015-16 as outlined in Table C2.

Table C2: Estimated Commonwealth annual financial contribution

Year	2012-13	2013-14	2014-15	2015-16	Total
\$ million	1.05	1.05	1.025	1.025	4.15

Note: All figures are rounded - actual payments will be calculated to the nearest dollar

C28 An initial payment will be made upon Commonwealth acceptance of an Action Plan in accordance with clause C22, and notification of the anticipated service commencement date. The payments during 2013-14 to 2015-16 will be made on the first available payment date following acceptance of each six monthly progress.

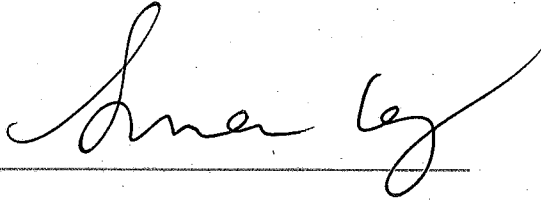
C29 Anticipated payments by the Commonwealth are outlined in Table C3:

Table C3: Commonwealth financial contributions (\$m)

Requirement	2012-13	2013-14	2014-15	2015-16	Total
Acceptance of Action Plan and notification of the anticipated service commencement date	1.05	N/A	N/A	N/A	1.05
Acceptance of the Progress Report for the period ending 31 August each year, due by 31 October of the same year	N/A	0.525	0.5125	0.5125	1.55
Acceptance of the Progress Report for the period ending 28 February each year, due by 30 April of the same year	N/A	0.525	0.5125	0.5125	1.55
	1.05	1.05	1.025	1.025	4.15

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

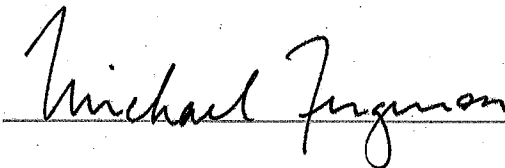
Signed for and on behalf of the Commonwealth of Australia by

A handwritten signature in black ink, appearing to read "Sussan Ley", written over a horizontal line.

The Honourable Sussan Ley MP
Minister for Health

17/6/2015

Signed for and on behalf of the State of Tasmania by

A handwritten signature in black ink, appearing to read "Michael Ferguson", written over a horizontal line.

The Honourable Michael Ferguson MP
Minister for Health

3 June 2015