Implementation Plan for Northern Territory Mobile Outreach Service (MOS) *Plus*

NATIONAL PARTNERSHIP AGREEMENT ON HEALTH SERVICES

PRELIMINARIES

- 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 in the National Partnership is to commit to improving the health and wellbeing of Australians through delivering high quality health services.
- 2. The Northern Territory Mobile Outreach Service *Plus* (MOS *Plus*) responds to any form of child abuse-related trauma, including sexual assault, by providing culturally safe, best-practice counselling and support services to Aboriginal children, families and communities in remote communities in the Northern Territory.

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 Indigenous Health, Rural and Regional Health and Regional Services Delivery and the Northern Territory, represented by the Minister for Children and Families.
- 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. Either Party may terminate this agreement by providing 30 days notice in writing. Where this Implementation Plan is terminated, the Commonwealth's liability to make payments to the Territory is limited to payments associated with performance benchmarks achieved by the Territory by the date of effect of termination of this 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.
- 8. The existing funding agreement for the NT Sexual Assault Mobile Outreach Service (MOS) (\$5.744 million over four years from 2008-09 to 2011-12) will be superseded by this Implementation Plan.

PROJECT OBJECTIVE

9. The objective for MOS Plus is to provide equitable access to timely, culturally safe and valued responses to Aboriginal children, adolescents and their families living in remote communities of the Northern Territory affected by trauma associated with any form of child abuse and neglect, including sexual assault.

PROJECT OUTCOMES AND OUTPUTS

OUTCOMES:

- 10. Improvement in psychosocial and emotional wellbeing, and reduction in child abuse related trauma of Aboriginal children in remote communities through access to, and provision of best-practice counselling services and mobile forensic sexual assault medical services.
- 11. Increase in the safety of children in their families and communities.

OUTPUTS:

- 12. The delivery of case-related services to children and families, including provision of forensic sexual assault medical examinations in remote areas.
- 13. The delivery of non case-related services including community education, community meetings and external professional development to support clinical services.
- 14. These outputs will be provided to Aboriginal children, families and communities where the children are:
 - a) Aged between o and 17 years;
 - b) Usual residents in a community or town camp in one of the agreed Australian and Northern Territory Government Health Service Delivery Areas, excluding Darwin Urban and Alice Springs Urban;
 - c) Experiencing trauma as a result of being a victim of any form of child abuse or neglect, and/or displaying problematic sexual behaviours likely to be symptomatic of abuse; and
 - d) Willing to accept a service on a voluntary basis.

ROLES AND RESPONSIBILITIES

Role of the Commonwealth

- 15. The Commonwealth is responsible for:
 - (a) review of the Northern Territory's performance as detailed in reports and data against the performance indicators, milestones and timelines for the project specified in this Implementation Plan and providing any consequential financial contribution to the Northern Territory for that performance;
 - (b) acceptance of project reports and action plans for MOS Plus delivery;
 - (c) active membership of the Expert Reference Group; and
 - (d) establishment and separate funding of an independent evaluation of the project.

Role of the Northern Territory

- 16. The Northern Territory is responsible for all aspects of project implementation, including:
 - a) fully funding the project, after accounting for financial contributions from the Commonwealth and any third party;
 - b) completing the project and meeting all conditions in a timely and professional manner in accordance with this Implementation Plan;
 - c) continuing to deliver currently funded NT Sexual Assault Mobile Outreach Service services, effective 1 July 2009 (as distinct from MOS *Plus*), and progressively implementing the MOS *Plus* service model;
 - d) delivering the MOS *Plus* service model according to agreed principles of service provision: equity; access; need; quality; efficiency; and workforce capacity;
 - e) maintaining at a minimum, the Northern Territory's current level of Sexual Assault Referral Centre services (as distinct from MOS *Plus*);
 - f) continuing development of the service delivery model and effective reporting in collaboration with the Commonwealth;
 - g) providing MOS *Plus* services to individuals and communities guided by assessment of community need, the most appropriate form of intervention, availability of other services, and community capacity;
 - h) consistently working to maintain agreed levels of appropriately trained professionals in MOS *Plus* remote area teams to deliver the services as described in the outputs above;
 - i) consistently working to maintain agreed levels of appropriately trained medical practitioners to provide culturally safe forensic sexual assault medical examinations in remote areas;
 - j) consistently working to maintain agreed levels of other staff to support the delivery of MOS *Plus* services;
 - k) establishing a specialist clinical training unit to resource and train MOS *Plus* staff to achieve and maintain best practice;
 - providing accurate and timely data to enable policy, planning and reporting through the continued development of the existing Mobile Outreach Database and Schedule data collection and management system (known as the MOD);
 - m) maintaining and managing: the MOS *Plus* Expert Reference Group including an appropriate Chair; and stakeholders; and
 - n) working collaboratively with the external evaluation consultant, and contributing to the development of effective links between the internal and external evaluation processes.

PERFORMANCE REPORTING AND FINANCIAL ARRANGEMENTS

17. The maximum financial contribution available to be provided to the Northern Territory in accordance with this Implementation Plan by the Commonwealth is \$12.569 million over the years 2009-10 to 2011-2012. The Commonwealth contribution will be made in accordance with reporting requirements set out in Table 2.

Table 1: Performance indicators and benchmarks

CATEGORY	PERFORMANCE INDICATORS	Stage 1 Benchmark reporting periods from end Q1 2010- 11	Stage 2 Benchmark reporting periods from end Q ₃ 2010-11.	Proportion of budget allocation attached to milestone
1) Case- related service delivery	1.1. Number of case-related services provided in previous six month period.	150	260	20%
2) Service delivery coverage to communities	2.1. Number of visits to remote locations to provide services in previous six months.	105	168	20%
2	 2.2. Percentage of communities receiving a minimum one visit in previous six months. 	70%	80%	10%
3) Non case- related services	3.1. Number of professional development and/or community education services delivered to remote service providers and community members in previous six months.	50	98	10%
	3.2. % of total professional development services delivered to health clinic staff.	10%	20%	10%
4) Forensic medical examinations **	4.1. Number of written agreements with remote health facilities to enable forensic medical examinations in place at end of quarter.	Nominal 7	Nominal 7	10%
	4.2. % of cases in previous six months where mobile forensic medical examinations delivered (of total remote children receiving SARC or MOS <i>Plus</i> forensic medical examinations).	Nominal 5%	Nominal 10%	10%
5) Clinical and training unit for MOS <i>Plus</i> staff	5.1. Number of individual or group training sessions provided to MOS <i>Plus</i> staff by clinical specialists in previous six months.	50	75	10%

Note: Indicators are based on a six monthly period to enable any anomalies such as seasonal fluctuations impacting on quarterly service delivery over the quarter to be 'smoothed out' over the longer period.

The demonstration of Stage 1 benchmarks in reporting commences at the end of Quarter 1, 2010-11. Benchmarks have one further stage of increase (Stage 2) at the end of Quarter 3, 2010-11 to provide a graduated development period.

^{**}Nominal benchmarks have been set in recognition of the evolving nature of the model for delivery of the Forensic Medical Examination (FME) component. An informal review of the FME model will be jointly undertaken before 31 March 2011, which will not impact on this Implementation Plan.

National Partnership Agreement on Health Services

Table 2: Milestone items and associated payments (\$m.):

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Milestone item	Reporting	Expected	Percent	Year1-	Year 2-	Year 3-	Total
	Due Date	Payment Date	of Annual Total	2009-10 (\$m.)	2010-11 (\$m.)	2011-12 (\$m.)	(\$m.)
(i) 2008-09 Annual Action Plan and Q4 Progress Report.*	31 July 2009	7 Oct 2009	16.64%	0.693			0.693
(ii) O1 (Jul to Sept 2009) Progress Report and data; evidence of commencement of services.*	24 Nov 2009	7 Dec 2009	16.68%	0.695			0.695
(iii) O2 (Oct to Dec 2009) Progress Report and data; Action Plan Q3 & 4 2009-10; progress toward minimum performance benchmarks in Table 1.*	29 Jan 2010	7 Mar 2010	25%	1.041			1.041
(iv) Q3 (Jan to Mar 2010) Progress Report and data; progress toward Stage 1 benchmarks in Table 1.	30 Apr 2010	7 Jun 2010	41.68%	1.736			1.736
(v) Action Plan for 2010-11.	11 June 2010	N/A					
2009-10 Total expenditure			100%	4.165			4.165
(vi) O4 (Apr to Jun 2010) Progress Report and data; progress toward Stage 1 performance benchmarks in Table 1.	30 July 2010	7 Sept 2010	25%		1.026	-	1.026
(vii) O1 (Jul to Sept 2010) Progress Report and data; reach Stage 1 performance benchmarks in Table 1.	29 Oct 2010	7 Dec 2010	25%		1.026		1.026
(viii) O2 (Oct to Dec 2010) Progress Report and data; progress towards Stage 2 performance benchmarks in Table 1.	31 Jan 2011	7 Mar 2011	25%		1.026		1.026
(ix) Q3 (Jan to Mar 2011) Progress Report and data; reach Stage 2 performance benchmarks in Table 1.	30 Apr 2011	7 Jun 2011	25%		1.026		1.026
(x) Action Plan for 2011-12.	31 May 2011	N/A					
2010-11 Total expenditure			700%		4.104		4.104
(xi) O4 (Apr to Jun 2011) Progress Report and data; maintain as minimum Stage 2 performance benchmarks in Table 1.	29 July 2011	7 Sept 2011	25%			1.075	1.075
(xii) O1 (Jul to Sept 2011) Data.	31 Oct 2011	7 Dec 2011	10%			0.430	0.430
(xiii) Six monthly (July to Dec 2011) Progress Report and data; maintain as minimum Stage 2 performance benchmarks in Table 1.	31 Jan 2012	7 Mar 2012	25%			1.075	1.075
(xiv) Q3 (Jan to Mar 2012) Data.	30 Apr 2012	7 Jun 2012	10%			0.430	0.430
(xv) Six monthly (Jan to Jun 2012) Progress Report and data; maintain as minimum Stage 2 performance benchmarks in Table 1.	30 Jul 2012	7 Sept 2012	20%			0.860	0.860
(xvi) Final Project Report.	21 Sept 2012	7 Nov 2012	10%			0.430	0.430
2011-12 Total expenditure			700%			4.300	4-300
TOTAL EXPENDITURE three years 2009-10 to 2011-12							12.569
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* Reporting and payments in rows (i) to (iii) inclusive pre-date this Implementation Plan and were made under previous funding agreement or exchange of letters signed on 19 September and 18 November 2009 respectively. Note: All payments in Table 2 will be made when reporting indicates benchmarks in Table 1 are attained.

- 18. To receive total funding for each milestone item in Table 2, the Territory must achieve all relevant benchmarks as set out in Table 1. Where a benchmark is not met, payment will only be reduced by the corresponding proportion of budget allocated to that benchmark.
- 19. Any Commonwealth financial contribution payable will be processed by the Commonwealth Treasury and paid to the Northern Territory Treasury in accordance with the payment arrangements set out in Schedule D of the *Intergovernmental Agreement on Federal Financial Relations*.
- 20. Payments will be made on receipt and acceptance of reports and data in respect of the deliverables identified for this project, as detailed in this Implementation Plan.

BUDGET

21. The overall project budget is set out in Tables 3.

Table 3: Overall project budget 2009-10 to 2011-12 (\$12.569 million)

	2009-10 (\$m.)	2010-11 (\$m.)	2011-12 (\$m.)	TOTAL (\$m.)
NT Sexual Assault Mobile Outreach Service	\$1.386	\$1.386	\$1.536	\$4.308
MOS Plus	\$2.779	\$2.718	\$2.764	\$8.261
TOTAL FOR PROJECT THREE YEARS 2009-10 TO 2011-12	\$4.165	\$4.104	\$4.300	\$12.569

NOTE: Monies for this project were allocated from two separate measures:

- 1. \$5.744 million over 4 years from 2008-09 under the original funding agreement for the project in the Better Outcomes for Hospitals and Community Health measure; and
- 2. an additional \$8.261 million over three years from 2009-10 under the *Closing the Gap in the NT National Partnership Agreement* to expand the existing NT Sexual Assault Mobile Outreach Service (established 2008-09) in size and scope.

This Implementation Plan covers only the three year period from 2009-10 to 2011-12 The amount provided to the Northern Territory by the Commonwealth for the project over the three years covered by the Implementation Plan is \$12.569 million.

REPORTING ARRANGEMENTS

- 22. The Northern Territory will provide the specified project reports and data (including year to date cumulative data) to the Commonwealth to demonstrate its achievement of the aims of the program and the performance benchmarks set out in Table 1.
- 23. Each project report is to contain the following information:
 - a) a description of actual performance and operation of MOS *Plus* services in the period to date, including data and performance benchmarks;
 - b) promotional activities undertaken in relation to, and media coverage of, the project during the reporting period; and
 - c) a description of the work that will be undertaken and any expected promotional opportunities during the next reporting period.

- 24. As established for the NT Sexual Assault Mobile Outreach Service, retrospective MOD Schedule data will be provided to the Commonwealth each month.
- 25. Other project information may be required on an ad-hoc basis by the Commonwealth. This will be provided as agreed with the Northern Territory.
- 26. The final project report is due on 21 September 2012 or within 60 business days of the termination of this Implementation Plan.
- 27. 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) provide internal evaluation of the project, including assessing the extent to which the objectives in this Implementation Plan have been achieved and explaining why any aspects were not achieved; and
 - c) include a discussion of any other matters relating to the project, limited to the minimum necessary for the effective assessment of performance, which the Commonwealth notifies the Northern Territory should be included in the final project report at least 30 days before it is due.