

## AGREED VARIATION

### The Provision of COVID-19 Quarantine Arrangements at the Northern Territory Centre for National Resilience for Organised National Repatriation of Australians

FEDERATION FUNDING AGREEMENT - HEALTH

<b>Table 1: Formalities and operation of schedule</b>	
Parties	Commonwealth of Australia Northern Territory Government
Duration	This Schedule is expected to expire on 31 December 2021, and then for sufficient additional time to allow for the final reconciliation of any payments made under this Schedule.  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	This Schedule will support the delivery of increased quarantine capacity at the Centre for National Resilience, including the capital expenditure, health services and facility operations costs to accept Australian repatriations.
Scope	This Schedule covers all activities outlined in <u>Appendix A</u> for Australian residents, permanent Australian residents or visa holders with immediate family in Australia whose return from International locations has been facilitated by the Commonwealth.  The capacity at the Centre for National Resilience will be increased to quarantine up to 2,000 individuals per fortnight. The parties agree that maximum capacity of 2,000 will be reached through increased flight frequency commencing throughout May 2021.  The Northern Territory will maintain primary responsibility and authority for the delivery of this Schedule to support COVID-19 quarantine for Organised National Repatriation of Australians entering the Northern Territory as outlined in the section on Responsibilities. The Commonwealth will assist the Northern Territory by undertaking the activities outlined in the section on Responsibilities.  Northern Territory obligations under this agreement ceases once the period of quarantining of the individual has ended.
Provisions to support implementation of increasing	To accommodate up to 2,000 residents at the Centre, the Northern Territory will merge the Commonwealth and Northern Territory funded quarantine operation arrangements at the facility. The Northern Territory will be responsible for ensuring the cohorts

<p>capacity from 850 to 2,000 returning Australians per fortnight</p>	<p>continue to be separated and managed in line with national standards and that sufficient domestic quarantine capacity remains available.</p> <p>The Northern Territory, working with the Commonwealth, commit to produce detailed implementation plans to support the expansion to a maximum of 2,000 returning Australians per fortnight. Once the implementation plans are agreed by both parties and ready for mobilisation, the expansion will formally commence following an exchange of letters between the Ministerial signatories of this Schedule. Preparatory recruitment and capital works activities may commence prior to the exchange of letters.</p>																																										
<p>Estimated financial contributions</p>	<p>The Commonwealth will provide an estimated total financial contribution to the Northern Territory of \$513.5million in respect of this Schedule. Noting the budget will be reviewed through the Steering Committee.</p> <table border="1" data-bbox="443 815 1372 1227"> <thead> <tr> <th colspan="7"><b>Table 1</b></th> </tr> <tr> <th><b>(\$ million)</b></th> <th><b>2020-21</b></th> <th><b>2021-22</b></th> <th><b>2022-23</b></th> <th><b>2023-24</b></th> <th><b>2024-25</b></th> <th><b>Total</b></th> </tr> </thead> <tbody> <tr> <td><b>Estimated total budget</b></td> <td><b>239.6</b></td> <td><b>273.9</b></td> <td><b>0.0</b></td> <td><b>0.0</b></td> <td><b>0.0</b></td> <td><b>513.5</b></td> </tr> <tr> <td>Less estimated National Partnership Payments</td> <td>239.6</td> <td>273.9</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> <td>513.5</td> </tr> <tr> <td>- Northern Territory</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Balance of non-Commonwealth contributions</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> <td>0.0</td> </tr> </tbody> </table> <p>Note: The figures above do not include those amounts to be retained by the Commonwealth from fees charged to people repatriated under this agreement. The final amount to be paid under the Agreement will be dependent on the actual costs incurred by the Northern Territory.</p>	<b>Table 1</b>							<b>(\$ million)</b>	<b>2020-21</b>	<b>2021-22</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25</b>	<b>Total</b>	<b>Estimated total budget</b>	<b>239.6</b>	<b>273.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>513.5</b>	Less estimated National Partnership Payments	239.6	273.9	0.0	0.0	0.0	513.5	- Northern Territory							Balance of non-Commonwealth contributions	0.0	0.0	0.0	0.0	0.0	0.0
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<p>Context</p>	<p>International travel restrictions and quarantine requirements have been implemented to reduce the risk of imported cases of COVID-19.</p> <p>To date Australia’s experience shows up to 2 per cent of international travellers are symptomatic on arrival or test positive for COVID-19 during quarantine. This will be higher for arrivals from some countries.</p> <p>Restrictions to international travel, as well as individual Australian state and territory quotas for international flight arrivals, mean that a dedicated national response is required to facilitate the return, and quarantine, of Australians and permanent residents who wish to return to Australia as soon as possible. This includes visa holders who are immediate family members of Australians.</p> <p>The parties agree to establish a Centre for National Resilience to quarantine Australian repatriations over the period 23 October 2020 until the Schedule end date to:</p>																																										

	<p>a) Allow Australians to return home as soon as possible;</p> <p>b) Rebuild our economy through increased economic opportunities; and</p> <p>c) Continue to protect Australians from any transmission of COVID-19 from returning Australians.</p> <p>The Centre falls under the Emergency Management legislated structure for all emergencies in the Northern Territory, accordingly the Centre reports through the Incident Controller of the Emergency Operations Centre reporting to the Territory Controller. The Northern Territory Government will administer a single governance and operational model for the entire Centre for National Resilience at Howard Springs. The National Critical Care and Trauma Response Centre (NCCTRC), reporting to the Northern Territory Emergency Operations Centre, will initially lead, operate and manage the increase to the maximum 2,000 returning Australians a fortnight on a rolling basis through its Australian Medical Assistance Teams (AUSMAT) clinical and operational model. Ongoing management and responsibility will be safely transitioned to a new Northern Territory Public Health System and Emergency Operations Centre led operation, with an operating model that maintains strong clinical governance.</p> <p>It is expected that returning Australians will need to be quarantined for a minimum of 14 days to cover the incubation period for COVID-19. It is recognised that for some individuals quarantine arrangements may need to continue beyond the minimum period and that a different period of quarantine may be specified in future by the Northern Territory Chief Health Officer informed by Australian Health Protection Principal Committee (AHPPC) advice for people returning from some countries.</p> <p>The parties agree that capacity at the Centre for National Resilience will also be required for other programs outside of this Schedule, including quarantining of some travellers from international locations, interstate and remote communities. The parties must agree in writing programs that may impact the capacity to quarantine repatriated Australians under arrangements other than the Organised National Repatriation of Australians.</p> <p>This arrangement does not replace other state and territory commercial international arrival or interstate quarantine arrangements.</p>
Objective	<p>The objective of this Schedule is to provide financial assistance from the Commonwealth to the Northern Territory for the costs incurred in providing quarantine accommodation and other services, including necessary hospital services, to repatriated Australians.</p>

	<p>The parties note that the initial use of the agreement is for the repatriation of vulnerable Australians facilitated by the Commonwealth.</p>
Principles	<p>Quarantine arrangements at the Centre for National Resilience will operate under Northern Territory law and emergency management arrangements, together with relevant Commonwealth legislation including the <i>Biosecurity Act 2015</i>.</p> <p>Further, quarantine arrangements at the Centre will align with the AHPPC statement on Australia’s National Hotel Quarantine Principles (noting these will be reviewed on an ongoing basis). These principles support the implementation of recommendations from the Halton National Review of Hotel Quarantine, the Victorian Hotel Quarantine Inquiry Final Report and the Finkel National Contact Tracing Review.</p> <p>Arrangements will ensure consistency with Australia’s COVID-19 objectives, which are to:</p> <ul style="list-style-type: none"> <li>a) prevent and control the spread of COVID-19 in Australia, and</li> <li>b) ensure good health outcomes (including mental health) for quarantine residents, workforce and the community.</li> </ul>
Responsibilities	<p>To support the Northern Territory to deliver the COVID-19 quarantine for Organised National Repatriation of Australians entering the Northern Territory, the Commonwealth will be responsible for:</p> <ul style="list-style-type: none"> <li>a) Providing funding to the Northern Territory to meet the requirements of this Schedule.</li> <li>b) Ensuring logistical information on Australian Government arranged flights regarding returning Australians is available to the Northern Territory Government. <ul style="list-style-type: none"> <li>i. Best endeavors will be made to provide information on any health-specific information such as COVID-19 infection status or other relevant conditions or needs,</li> <li>ii. Information in advance to be provided on intended place of residence post quarantine.</li> </ul> </li> <li>c) Supporting the Northern Territory at point of arrival, and in the security and patrol of the Centre for National Resilience, with resources from the Australian Federal Police and Australian Defence Force. <ul style="list-style-type: none"> <li>i. The Northern Territory will retain operational lead.</li> <li>ii. The Australian Federal Police will assist the Northern Territory Police Force with uniform patrol and law enforcement resources.</li> <li>iii. The Australian Defence Force will assist the Northern Territory with quarantine compliance and safety.</li> </ul> </li> </ul>

- d) Supporting the Northern Territory Government in accessing personal protective equipment (PPE) through the National Medical Stockpile. This assistance will be provided in instances where the Northern Territory is experiencing immediate shortages or significant difficulties in acquiring their own PPE.
- e) Facilitating, additional surge health workforce support if required at the Centre for National Resilience including through the deployment of AUSMAT and other workforce strategies.
  - i. The parties note that should there be insufficient resources to support a safe model with the expansion of numbers, a review of the potential intake will be undertaken.
- f) Provide support to individuals to access Australian Government support payments and services where they are eligible to receive them, to returning Australians while they are quarantining.

The Northern Territory Government will be responsible for:

- a) Repatriated Australians' health (physical and mental), welfare, meals, security and quarantine needs.
- b) Quarantining Australians returning from overseas for a minimum of 14 days subject to regular COVID-19 testing in quarantine, as per AHPPC/Communicable Diseases Network Australia (CDNA) guidelines.
- c) Ensuring all Australians repatriated under these arrangements are primarily accommodated at the Centre for National Resilience, noting that the Northern Territory Chief Health Officer may direct a repatriated Australian be accommodated at another location/s (such as a hospital) depending on operational and health requirements.
- d) Ensuring that the Centre for National Resilience provides accommodation, meals, health facilities and amenities at an appropriate standard and separate to other programs outside this agreement.
- e) Facilitating the arrival of repatriated Australians through the Darwin International Airport.
- f) Logistical support and planning for transfer of Australians, once in Australia to the Centre for National Resilience and, following quarantine, from the Centre for National Resilience to relevant transport or other services to enable transfer to their place of residence.
- g) Collecting contact information to support, and assist with, any future contact tracing requirements, should it be required.



	<p>h) Establishment, delivery and ongoing management of the Centre for National Resilience, including the Capital Works and Activities outlined at <u>Appendix A</u>. Parties note that operational decisions may impact capital works requirements over the life of the agreement, requests for major capital works (over \$100,000) will be agreed in advance in writing.</p> <p>i) Providing access to health services, including hospital and primary care services and other health services for non-COVID related issues which require immediate action (such as dental or maternity services),</p> <p style="padding-left: 40px;">i. The full cost of these health services to be reimbursed to the Northern Territory Government where they are not already claimed through existing Commonwealth programs (refer to the 'Payments' section of this Schedule).</p> <p>j) Providing access to hospital services for any issues which require immediate action including but not limited to the diagnosis and treatment of COVID-19.</p> <p>k) Providing access to mental health support for residents and staff.</p> <p>l) Providing access to medical supplies, including medicines, pharmaceuticals, PPE, consumables to ensure adequate health services;</p> <p>m) Provision of personal medicines and other medical supplies to residents where self-administration is allowed under normal directions;</p> <p>n) Ensuring on-site medical supplies have appropriate security and access arrangements.</p> <p>o) Providing regular updates on the delivery of activities under this Schedule as outlined under the section on Reporting.</p> <p>The parties will jointly be responsible for:</p> <p style="padding-left: 40px;">a) Working together and with other jurisdictions to support the transfer of seriously ill patients that require acute services unable to be provided within the NT's capability or capacity. Transfer principles have been agreed by all Health Chief Executive Officers in each state and territory and contact lists circulated to support arrangements.</p>
Requirements	<p><b>COVID-19 PUBLIC HEALTH BEST PRACTICE</b></p> <p>The Northern Territory Government will:</p> <p>a) Ensure guidelines, management plans, operation of the Centre for National Resilience and the delivery of services complies with advice of the AHPPC (and its sub-committees) and Northern Territory Public Health; including the recommendation that all staff</p>

	<p>working in a quarantine setting undertake daily saliva testing and weekly PCR testing of quarantine workers.</p> <p>b) Implement infection prevention and control arrangements (physical distancing, use of PPE, hand hygiene and cohorting) that comply with the national infection control guidelines and guidance published by the Infection Control Expert Group.</p> <p>c) Ensure appropriate levels of PPE are available for use in all aspects of supporting the arrangements of this Schedule, including transfer to the Centre for National Resilience, on the Centre for National Resilience, and for use by both staff and residents.</p> <p>d) Provide regular health checks of residents by appropriately qualified health staff in order to support early detection of COVID-19.</p> <p style="padding-left: 40px;">i. All arrivals identified with symptoms consistent with COVID-19 as identified in the CDNA Series of National Guidelines (SoNG) will be isolated and managed as a suspected case.</p> <p>e) Provide appropriate COVID-19 testing for both residents and staff, with timely turnaround of results within 48 hours.</p> <p style="padding-left: 40px;">i. Symptomatic individuals should be tested immediately and placed into isolation while waiting for results.</p> <p style="padding-left: 40px;">ii. Testing will be conducted at day 0–2 and again on day 10–12 of the quarantine period in accordance with the CDNA SoNG – results from the exit test must be negative before an individual is released from quarantine.</p> <p>f) Ensure appropriately qualified staff and staffing levels at the Centre for National Resilience on a 24 hours, seven days a week basis, both for general and medical and clinical staff:</p> <p style="padding-left: 40px;">i. All staff required by Northern Territory law to have a working with children check and have a current clearance in place.</p> <p>g) Ensure all staff are provided with appropriate induction and training arrangements, including infection control, appropriate use of PPE, hand hygiene, work health and safety requirements and any other legislative requirements.</p> <p>h) Provide transfer and repatriations for seriously ill patients with COVID-19, or for other emergency purposes, to an appropriate acute facility. This includes internal within the Centre for National Resilience or domestic transfer for medical purposes.</p>
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	<p><b>QUARANTINE FACILITY REQUIREMENTS</b></p> <p>The Northern Territory in the provision of a quarantine facility will ensure that the Centre for National Resilience has the:</p> <ul style="list-style-type: none"> <li>a) Ability to cohort residents according to risk, including identified vulnerable groups.</li> <li>b) Complete physical separation of international travellers returning under this agreement with other quarantine residents.</li> <li>c) Space to allow sufficient physical separation between individuals and cohorts, noting adjustments may need to be made in line with the latest health advice.</li> <li>d) Ability to house families together and accommodate very young children.</li> <li>e) Space to operate suitable medical facilities and related activities including testing, resuscitation and ambulance transfer.</li> <li>f) Capacity to accommodate both COVID-19 positive cases with mild symptoms, and individuals who have other mild health conditions, noting that the best location will be determined by the clinician managing the case, in line with the Northern Territory Chief Health Officer directions and any agreed referral mechanisms.</li> <li>g) Self-contained units which are well-ventilated with separate, non-communal amenities.</li> <li>h) Appropriate capacity and infrastructure to allow residents to receive health assistance, particularly in an emergency situation.</li> </ul>
	<p><b>OPERATIONAL PLANNING AND SERVICE DELIVERY</b></p> <p>The Northern Territory in planning and delivering a quarantine facility at the Centre for National Resilience will embed the system performance good practice which is outlined in the Halton Review of Hotel Quarantine and AHPPC guidance. Similarly, the Northern Territory will ensure the establishment and operation of the facility meets requirements as agreed between both parties and set out in operational plans which have been derived from national guidance.</p> <p>The Northern Territory will ensure it has the following operational and risk management plans in place.</p> <ul style="list-style-type: none"> <li>a) COVID-19 testing requirements for quarantined individuals.</li> <li>b) COVID-19 transferral plan – for moving large cohorts of individuals to the facility/airport</li> <li>c) Site specific infection prevention and control plan.</li> <li>d) Staffing requirements and protocols, including necessary medical and clinical staff, other staffing needs and appropriate ratios. The following must be taken into account in staffing planning:</li> </ul>



	<ul style="list-style-type: none"> <li>i. Staff working at a site with an outbreak should work with one cohort only and should not attend work at other locations or facilities for the duration of the outbreak.</li> <li>ii. Staff should not move between groups in isolation (positive COVID-19 test) and those in quarantine.</li> <li>iii. All staff must be regularly screened for symptoms in addition to participating in testing as required by AHPPC, National Cabinet and the Northern Territory Chief Health Officer.</li> </ul> <p>e) To respond to a COVID-19 infection occurring across cohorts and into the general community:</p> <ul style="list-style-type: none"> <li>i. Outbreak management plan – strategies to limit infection transmission in the event of an outbreak.</li> <li>ii. Retrieval management plan – for transferring large cohorts if the health system is overwhelmed.</li> </ul> <p>f) For the purposes of managing the Centre for National Resilience:</p> <ul style="list-style-type: none"> <li>i. A comprehensive risk assessment plan, including adequate mitigation strategies.</li> <li>ii. A site operational plan, which includes an emergency response and emergency evacuation plan.</li> </ul>
Compliance	<p><b>COVID-19 AUDITING</b></p> <p>The Northern Territory will conduct regular auditing of arrangements undertaken to reduce transmission of COVID-19 to the general community, staff and returning Australians.</p> <p>Auditing should occur at minimum on set up and every three months, with ongoing adjustments as required.</p> <p>The Australian Government will also undertake a review at set up (completed on 28 October 2020) and every three months, specifically in relation to infection control plans and activities and against the system performance good practice which is outlined in the Halton Review of Hotel Quarantine and AHPPC guidance, and the Northern Territory will implement any recommended changes that come out of these reviews.</p> <p>The Northern Territory will make any necessary adjustments to ensure arrangements have ongoing effectiveness at stopping and reducing COVID-19 transmission rates based on latest AHPPC advice.</p> <p><b>CAPITAL WORKS</b></p> <p>The Northern Territory will undertake compliance with the Building Code 2016 for any relevant capital works undertaken under this Schedule, including:</p>

	<p>a) Ensuring that only a builder or builders accredited under the Australian Government Building and Construction Work Health and Safety Accreditation Scheme is contracted, and providing the necessary assurances to the Commonwealth;</p> <p>b) If tendering capital works, it is a condition of tender for all contractors and subcontractors performing building work to be accredited under the Australian Government Building and Construction Work Health and Safety Accreditation Scheme and to provide the necessary assurances to the Commonwealth;</p> <p>c) For practical completion of capital work, the works must:</p> <ul style="list-style-type: none"> <li>i. be complete and free from defects or omissions, except for defects or omissions that are minor in nature, that the Northern Territory Government cannot reasonably fix, or by fixing, will significantly inconvenience users of the works;</li> <li>ii. Not cause legal or physical impediment to the use and occupation of the property and the works for designated use; and</li> <li>iii. Be fit for the designated use.</li> </ul> <p><b>FOOD SAFETY</b></p> <p>In the delivery of food preparation and catering services, the Northern Territory must ensure services comply with the <i>Food Standards Australia New Zealand Act 1991 (FSANZ Act)</i>.</p> <p><b>ENVIRONMENTAL HEALTH PROTECTION</b></p> <p>In delivering any services, such as waste management, cleaning and food safety and delivery to comply with the relevant standards under the <i>National Environment Protection Council Act 1994</i>.</p>
<p>Payments</p>	<p><b>Payment Principles</b></p> <p>The Commonwealth will provide funding to cover the costs incurred by the Northern Territory for activities under this Schedule and set out in <u>Appendix A</u>, made as part of the four components outlined below. This includes services provided to the individual if they require access outside of the facility or need to be transferred.</p> <p>The capital works carried out under this Schedule will be outlined in a plan developed by the Northern Territory Government and agreed by the Commonwealth. All infrastructure covered under this payment is to be limited to the needs of accommodating various cohorts of up to 2,000 returning Australians per fortnight and medical facilities required to support repatriated Australians, noting that this will include any</p>

necessary upgrades to other facilities at the Centre required to support the quarantine of returning Australians .

For the purposes of this Schedule, any upgrades to the on-site swimming pool are out of scope of Commonwealth funded capital works.

The Northern Territory is unable to claim any costs for services or capital works which will solely support the delivery of their own quarantining programs at the Centre for National Resilience.

Additional activities will be funded where the Commonwealth directs the Northern Territory to undertake a particular activity at the Centre for National Resilience.

If the Northern Territory is required to undertake an activity outside of the scope of this Schedule, the Northern Territory must first obtain written agreement of the Commonwealth by a senior executive of the Department of Health to fund the activity (if funding is required).

Payments under this Schedule will be made under one of four components:

#### **1. The Upfront Payment Component**

The Commonwealth has provided an initial payment of \$14.2 million as the "Upfront Payment". In variation to the agreement to 2,000 persons an additional upfront payment of \$5.15m will be provided to the Northern Territory. The purpose of the Upfront Payment is to cover an initial schedule of agreed capital works required to ensure the accommodation and on ground infrastructure is up to standard, commencement of recruitment strategy and sufficient cash flow to cover any upfront or immediate costs experienced by the Northern Territory in delivering its responsibilities under the Schedule.

One fifth of the amount of the Upfront Payment will be deducted from the total monthly payments made under the other three components for the December, January, February, March and April monthly payments.

#### **2. The Capital Expenditure Component**

The Commonwealth will provide monthly funding to the Northern Territory for the necessary capital expenditure the Northern Territory incurs in fulfilling its responsibilities under the Schedule, and where that capital expenditure has been agreed by the Commonwealth as being in-scope and in accordance with the Agreement.

The Commonwealth will pay the Northern Territory 100 per cent of the cost of this agreed in-scope capital expenditure, known as the "Capital

Expenditure Component”, adjusted as necessary to comply with the Payment Principles.

### **3. The Health Services Component**

The Commonwealth will provide monthly funding to the Northern Territory for the provision of all health and hospital services to this cohort of nationally repatriated quarantined residents of the Centre for National Resilience, regardless of the location of the services provided and for the duration of the stay, and regardless of which jurisdiction delivers the service.

The Commonwealth will pay the Northern Territory 100 per cent of the cost of these health and hospital services, known as the “Health Services Component”, with the exception that the Commonwealth will not fund services through this Schedule if the same service, or any part of the same service, is claimed through the National Health Reform Agreement, the Medicare Benefits Schedule, the Pharmaceutical Benefits Scheme, or any other Commonwealth program.

The Health Services Component will consist of two components: the in-scope Activity and the out-of-scope Activity.

#### In-Scope Activity

For health services consisting of activities that would normally be in-scope for NHRA funding (even if those activities are delivered to individuals that would be out-of-scope, such as Medicare ineligible people), the calculation of the Health Services Component in-scope activity will be as follows:

- a) *(National Efficient Price (NEP) for the financial year the service is delivered in) x (National Weighted Activity Units (NWAU) of the activity delivered) x (Royal Darwin Hospital Cost ratio as calculated by the Independent Hospital Pricing Authority for the relevant period)*

The Northern Territory will provide the Commonwealth and the Administrator of the National Health Funding Pool sufficient data and reporting to allow any services funded under the Health Services Component to be excluded from being funded under the National Health Reform Agreement and/or the National Partnership on COVID-19 Response.

The Northern Territory will ensure that any services funded under the Health Services Component be reported in a manner that complies with the National Health Funding Body and the Independent Hospital Pricing Authority’s three year data plans.

	<p>This is to ensure that a health and hospital service is only funded once, in part or in full, by the Commonwealth, consistent with the National Health Reform Agreement.</p> <p>As part of the final reconciliation of payments under the Schedule, the Commonwealth and the Northern Territory will review whether the provision of health services under the Schedule has negatively impacted the Northern Territory’s funding entitlements under the National Health Reform Agreement in 2021-22 and 2022-23, and if necessary work together with the Administration of the National Health Funding Pool to ensure remedial adjustments are made.</p> <p>The intent of this is to guarantee the NT 2021-22 and 2022-23 NHRA starting base amount and the NT soft cap dollar amounts will be adjusted to account for excluded Activity Based Funding activity that is claimed in this agreement over 2020-21 and 2021-22.</p> <p>The guarantee in 2021-22 and 2022-23 will adjust the starting base dollar amount by:</p> <ul style="list-style-type: none"> <li>a) Volume change: NWAU excluded in 2021 multiplied by NEP20 multiplied 45%.</li> </ul> <p style="padding-left: 40px;">Plus</p> <ul style="list-style-type: none"> <li>Price change: NWAU excluded in 2020-21 and 2021-22 multiplied by indexation (NEP21-NEP20) multiplied by 45%.</li> </ul> <p><u>Out-of-scope Activity</u></p> <p>For health services consisting of activities that would not normally be in-scope for NHRA funding (such as non-admitted alcohol and drug treatment services), the amount of the Health Services Component which is out-of-scope activity will be the actual costs incurred by the Northern Territory Government in providing these services.</p> <p><b>4. The Facility Operation Component</b></p> <p>The Commonwealth will provide monthly funding to the Northern Territory for all other expenses the Northern Territory incurs in fulfilling its operational responsibilities under the Schedule that are not already funded as part of the Capital Expenditure Component or the Health Services Component.</p> <p>The Commonwealth will pay the Northern Territory 100 per cent of the cost of this agreed operational expenditure, known as the “Facility Operation Component”, and adjusted as necessary to comply with the Payment Principles.</p>
Payment Mechanism	The Upfront Component was paid in December 2020 following the commencement of the Schedule.



The Capital Expenditure Component, the Health Services Component and the Facility Operation Component of the agreement will be paid on a monthly basis commencing from November and lasting until the expiration of the Agreement, in a combined single payment known as the "Monthly Payment".

The Monthly Payment will be made in arrears through monthly payments, based on the monthly payment requests provided by the Northern Territory and in accordance with the payment arrangements under the Intergovernmental Agreement on Federal Financial Relations.

In addition, the Northern Territory will be required to submit to the Commonwealth its payment request for the Monthly Payment by no later than the 14th day of the prior month, ("the Monthly Payment Request").

As part of the Monthly Payment Request, the Northern Territory will separately identify the Capital Expenditure Component, the Health Services Component, and the Facility Operations Component.

For each of these three components, the Northern Territory will provide evidence demonstrating their actual incurred costs in delivering the activities funded under each of the components. The provision of this evidence will not be unduly burdensome on the Northern Territory, but will be sufficient to demonstrate the actual costs incurred by the Northern Territory in delivery of the services agreed in the Schedule.

This requirement to demonstrate actual incurred costs will not apply to the in-scope activity of the Health Services Component. This requirement will instead be replaced with the process and of the formula described under the Health Services Component section of the Schedule.

Provided the Commonwealth accepts this evidence as sufficiently robust, and in accordance with the intent and scope of the Schedule, the Commonwealth will then provide the Northern Territory with the funds for these costs, minus the deduction of the Upfront Component.

Where the Commonwealth feels there is insufficient evidence of costs incurred, or whether costs are in accordance with the intent and scope of the Schedule, it will raise this concern through the agreed dispute resolution mechanisms of the Schedule.

#### **Fee for quarantine services**

The Commonwealth will be responsible for charging a fee to individuals being quarantined at the Centre for National Resilience after returning on a flight facilitated by the Commonwealth.

	<p>The Commonwealth will be responsible for generating an invoice for the fee and collecting this fee from each individual for their quarantining. This charge will be \$2,500 per person or \$5,000 per family. The Commonwealth will ensure there are arrangements for individuals who may experience financial hardship as a result of this fee.</p> <p>The Commonwealth, on behalf of the Northern Territory, will be responsible for provision of an invoice to the individual following their quarantine at the Centre for National Resilience. The Northern Territory will provide the Commonwealth with the resident information collected, as part of contact tracing requirements, within two days of each cohort arriving to enable timely invoicing.</p>
Reporting	<p>The Northern Territory will provide regular reports to the Joint Steering Committee on the health and wellbeing of quarantined residents and any health services provided to quarantined residents (including COVID-19 testing).</p> <p>The Northern Territory will also immediately notify the Joint Steering Committee of any positive COVID cases and hospitalisations. On completion of the transition to a single governance and operational model of the Centre a daily situation report must be provided to the Commonwealth. In the interim, a situation report must be provided within the first 24 hours of each flight arrival. Further, a weekly situation report on the facility and all residents, including COVID positive resident data confirmed by CDNA, will be received.</p> <p>For any potential or actual outbreaks of COVID-19 not contained within a cohort and spreading either within the facility or into the general community, immediate notification is required.</p>
Review	<p>A preliminary review of operational arrangements occurred through the assessment of the Centre for National Resilience's proposal to increase capacity in December 2020, this included implementing adjustments to safely expand capacity.</p> <p>Further reviews will be undertaken on a three monthly basis following the initial assessment.</p> <p>Any significant adjustments will be reported to the signing Ministers for both the Commonwealth and the Northern Territory.</p>
Dispute Resolution	<p>Any dispute or disagreement over the application of the Schedule, including operational and funding issues, will be raised and escalated through this Joint Steering Committee.</p> <p>If a dispute cannot be resolved by the officials of the Joint Steering Committee, it may be escalated to relevant Chief Executive Officer (or</p>

	Secretary) of the lead departments; and then if unable to be resolved Relevant Ministers.
Variation	Variations to this Schedule may only be made by written agreement of both parties.

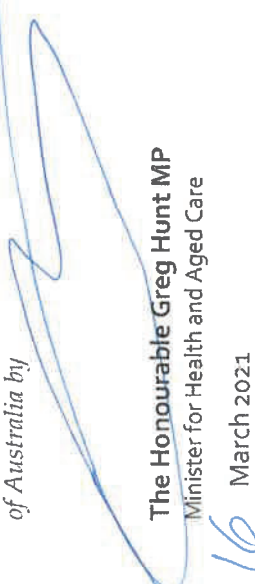
**Table 2: Performance requirements, reporting and payment summary**

Output	Performance milestones	Report due	Payment
Activities are outlined in Appendix A.	Upfront payment – based on the Northern Territory Government report on initial financial assistance to ensure the Centre for National Resilience is up to standard and has the services operational for the intake of the first cohort	N/A	Execution
	Monthly payments based on actuals	N/A	Monthly

The Parties have confirmed their commitment to this schedule, a variation to the October 2020 schedule, as follows:

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

*Signed for and on behalf of the Northern Territory by*



**The Honourable Greg Hunt MP**  
Minister for Health and Aged Care

16 March 2021



**The Honourable Natasha Fyles MLA**  
Minister for National Resilience

March 2021

**15 MAR 2021**

## Appendix A –In-scope activities

### Capital works to support 2,000 returning Australians per fortnight

- It is noted that the facility is relatively modern and generally in good condition. However, some capital improvements may be required to accommodate Australians repatriated by the Commonwealth.
- Capital works will be funded to upgrade the Centre for National Resilience to standard, these may include but are not limited to:
  - Activation of additional accommodation to support up to 2,000 returning Australians per fortnight, including increased mobility assisted and family rooms
  - Demountables providing multiple medical and administration hubs
  - Mobilisation of medical centre and laboratory demountable
  - Pathology infrastructure to support increased testing requirements
  - Lighting upgrades
  - Kitchen and dining upgrades
  - Cyclone related infrastructure, including generators to enable ongoing power to accommodation facilities
  - Storage facilities and maintenance areas to support increased operations
  - Pathways, access points and awnings
  - Temporary demountable buildings to support the delivery of health services –such as a clinic
  - Security surveillance upgrades – such as CCTV and camera monitoring trailers
  - Environmental controls - heating, cooling and to ensure fresh air circulation
  - Disability and mobility supports
  - Construction of temporary and/or permanent fencing
  - Essential service infrastructure and repairs including door locks/swipe card reading systems, ICT systems and assets, WiFi, telecommunications, water, electricity and sewerage infrastructure
  - Water chlorination plant
  - Laundry operations
  - Installation of additional media converters
  - Carpark upgrades
- Capital works are automatically in scope where they are minor (up to \$100,000) per activity such as painting etc.
- Any major capital works (over \$100,000) need to be approved by the Commonwealth Department of Health in writing prior to works commencing.



### Activities:

- Provision, capacity and maintenance of ICT systems and assets
- Provision, capacity and maintenance of broadband services, such as WiFi, telephones
- Provision of essential services (water and electricity)
- Provision of linen
- Provision of consumables (such as toiletries)
- Provision of small electrical appliances in room – such as TV and Kettles.
- Provision of toys and recreational activities for children
- Provision of additional furniture for families with infant children, such as cots and linens, prams
- Provision of consumables for families with infants such as nappies and formula
- Provision of disability and mobility supports
- 24 hour security of the site – site access control and patrolling, with support provided by the Commonwealth (refer to Commonwealth responsibilities)
- Catering and food provision, including delivery of catering to accommodation facilities
- Provision of personal hygiene facilities and consumables;
- Waste management services (standard and biohazard/medical)
- Cleaning of rooms and common areas with adherence to infection control guidelines
- Provision of laundry services
- Facility management including:
  - Building and room maintenance
  - Ground maintenance
- Provision of fire services
- Provision of transport services while an individual is in quarantine, this could include transport to and from the facility, internal to the facility, or for travel outside the facility, such as for medical purposes (including for interstate medical transfer)
- Staff recruitment, induction and training programs, including infection control training and a nation-wide recruitment campaign to supplement the Northern Territory health workforce
- Mental health services– for quarantine residents and staff
- Hospital services
- Health services including but not limited to:
  - Pathology
  - Primary care services
  - Alcohol and drug services

- Dental services
- Maternity services
- Occupational therapy / disability supports etc
- Facilitating access to welfare services and support.

Other

- Administrative component including but not limited to invoicing, data, reporting and compliance, operational supports and administration.

**Note** – any activities that are claimed under the National Partnership on COVID-19 response do not form part of this Schedule. For example, any PPE that has been claimed under the National Partnership is not eligible to also be funded under this Schedule. Similarly, any service, or part of a service, that is claimed through any other Commonwealth program is not eligible to be receive a Commonwealth funding contribution via this agreement.