Schedule Health - D

Addressing Blood Borne Viruses, Sexually Transmissible Infections and other Communicable Diseases in the Torres Strait Islands

FEDERATION FUNDING AGREEMENT - HEALTH

Table 1: Fo	rmalities and operation of schedule
Parties	Commonwealth Queensland
Duration	This Schedule will expire on 30 June 2028, or upon completion of the initiative, including final performance reporting and processing of final payments against milestones. See Table 2.
Purpose	This Schedule will support the delivery of communicable disease testing, treatment, prevention and education activities to the entire Torres Strait region, with high priority given to at risk populations, including for blood borne viruses (BBV) and sexually transmissible Infections (STI) to: a) Inform the delivery of health services that are responsive to current
	 and emerging communicable disease risks in the Torres Strait. b) Reduce the prevalence of blood borne viruses (BBV) and sexually transmissible Infections (STI) in the Torres Strait, namely HIV, hepatitis B, hepatitis C, chlamydia, gonorrhea, syphilis and trichomonas in line with the five National Strategies for Blood Borne Viruses and Sexually Transmissible Infections 2024-2030.
	 c) Address vaccine preventable diseases, including hepatitis B and rotavirus infection in the Torres Strait.

Estimated financial contributions

The Commonwealth will provide an estimated total financial contribution to Queensland of \$4.48 million in respect of this Schedule.

Table 1					
(\$ million)	2024-25	2025-26	2026-27	2027-28	Total
Estimated total budget	1.12	1.12	1.12	1.12	4.48
Less estimated National Partnership Payments	1.12	1.12	1.12	1.12	4.48
Balance of non-Commonwealth contributions*	0.0	0.0	0.0	0.0	0.0

Additional terms

For the purposes of this agreement Queensland will ensure that:

- a. Testing will include re-testing, contact tracing and antenatal testing, as clinically appropriate, of individuals at risk of communicable diseases, with the aim of annual increases in testing rates.
- b. Best practice clinical management and treatment of communicable diseases will include:
 - o provision of access to advancements in treatment; and
 - o treatment of new positive diagnoses with a communicable disease within one week of diagnosis or within clinically appropriate times based on clinical management guidelines.
- c. Immunisation services will comply with Queensland's immunisation guidelines and schedules including for hepatitis B and rotavirus immunisation.
- d. Delivery of education activities will include culturally safe community health education activities, at least twice yearly to each Torres Strait Island, aimed at increasing awareness of communicable diseases; promoting safe sexual behaviours, safe drug injecting behaviours; encouraging health-seeking behaviours and resilience; and eliminating stigmatising and discriminatory behaviours that affect access to testing and treatment for communicable diseases.
- e. The Parties agree that for the purposes of this agreement at risk populations include Torres Strait Island residents under 30 years; people who inject drugs; people in custodial settings; gay men and men who have sex with men; sistergirls and brotherboys; transgender people; people living with viral hepatitis and HIV; and sex workers.
- f. Queensland will ensure the Commonwealth is provided with contemporary information about the workplan for the delivery of communicable disease testing, treatment, prevention and education

^{*}Queensland is contributing funds to the initiative; the specific amount is guided by service demand, therefore an exact figure cannot be provided.

- activities under this Schedule (see Table 2) and consult the Commonwealth as soon as practicable of any significant deviations from agreed work plan.
- g. Queensland will ensure annual reports provided in accordance with Table 2 include a description of actual performance against the workplan (and the performance measures included in the workplan) and include details of any matter(s) that have arisen which could adversely impact on the delivery of the output, and how Queensland proposes to resolve this/these matter(s).
- h. The Parties agree and commit to participating in Biannual Teleconferences in the last week of May and November each year, until the completion of this Schedule, to discuss progress and identify any arising issues.
- i. The National Health Reform Agreement (NHRA) provides that the Commonwealth will not fund a service where the same service, or any part of the same service, is otherwise funded by the Commonwealth. Queensland will ensure that any claim for funding under the NHRA is not funding services, or any part of a service, provided for under this agreement and will maintain appropriate records.
- j. The Health Insurance Act 1973 prohibits the payment of Medicare benefits where other government funding is provided for that service. Queensland will ensure any agreement for the provision of services using funding under this agreement recognises the operation of the Health Insurance Act 1973.

Table 2: Performance requirements, reporting a	and payment summary		
Output	Performance milestones	Report due	Payment
Delivery of communicable disease testing, treatment, prevention and education activities to the entire Torres Strait region, with high priority given to at risk populations.	Provision of a plan for the delivery of communicable disease testing, treatment, prevention and education activities for the 1 July 2024 to 30 June 2028 period, including baseline data for the target populations and relevant performance measures through which success will be assessed. The baseline data will include data for communicable disease status (particularly for HIV, hepatitis B, hepatitis C, chlamydia, gonorrhoea, syphilis and trichomonas), as well as information about existing access to testing (including testing rates), existing prevention and education activities.	30 days after execution of the agreement.	\$0.02M
	Provision of an annual performance report on services and activities delivered over the 1 April 2024 to 31 March 2025 period against the workplan.	30/04/2025	\$1.10M
	Provision of an annual performance report on services and activities delivered over the 1 April 2025 to 31 March 2026 against the workplan.	30/04/2026	\$1.12M
	Provision of an annual performance report on services and activities delivered over the 1 April 2026 to 31 March 2027 period against the workplan	30/04/2027	\$1.12M
	Provision of a final performance report on services and activities delivered over the 1 April 2027 to 31 March 2028 period against the workplan	30/04/2028	\$1.12M
	Provision of a high-level evaluation report on health services and activities delivered over the four-year funding period, 1 July 2024 to 30 June 2028, including the outstanding months in the last reporting period. This should include overall data on communicable disease	Within go days of the completion of the project - 30/09/2028	Ī

, hepatitis C,	ichomonas),	esting (including	Fprevention and	also provide an	benefits and	this schedule.
status (particularly for HIV, hepatitis B, hepatitis C,	chlamydia, gonorrhoea, syphilis and trichomonas),	information about existing access to testing (including	testing rates), and the current status of prevention and	education activities. The report should also provide an	overall assessment of lessons learned, benefits and	outcomes arising from activities under this schedule.
status (pa	chlamydi	informati	testing ra	education	overall as	outcome

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

Signed for and on behalf of the Commonwealth of

Australia by

The Honourable Mark Butler MP Minister for Health and Aged Care

19/11/2024

Signed for and on behalf of the State of Queensland by

The Honourable Tim Nicholls MP

Minister for Health and Ambulance Services

20/1/ 2024 25