Schedule

Strengthening Medicare – Supporting Older Australians (Western Australia) FEDERATION FUNDING AGREEMENT - HEALTH

Table 1: Form	alities and operation of schedule			
Parties	Commonwealth and Western Australia			
Duration	This Schedule is expected to expire on 30 October 2028 or upon completion of the initiative(s), including final performance reporting.			
Purpose	This agreement's objective is to support older people who are or are atrisk of becoming long stay older patients by:			
	 avoiding hospital presentation and admission; 			
	 where hospital admission is necessary, reducing the length of the in-hospital stay; 			
	 supporting earlier discharge; and 			
	 improving the transition out of hospital to other appropriate care. 			
	This Schedule will support the delivery of:			
Residential Respite Pilot				
	Continue and expand the pilot of one-off supplement payments to residential aged care homes to provide temporary respite care to older patients waiting in public WA hospitals, while completing decision making or financial and/or administrative processes, before moving to long term aged care support, enabling earlier discharge.			
	 Hospitalisation Avoidance Program (HAP) 			
	Provision of multidisciplinary care and in-reach services for older patients suited to care in a home-based setting, preventing avoidable hospital presentation and admissions and earlier discharge. This will include implementation of the HAP in Broome and continued support of other regional sites at Albany, Geraldton and Bunbury Hospitals.			
	 Community Health in a Virtual Environment (Co-HIVE) Expansion Expand specialist-led virtual services that provide coordinated clinical support to older people who reside in care settings outside the hospital in metropolitan Perth and South West region 			

	of Western Australia, hospital presentation discharge.					avoid
Estimated financial	The Commonwealth will provide an estimated total financial contribution to Western Australia of \$59.63m in respect of this Schedule.					
contributions	(\$ million)	2024-25	2025-26	2026-27	2027-28	Total
	Estimated total budget*	12.28	15.43	15.87	16.04	59.63
	Less estimated National Partnership Payments*	12.28	15.43	15.87	16.04	59.63
	Balance of non-Commonwealth contributions	0.0	0.0	0.0	0.0	0.0
	*Figures may not total due to roundi	ng.				
Additional terms	Western Australia will ensure the Commonwealth is provided with contemporary information about the expected delivery schedule for each project (expected major milestone delivery dates including completion) and advise the Commonwealth as soon as practicable of any significant deviations from agreed project plans. Initiatives delivered through this schedule will be targeted at older Australians aged 65 years and over, or 50 years and over for people widentify as Aboriginal and/or Torres Strait Islander. The Parties agree that information about the outputs delivered under this Schedule and an evaluation of their outcomes will be shared with states and territories by the Commonwealth. To inform continuous improvement, the Commonwealth will share data and insights with a states and territories in a timely manner and at least annually.			for le of er ole who onder with all		
	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. Western Australia 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. The Health Insurance Act 1973 prohibits the payment of Medicare benefits where other government funding is provided for that service. Western Australia will ensure any agreement for the provision of					
	services using funding under the Health Insurance Act 197	r this agre		_		

The Parties acknowledge their respective roles and responsibilities in supporting the provision of health and aged care for older Australians.

The Parties agree that Western Australia will undertake an evaluation of each initiative funded under this schedule. Western Australia will undertake best efforts to align with the nationally agreed evaluation plan (national evaluation plan) agreed for all initiatives funded through the Strengthening Medicare Supporting Older Australians investment. Western Australia will determine the methodology for data collection and scope of any additional evaluation criteria. Evaluation findings will be used to inform future policy and programs. The evaluation will assess effectiveness and efficiency of initiatives across the desired outcomes:

- to reduce avoidable hospital presentations and admissions of older people; and,
- where hospital admission is necessary for older people, to reduce the length of the in-hospital stay, facilitate earlier discharge, and improve their transition out of hospital to other appropriate care.

The Parties agree the Residential Respite Pilot initiative funding will serve to deliver one-off supplement payments to residential aged care homes, and trial a respite centre model and respite liaison role, supporting patients to discharge from hospital when clinically appropriate. The initiative will aim to achieve:

- Year 1:
 - 311 eligible patients receiving care with the objective of a
 5% increase in service utilisation, compared to 2023-24.
 - 20 patients supported with discharge from hospital into trial respite centres. Further evaluation of trial centres will be conducted to determine if the respite centres will be continued beyond Year 1.
- Year 2:
 - 326 eligible patients receiving care with the objective of a 10% increase in service utilisation for 2025-26, compared to 2023-24.
- Year 3:
 - 333 eligible patients receiving care with the objective of a 12.5% increase in service utilisation for 2026-27, compared to 2023-24.
- Year 4:

 341 eligible patients receiving care with the objective of a 15% increase in service utilisation for 2027-28, compared to 2023-24.

The Parties agree the Hospitalisation Avoidance Program initiative funding will serve to pilot HAP services at a new site in Broome and support the continued operation of HAP services at regional sites in Albany, Geraldton and Bunbury. The initiative will aim to achieve:

- Year 1: 3000 eligible patients receiving care, and delivery of 9000 care service events.
- Year 2: 3500 eligible patients receiving care, and delivery of 9500 care service events.
- Year 3: 4000 eligible patients receiving care, and delivery of 9500 care service events.
- Year 4: 4000 eligible patients receiving care, and delivery of 9500 care service events.

The Parties agree the Co-HIVE initiative funding will serve to expand services to an additional 85 Residential Aged Care Facilities (RACFs) in metropolitan Perth and establish mobile diagnostic services across the metropolitan area for RACF residents (Workstream 1), expand services to patients supported through the Residential Respite (Workstream 2) and establish services for frail older adults living in the community (Workstream 3). The initiative will aim to achieve the following service event¹ targets:

- Year 1:
 - Workstream 1: 800 service events
 - o Workstream 2: 10 services events
 - o Workstream 3: 100 service events
- Year 2:
 - o Workstream 1: 2000 service events
 - Workstream 2: 40 service events
 - Workstream 3: 300 service events
- Year 3:
 - o Workstream 1: 2400 service events
 - Workstream 2: 40 service events

¹ http://meteor.aihw.gov.au/content/index.phtml/itemId/652089

- o Workstream 3: 500 service events
- Year 4:
 - o Workstream 1: 2600 service events
 - o Workstream 2: 40 service events
 - o Workstream 3: 800 service events

Output	Performance milestones	Report due	Payment
Residential Respite Pilot Continue and expand the pilot of one-off supplement payments to residential aged care homes to provide short- term respite care to older patients waiting in WA hospitals, while completing decision making or financial and/or administrative processes, before moving to long term aged care support, enabling earlier discharge.	Provision of an Implementation Plan for the Commonwealth's approval detailing the continuation and expansion of funding to residential aged care to provide short-term care enabling earlier discharge for older people including: • An outline of the services offered through the existing Pilot. • Information about the Residential Aged Care Service/s through which services will be expanded and established, including activities undertaken to support expansion: • Details of trial for Respite Liaison role. • Outcomes from workshops on opportunities to improve patient flow with key stakeholders. • Information about the arrangements for the establishment, oversight and evaluation of the expansion of services including: • the expanded services to be provided (specifications); • information about patient eligibility criteria; • delivery milestones and anticipated phasing across all sites, • data collection, monitoring, evaluation, and reporting arrangements. • A program logic using the template provided by the Commonwealth. • An evaluation plan outlining the planned evaluation methodology for measuring initiative effectiveness and the agreed minimum evaluation criteria outlined in the national evaluation plan. • Collection of baseline data for initiative and in line with the agreed long stay older patient (LSOP) data indicators.	16 January 2025	\$1.100M
	Provision of a Progress Status Report for the Commonwealth's approval demonstrating the following: Progress against the implementation plan. Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan. Progress on the operationalisation of new residential respite site and respite liaison deployed to existing site. Number of patients receiving services monthly at all sites that accepted funding within the reporting period.	14 April 2025 (reporting period: 1/9/24-1/3/25)	\$1.100m

	 Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators outlined in the national evaluation plan, presented either month-by-month or quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned. 		
	Provision of an Annual Progress Report with delivery and data metrics for the Commonwealth's approval including: Progress against the implementation plan.	1 February 2026 (reporting period: 1/1/25-31/12/25),	\$2,200M
	 Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan. Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators, presented either month-by-month or 	1 February 2027 (reporting period: 1/1/26-31/12/26),	\$2.200M
	quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned.	1 February 2028 (reporting period: 1/1/27-31/12/27)	\$2.200m
	Provision of a Final Report for the Commonwealth's approval, including: A plan for long term management of residential respite patients after initiative funding ceases (including any recommendations and sustainable solutions to be implemented).	30 October 2028	Nil
	 An evaluation of the impact of the expansion of care services on long stay older patients against the initiative evaluation plan, based on the agreed minimum evaluation criteria outlined in the national evaluation plan. Cumulative data reporting on the agreed data indicators for duration of schedule 		
	 presented either month-by-month or quarterly. Outcomes of the initiative, key achievements and challenges, and lessons learned with supporting data where available. 		
Hospitalisation Avoidance Program (HAP)	Provision of an implementation plan for the Commonwealth's approval detailing expansion of hospitalisation avoidance activities in Broome and continuation of operations in Albany,	45 January 2007	\$2.184m
Provision of multidisciplinary care and in-reach services for older patients suited to care in a home-based setting, preventing	Geraldton and Bunbury Hospitals including: Identified target Local Hospital Network/hospital for Broome site. Information about the arrangements for the establishment, oversight and evaluation of the initiative, including: o service specifications (including the HAP Residential Aged Care guidelines and ED HAP contacts recording methodology)	16 January 2025	

avoidable hospital presentation and admissions and earlier discharge. This will include implementation of the HAP in Broome and continued support of other regional sites at Albany, Geraldton and Bunbury Hospitals.	 information about patient eligibility criteria; recruitment requirements, delivery milestones and phasing, data collection, monitoring, evaluation, and reporting arrangements. A program logic using the template provided by the Commonwealth. An evaluation plan outlining the planned evaluation methodology for measuring initiative effectiveness and the agreed minimum evaluation criteria outlined in the national evaluation plan. Collection of baseline data for initiative and in line with the agreed LSOP data indicators. Provision of a Progress Report with delivery and data metrics for the Commonwealth's approval including: Progress against the implementation plan. Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan. Finalised service specifications and patient eligibility criteria; Operationalisation of the Broome HAP pilot. Number of patients receiving services at all HAP sites. Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators, presented either month-by-month or quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned. 	14 April 2025 (reporting period: 1/9/24-1/3/25)	\$2.184m
	Provision of an Annual Progress Report with delivery and data metrics for the Commonwealth's approval including: • Progress against the implementation plan.	15 March 2026 (reporting period: 1/1/25-31/12/25),	\$4.733m
	 Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan. Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators, presented either month-by-month or 	15 March 2027 (reporting period: 1/1/26- 31/12/26),	\$4.901m
	quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned.	15 March 2028 (reporting period: 1/1/27-31/12/27)	\$5.074m
	Provision of a Final evaluation report for the Commonwealth's approval, which includes:	30 October 2028	Nil

	 A plan for long term management of older patients who are suitable for management at home, through the HAP after initiative funding ceases (including any recommendations and sustainable solutions to be implemented). An evaluation of the impact of the expansion of care services on long stay older patients against the initiative evaluation plan, based on the agreed minimum evaluation criteria (outlined in the national evaluation plan) Cumulative data reporting on the agreed data indicators for duration of schedule presented either month-by-month or quarterly. Outcomes of the initiative, key achievements and challenges, and lessons learned with supporting data where available. 		
Community Health in a Virtual Environment (Co- HIVE) Expansion Expand specialist-led virtual services that provide coordinated clinical support to older people who reside in residential aged care facilities in metropolitan Perth and South West region of Western Australia, and support older adults at home to avoid hospital presentation and admission and enable quicker discharge.	Provision of an Implementation Plan for the Commonwealth's approval detailing the expansion of Co-HIVE to all Residential Aged Care Facilities (RACFs) across the metropolitan area and South West region of WA including: Information about the RACFs through which services will be expanded, including activities undertaken to support expansion from 165 to approximately 250 sites. Information about the linking in of Co-HIVE with the expanded Respite Pilot Program. Information about the arrangements for the establishment, oversight and evaluation of the expansion of services including: o the expanded services to be provided (specifications); o information about patient eligibility criteria; o delivery milestones and anticipated phasing across all sites, o data collection, monitoring, evaluation, and reporting arrangements. A program logic using the template provided by the Commonwealth. An evaluation plan outlining the planned evaluation methodology for measuring initiative effectiveness and the agreed minimum evaluation criteria outlined in the national evaluation plan. Collection of baseline data for initiative and in line with the agreed LSOP data indicators.	16 January 2025	\$2.856m
	Provision of a Progress Report with delivery and data metrics for the Commonwealth's approval including: Progress against the implementation plan. Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan.	14 April 2025 (reporting period: 1/9/24-1/3/25)	\$2.856m

	 Number of RACFs onboarded as being able to access Co-HIVE services (changes in RACF numbers to be reported reflecting existing RACFs and new RACFs). Number of patients receiving Co-HIVE services per Health Service Provider (Health Service Provider refers to Local Hospital Network). Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators, presented either month-by-month or quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned. 		
	Provision of an Annual Progress Report with delivery and data metrics for the Commonwealth's approval including: • Progress against the implementation plan. • Outcomes of services monitored against the initiative evaluation plan, based on the national evaluation plan.	15 March 2026 (reporting period: 1/1/25-31/12/25),	\$8.500m
	 Number of RACFs onboarded as being able to access Co-HIVE services (changes in RACF numbers to be reported reflecting existing RACFs and new RACFs). Number of patients receiving Co-HIVE services per Health Service Provider (Health Service Provider refers to Local Hospital Network). 	15 March 2027 (reporting period: 1/1/26- 31/12/26),	\$8.769m
	 Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators, presented either month-by-month or quarterly. Initiative risks and issues (including intervention plans where services are not performing) and lessons learned. 	15 March 2028 (reporting period: 1/1/27-31/12/27)	\$8.769m
	Final evaluation report for the Commonwealth's approval, which includes:	30 October 2028	Nil
	 A plan for long term continuation of the initiative after funding ceases (including any recommendations and sustainable solutions to be implemented). 		
	 An evaluation of the impact of the expansion of care services on long stay older patients against the initiative evaluation plan, based on the agreed minimum evaluation criteria outlined in the national evaluation plan. 		
	 Cumulative data reporting on the nationally consistent data indicators for duration of schedule presented either month-by-month or quarterly. 		
	 Outcomes of the initiative, key achievements and challenges, with supporting data where possible. 		

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

Signed for and on behalf of the Commonwealth

of Australia My

The Honourable Mark Butler MP

Minister for Health and Aged Care

[Day] [Month] 2024

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Signed for and on behalf the State of Western Australia by

The Honourable Amber-Jade Sanderson MP Minister for Health, Mental Health and Ambulance

Services

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