From:	CHSP Selection	
To:	s47G(1)(b)	
Cc:	CHSP Selection	
Subject:	RE: s47G(1)(b)	[SEC=OFFICIAL]
Date:	Tuesday, 3 December 2024 5:24:43 PM	

# Dear <sup>s47F</sup>

The Department acknowledges your email regarding your interest in CHSP services provision related to the Forecast Opportunity CHSP Emergency and Critical Need 2024-25 grant recently posted on Grant Connect.

Unfortunately, this grant is not yet formally open. As per the notice on Grant Connect the Forecast Opportunity relates to a **possible** upcoming grant opportunity, although it is stated to likely be available during the stated Estimated Period of Release. It is further noted that any details relating to the Forecast Opportunity may change with the published Grant Opportunity.

It may be of interest to consider the **DRAFT** Grant Opportunity Guidelines which include further information about Category 3, and the circumstances under which providers will be invited, i.e. in relation to impacts of CHSP providers' relinquishment of CHSP services that impact service availability and clients' continuity of care.

Your email is noted. It is recommended that you continue to monitor Grant Connect for updates about this potential grant opportunity and for any other CHSP grant opportunities Kund regards CHSP Selection Team s47G(1)(b) that may become available.



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From:	CHSP Selection
To:	s47F
Cc:	CHSP Selection
Subject:	RE: s47G(1)(b)
CONTRACT MODIFIER	[SEC=OFFICIAL]
Date:	Friday, 6 December 2024 5:06:24 PM
Attachments:	image001.png

Dear<sup>s47F</sup>

The Department acknowledges your email regarding your interest in CHSP services provision related to the Forecast Opportunity CHSP Emergency and Critical Need 2024-25 grant recently posted on Grant Connect. This response is specific to the forecast grant opportunity only.

Unfortunately, this grant is not yet formally open. As per the notice on Grant Connect the Forecast Opportunity relates to a **possible** upcoming grant opportunity, although it is stated to likely be available during the stated Estimated Period of Release. It is further noted that any details relating to the Forecast Opportunity may change with the published Grant Opportunity.

It is important to read the **DRAFT** Grant Opportunity Guidelines available on Grant Connect for detailed information about Category 3 and the circumstances under which providers will be invited if/when the grant opens. Invitations made under Category 3 will relate specifically to when CHSP providers have relinquished all or part of their CHSP services provision, and service availability and client continuity of care are impacted in those areas of operation. The Department will invite applications from suitable potential alternative providers as this occurs and based on information to hand and received.

Although not eligible for consideration, your email and interest is noted.

It is recommended that you continue to monitor Grant Connect for updates about this potential grant opportunity and for any other CHSP grant opportunities that become available.

Kind regards CHSP Selection Team

s47G(1)(b)





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Ministerial Submission – Policy Approval MS24-000961 Version (1) Date sent to MO: 9 October 2024

Australian Government

**Department of Health and Aged Care** 

### To: Minister Wells

cc: Minister Butler

Subject: Commonwealth Home Support Programme (CHSP) Emergency Grant Opportunity

Critical date: 18 October 2024 to ensure the CHSP has a mechanism to appropriately manage emergency situations this financial year

Rec	commendations:	-
1.	Note that the spending proposal is a grant for the purposes of the Commonwealth Grants Rules and Guidelines 2017.	Noted
2.	Note that the spending proposal meets the objectives of the grant program and reflects value for relevant money.	Noted
3.	Agree to allocate \$5.0m (GST exclusive) in 2024-25 to manage certain emergency situations that may emerge in the CHSP.	Agreed / Not agreed / Please discuss
4.	Agree to the grant opportunity being undertaken as a closed non-competitive selection process with narrow restrictive eligibility and assessment criteria.	egreed / Not agreed / Please discuss
5.	Agree to the departmental delegate being responsible for the administration of the grant process (including assessment and approval of assessment outcomes and grant establishment details) as per Section 32B of the Financial Framework (Supplementary Powers) Act 1997.	Agreed / Not agreed / Please discuss
6.	s42	Noted
7.	Note that the grant opportunity guidelines will be reviewed by the Departments of Finance and the Prime Minister and Cabinet (PM&C) and, if rated medium or high risk, the Department will provide a further Ministerial Submission with a letter to the Minister for Finance seeking agreement to publish the guidelines	Noted

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	east 10 business days morandum 2018/39).	prior to their intended release (Estimates	
Co Del	mmonwealth Grant Ru egate will exercise the	vill be in accordance with the ules and Guidelines and the departmental e relevant approvals under the Public nance Accountability Act 2013 (PGPA Act).	Noted
pro Hoi	vided by Item 163 of	Authority for this grant opportunity is Part 4 of Schedule 1AB (Commonwealth ne) of the <i>Financial Framework</i> <i>Regulations 1997</i> .	Noted
Signatur Media R Comme	elease required? YES nts: plean connor CttSP grou	5/NO des innevention streams as port of thrandes.	Date: 7 1/1 /2024 The design of futur
Contact Officer:	Russell Herald	Assistant Secretary, Home Support and Operations Branch, Home and Residential Division	s47F
Clearand Officer:	ce Amy Laffan	A/g Deputy Secretary, Ageing and Aged Care Group	s47F

### Submission summary:

This submission seeks approval to establish a new CHSP Emergency grant opportunity for 2024-25, at a cost of up to \$5 million, already provisioned within the CHSP appropriation. This is a standard mechanism to support service continuity. The most recent grant opportunity lapsed on 30 June 2024. The process to re-establish the grant was postponed as all available resources were deployed to ensure the CHSP extension process from 1 July 2024 was delivered successfully under highly compressed timeframes, and then to support Fair Work Commission related proposals.

The Emergency grant will allow the department to support CHSP providers respond to certain emergency circumstances e.g. natural disasters. It would also enable the department to deal with short term financial viability issues (cash flow bridge until an alternative provider is selected), ensure the smooth transition of client service when a provider enters a relinquished delivery area at short notice or address unmet service demand. The proposal includes some improvements based on operational experience, and in light of the commencement of the Support at Home Program.

#### Issues:

- Ordinary CHSP management includes a low-value standing grant opportunity that allows providers to apply for funding to manage unforeseen challenges, such as disaster response or extraordinary spikes in demand (Emergency grant).
- The existing standing grant opportunity lapsed on 30 June 2024, and has not yet been extended. This is because all available resources were deployed to ensure continuity of support for 835,000 CHSP clients under the recent 2024-25 extension process delivered under highly compressed timeframes, and to support proposals related to Fair Work Commission determinations.
- 3. This means the department cannot quickly manage emergency situations, such as natural disasters, provider viability issues or short-term extraordinary spikes in client demand. While the department can provide some cashflow support through bringing forward existing contractual payments, the standing grant provides the necessary infrastructure to inject additional funding.
- 4. Therefore, this submission seeks your agreement to re-establish the grant opportunity. It also seeks your agreement to make some scope changes to the design of the grant in the context of recent operational experience and the in-home age care reform pathway, per the below table.

Ad-hoc Grant Element	2024-25 Scope	Comment
Disaster Response	Continue	Natural disasters as opposed to economic shocks
Financial Viability	Continue	Continuity of Support measure to ensure providers can operate until a solution is found long term.
Service Demand	Amend	Threshold increased from significant to extraordinary due to separate grant processes underway to address service expansion. This is a reduction to the scope of this particular grant.
Transition of clients between providers	Amend	Provide clearer advice on funding that providers can apply for to support the transition of clients as a CHSP provider exits
Innovative Service Delivery	Remove	Low demand from providers and limited benefit from investing in innovative service delivery during Support at Home implementation.
Onboarding new provider for Continuity of Support	Add	New measure to allow the department to onboard non-CHSP providers to deliver CHSP if, when a CHSP provider exits, there is limited-to-no pool of existing CHSP providers in-location from which to draw. A selected provider must be approved to deliver either Residential Aged Care or Home Care Packages funded by the Department of Health and Aged Care; or be a registered Department of Veterans' Affairs provider or a registered National Disability Insurance Scheme provider.
Maximum grant of \$250,000, or up to \$1 million in exceptional circumstances	Continue	Provides fiscal constraint on grant applications to ensure coverage across multiple providers. Total value of grant, of \$5 million, can be increased administratively at a later date, if agreed by Ministers.
Support for Fuel costs	Continue	Provides relief for the cost of fuel of up to 30c per litre, where services that have high fuel costs are exposed to increased costs well above ordinary indexation. Providers that budget for more than 5 per cent of their organisation's annual CHSP grant funding may apply for additional one-off funding for assistance with increased fuel costs.

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- 5. The grant opportunity is planned to open by the end of November 2024. Any selected applicants will be notified in writing of their successful application, with funding expected to commence within 6 weeks of that decision.
- 6. It is recommended that a closed non-competitive selection process be used to allocate grant funding. This is because the grant opportunity will be responsive to unforeseen situations that may emerge during this financial year and applications by invitation will be assessed individually against stated eligibility criteria, not against other applicants' submissions as would be the case in an open competitive round.
- 7. The grant opportunity is designed to achieve value for money. The provision of funding will be decided within the constraints of narrowly defined emergency situations to support the continuity of client service. Any risks associated with bringing in new providers to the CHSP market will be mitigated with the selection of experienced Commonwealth funding recipients to ensure a seamless transition from a client perspective.
- 8. This grant will be evaluated in line with the department's Grant Management Framework and Evaluation Strategy 2023-26. The evaluation will measure the general effectiveness of the Grant Opportunity Guidelines, the application process, and assessment and selection processes. This level of evaluation is proportionate to the size and significance of the grant in the context of CHSP being an ongoing program with a robust compliance framework and extensive support from the Community Grants Hub.
- 9. Should you choose to be the approver of the grant process outcome and associated expenditure, <u>Attachment A</u> outlines the mandatory grant rules and guidelines and other requirements to finalise this grant process. The department will provide a further Ministerial Submission for your consideration of the grant selection process outcome.

#### **Background:**

The CHSP provides funding for a broad range of entry-level support services to assist older Australians residents aged 65 years and over (50 years and over for Aboriginal and Torres Strait Islander peoples) who have functional limitations (including cognitive), to remain living independently at home in their community. The CHSP provides funding to 1,222 service providers (providers), delivering services to approximately 835,000 clients.

Providers are funded through grant agreements, in effect during 2024-25, which include a schedule of funded activities accompanied by activity work plans that outline the number of outputs to be delivered.

The previous CHSP Ad Hoc Grant Funding Opportunity (GO5672 and before that GO4265) had several elements against which providers could make an application. Their application claims could be against either or all of the following situations to:

- a. respond to unforeseen and exceptional circumstances,
- b. address gaps in service delivery, and/or
- c. trial and implement new and innovative service delivery models.

The service delivery gaps, and new/innovative delivery elements of this grant were closed on 30 April 2024. The grant opportunity was significantly oversubscribed as requests to seek funding were provider-initiated. The emergency element of this grant was closed on 30 June 2024. In 2023-24, 249 applications were approved (of 426 assessed).

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This grant opportunity has been designed in consultation with the Streamlining Grants Branch, Financial Management Division. Grant agreements will be established and managed by the Community Grants Hub.

#### Attachments:

A: Mandatory Grant Rules and Guidelines and Other Requirements

#### **Budget/Financial Implications:**

Funding of \$5.0m is provisioned and available in 2024-25 within the CHSP program, specifically, Priority 065, Outcome 3.2, Home Support and Care.

#### **Election Commitments/Budget Measures:**

Following the 2023-24 Budget, the CHSP has been further extended for another 12 months from 1 July 2024 to 30 June 2025 to align with the postponement of the new Support at Home program. This proposal forms part of ongoing management of CHSP and is a critical enabler for responding to certain emergency situations.

#### Sensitivities:

Nil

#### Consultations:

ed Unor . de Care Budget Strategy Branch and Streamlining Grants Branch.

The Department of Finance is being consulted regarding the Grant Opportunity Guidelines.

**Regulatory Burden Implications and/or Deregulation Opportunities:** 

Nil

# **Communication/Media Activities:**

The department will communicate details about the extended grant opportunity and available funding through existing Grant Connect channels.

# Impact on Rural and Regional Australians:

The CHSP provides services to around 835,000 consumers across all states and territories, including remote areas. No adverse impact on rural and regional Australia is envisaged from the proposed opening of this Emergency funding opportunity. It is more likely that certain emergency situations will arise in rural and/or regional areas. The absence of this grant opportunity may limit CHSP provider and department ability to ensure client service continuity in these areas in emergency circumstances.

From:	CHSP Selection
То:	s47G(1)
Cc:	(b) CHSP Selection
Subject:	RE: Grant notification [SEC=OFFICIAL]
Date:	Monday, 9 December 2024 11:15:31 AM
Attachments:	image001.png

# Dear<sup>s47F</sup>

The Department acknowledges your email regarding your interest in CHSP services provision related to the Forecast Opportunity CHSP Emergency and Critical Need 2024-25 grant recently posted on Grant Connect

Please be advised that this grant is not yet formally open, and no invitations are being issued at this stage. The notice on Grant Connect the Forecast Opportunity advises that is is a possible upcoming grant opportunity, although stated 'likely be available' during the stated Estimated Period of Release. It is further noted that any details relating to the Forecast Opportunity may change with the published Grant Opportunity should it proceed.

It is important to read the **DRAFT** Grant Opportunity Guidelines available on Grant Connect for detailed information about Category 3 and the circumstances under which providers will be invited if/when the grant opens.

Invitations to providers that may happen under Category 3 will relate specifically to when CHSP providers have relinquished all or part of their CHSP services provision, and service availability and client continuity of care are impacted in those areas of operation. The Department will invite applications from suitable potential alternative providers as this occurs and based on information to hand and received.

Although not eligible for consideration, your organisation's email and interest is noted.

It is recommended that you continue to monitor Grant Connect for updates about this potential grant the the Departme opportunity and for any other CHSP grant opportunities that become available.

Kind regards **CHSP Selection Team** 

s47G(1)(b)

s47G(1)(b)

s47F, s47G(1)(a), s47G(1)(b)

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From:	CHSP Selection
To:	s47F ; <u>CHSP Selection</u>
Cc:	CHSP Selection
Subject:	RE: Question regarding CHSP Emergency and Critical Need 2024-25 Grant Opportunity Guidelines [SEC=OFFICIAL]
Date:	Tuesday, 10 December 2024 11:38:54 AM

Dear<sup>s47F</sup>

Thank you for your questions related to the Forecast Opportunity 'CHSP Emergency and Critical Need 2024-25' grant recently posted on Grant Connect.

Please be advised that this grant is not yet formally open, and no invitations are being issued at this stage. The notice on Grant Connect for the Forecast Opportunity advises it as a possible upcoming grant opportunity, although stated 'likely be available' during the stated Estimated Period of Release. It is further noted that any details relating to the Forecast Opportunity may change with the published Grant Opportunity should it proceed.

0

Applications from providers are not being accepted. If and when the grant opens it will be by invitation only. When the grant is open providers, in the first instance, should discuss their circumstances in relation to the Grant Opportunity Guidelines (GOGs) with their Funding Arrangement Manager. en con act and

Regarding your specific questions:

- 1. If we apply for the grant for ourselves would we then also be able to apply for another grant on their behalf, or would this be considered as us applying for both grants and not allowed? As detailed more broadly in this response, the grant is not open. It will be run by invitation only from the Department. If and when the grant is open you should discuss your circumstances with your funding arrangement manager. The DRAFT GOGs provide detailed information about categories under which funding will be considered. The Department will determine areas of need based on information to hand and received.
- 2. Failing this, would they be able to apply for their own grant using us as an accredited partner for CHSP delivery? Or would this disqualify us from being able to get a grant for our services? N/A see above

It is important to read the DRAFT Grant Opportunity Guidelines available on Grant Connect for detailed information about the circumstances under which providers will be invited if/when the grant opens. The Department will invite applications from suitable potential alternative providers as this occurs and based on information to hand and received.

Although not eligible for consideration, your organisation's email and interest is noted.

It is recommended that you continue to monitor Grant Connect for updates about this potential grant opportunity and for any other CHSP grant opportunities that become available.

Kind regards

#### **CHSP Selection Team**

# s47G(1)(b)

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### s47F, s47G(1)(a), s47G(1)(b)

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Registered Provider	

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land, sea, and community. I pay my respect to them and their cultures, and to the elders both past and present.

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From: To: Cc:	s22 s22 s22	JARVIS, Nicole; s22	;s47E(d)	;s22	
Subject: Date: Attachments:	RE: s47G(1)(l Monday, 23 D image001.png image002.png	ecember 2024 2:59:31 PM	[SEC=OFFICIAL]		

Thank you<sup>s22</sup>

This advice is very welcome and appreciated.

Please let us know if there is any additional information, advice, or support required from our NT local network team, and we will continue to work with  $\frac{s47G}{(1)(b)}$  to support their viability and service delivery improvements.

Lare Lare Lare Lare Lare Lare Logartment of Health and Aged Care Local Network Australian Government, Department of Health and Aged Care Logar Mealth.gov.au Location: Level 7, 39-41 Woods Street, Darwin SPO Box 9848, Brisbane QLD

The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present.

From: s22		@Health.gov.au>	
Sent: Mo	nday, 16 December 2024 7:2	3 PM	
To: <sup>s22</sup>	a	)health.gov.au>; <sup>s22</sup>	
	<pre>@health.gov.au&gt;;</pre>	s22	@dss.gov.au>;
s22	@	health.gov.au>	
Cc: s22		@health.gov.au>; JARVIS, Nicole	
s22	@health.gov.au>; s22		@dss.gov.au>; s47E(
	@health.gov.	au>	d)
Subject:	{E: s47G(1)(b)	[SEC=OFFICIAL]	

Hi<sup>s22</sup>

Further to your email and our meeting last week, we have looked at the s47G(1)(b)

They will need to await the opening of the Emergency and Critical Need Grant that is going through clearances now. This grant is "by Invitation" and we could, based on advice received, s47G(1)(b)

s47G(1)(b) Please reach out if you have any queries. Regards s22 s22 mole. Care A/g Director CHSP Program Management – Compliance and Selection Section Home and Residential Division | Ageing and Aged Care Group Australian Government, Department of Health and Aged Care E: s22 T: s22 | M: s22 @health.gov.au Location: Level 11, 11 Waymouth Street, Adelaide, SA 5000 The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present. From: s22 @health.gov.au> Sent: Wednesday, 11 December 2024 1:30 PM To: \$22 @health.gov.au>; s22 @dss.gov.au>; s22 @health.gov.au>; s22 @Health.gov.au> Cc: s22 @health.gov.au>; JARVIS, Nicole s22 @health.gov.au>; \$22 @dss.gov.au> Subject: s47G(1)(b) [SEC=OFFICIAL] Good afternoon all, I met with s47G(1)(b) yesterday morning please see below key points: s47G(1)(b) s22 - DoHAC

s47F, s47G(1)(b)

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Best regards,

s22

#### **Director Aged Care**

### **Northern Territory - Darwin Office**

Department of Health and Aged Care Local Network Australian Government, Department of Health and Aged Care s22 s22 @Health.gov.au s47E(d) @health.gov.au

Location: Level 7, 39-41 Woods Street, Darwin GPO Box 9848, Brisbane QLD, 4000

The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present.

From: To: Cc: Subject: Date: Attachments:	s22 RE: TRIM: OFFICIAL: s47G(1)(b) [SEC=OFFICIAL] Wednesday, 20 November 2024 11:36:41 AM image001.png image004.png image005.png image006.png		
Thanks very muc ahead! Thanks again <sup>\$22</sup>	h <sup>s22</sup> it would be good if you could advise if the emergency GOGs go		
s22 T: 02 5132 <sup>s22</sup>	M: <sup>s22</sup>		
To: <sup>\$22</sup> Cc: <sup>\$22</sup> Subject: RE: TRIN	cult on Ane		
To: <sup>s22</sup> Subject: FW: TRI	<pre>@health.gov.au&gt; 9 November 2024 11:30 AM @health.gov.au&gt; M: OFFICIAL: \$47G(1)(b) SEC=OFFICIAL] ping you might be able to assist with this one. You spoke to \$47F about</pre>		
Hi <sup>s22</sup> I'm hoping you might be able to assist with this one. You spoke to <sup>s47F</sup> about funding options for this a couple of months ago – I'm not sure what other involvement you may			

have had. The below request is about capturing info about relevant programs slightly more formally.

I'm very happy to discuss if this isn't ringing any bells Cheers

s22

s22

Director - Infrastructure Section

First Nations Health Division | Health Strategy, First Nations, and Sport Group Primary Health Care and Community Control Branch Australian Government Department of Health and Aged Care T: 02 5132 <sup>\$22</sup> | M: <sup>\$22</sup> | E: <sup>\$22</sup> @health.gov.au Location: Scarborough House 9.273 PO Box 9848, Canberra ACT 2601, Australia



The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present.

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CULTURALLY & LINGUISTICALLY DIVERSE	PROUD TO BE AN INCLUSIVE EMPLOYER 2023-2024
	2023-2024
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Sent: Monday, 18 November 2024 3:16 PM	
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	alth.gov.au>; <sup>s22</sup>
@health.gov.au>; <sup>s22</sup>	@health.gov.au>
Subject: FW: TRIM: OFFICIAL: <sup>\$47G(1)(b)</sup>	
[SEC=OFFICIAL]	
Hi all,	
47G(1)(b)	
Cheers	
s22	

s22

### **Director – Infrastructure Section**

First Nations Health Division | Health Strategy, First Nations, and Sport Group Primary Health Care and Community Control Branch Australian Government Department of Health and Aged Care T: 02 5132 <sup>\$22</sup> | M: <sup>\$22</sup> | E: <sup>\$22</sup> @health.gov.au Location: Scarborough House 9.273 PO Box 9848, Canberra ACT 2601, Australia



The Department of Health and Aged Care acknowledges First Nations peoples as the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to all Elders both past and present.

	PROUD TO BE AN INCLUSIVE EMPLOYER 2023-2024
From: <sup>s47F</sup>	On Behalf Of <sup>\$47F</sup>
Sent: Tuesday, 12 November 2024 1:11 PM	The all.
From: <sup>s47F</sup> Sent: Tuesday, 12 November 2024 1:11 PM To: <sup>s47F</sup>	<u>@health.gov.au</u> >;
CHAMBERS, Aimee <sup>s22</sup> @Health.go s47F	
Cc: s47F	
Subject: TRIM: OFFICIAL: For <sup>s47G(1)(b)</sup>	

#### Hi All

As discussed at the 28 October meeting, the group noted the need to formalise the outcomes of workstream 3 (Funding Opportunity Identification) to understand the funding options that had been reviewed.

The Department of Health has prepared a form for members to record the work undertaken

to acquit the requirements of this workstream.

Please complete and return the attached form to the Secretariat at s47F by Monday 25 November COB.

If you have any questions, please don't hesitate to reach out to <sup>\$47F</sup> at s47F

Regards

s47F (She/Her) Executive Director, Health System and Asset Planning

Hashermation Act And Aged Care Hashermation Act And Aged Care Hashermation Act And Aged Hinent System Planning Division Department of Health p. <sup>s47F</sup> |e. <sup>s47F</sup> www.health.vic.gov.au hat with me on teams Department of Health

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FW: Correspondence from s47G(1)(b) Variation [SEC=OFFICIAL]	re Amended 2024-25 CHSP Deed of
Monday, 16 December 2024 3:07:48 PM	
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	FW: Correspondence from s47G(1)(b) Variation [SEC=OFFICIAL] Monday, 16 December 2024 3:07:48 PM image001.png RE s47G(1)(b) Variation SECOFFICIAL.msg

Hi<sup>s22</sup> and <sup>s22</sup>

Issue here relating to <sup>\$47G(1)(b)</sup> invitation to apply for funds under the soon to open Emergency Gog.

Essentially the provider has taken on more clients due to a mis understanding of the contract, in part this has been due to a funding agreement error in the 2024-25 contract.

I have asked the provider to put in a business case outlining the number but also how the provider is able to provide services to ensure service continuity for existing clients

s47G(1)(b)

I expect that the business case will come and ask for somewhere<sup>s47G(1)(b)</sup>\_for 2024-25 FY. provider required for financial assistance due to service continuity. They are the only melas provider in the specific reason. This amends an mis communication between the department and the provider relating to the current contract.



s22

The following pages 2-9 are irrelevant to the scope of the request and have been deleted under section 22 of the Freedom of Information Act 1982 (Cth)

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