



Activity Work Plan (AWP) and Performance Report Template

1. Grant Activity Summary [Instruction: Grantee to complete]			
Organisation Name:	Edith Cowan University	Grant Activity ID:	4-J0QUJ6I
05/12/2022	Alcohol and Other Drugs		
Grant Activity Start Date:	05/12/2023	Grant Activity Completion Date:	30/06/2026
Total Grant Agreement Funding:	\$ 1,236,000.00	AWP Milestone Due Date:	01/09/2025
This Activity Work Plan covers the following period:	01/07/2025 to 30/06/2026	Performance Report Milestone Due Date:	01/08/2026 <i>Covering the period 01/07/2025 to 30/6/2026 as per the requirements at Item E.1.</i>
AWP Version	Version #1	AWP date last approved (when updated/revised version required)	<dd/mm/yy>>



2. Activity Requirement [Instruction: Grantee to complete]

Provide a brief description of the grant activity that the organisation will deliver e.g. refer to application and Item B – Activity in Grant Agreement

The Alcohol and Other Drugs Knowledge Centre (AODKC) is a dedicated website which provides a one-stop-shop online hub for research, resources, policies, and workforce information related to Aboriginal and Torres Strait Islander Alcohol and Other Drug (AOD) conditions. The AODKC draws from the database and infrastructure of the Australian Indigenous HealthInfoNet (HealthInfoNet). The HealthInfoNet is Australia's leading online source of knowledge and information about Aboriginal and Torres Strait Islander health (<https://healthinfo.net.ecu.edu.au>); it has been acknowledged as an essential element of the infrastructure contributing to Australia's efforts to substantially improve the health of Aboriginal and Torres Strait Islander peoples. We will continue to work within a successful model of Aboriginal and Torres Strait Islander knowledge exchange that has been refined over the past 28 years of the HealthInfoNet. The HealthInfoNet also supports information sharing among practitioners, policymakers and others working to improve Aboriginal and Torres Strait Islander health in the service of helping to 'close the gap' in Aboriginal and Torres Strait Islander health outcomes.

3. Performance Indicators

Description <i>[Include PIs from Item B. Activity Details of grant agreement]</i>	Measure <i>[Include PIs from Item B. Activity Details of grant agreement]</i>	Performance Report - <i>[insert period <dd/mm/yyyy> to <dd/mm/yyyy>]</i>
		<i>In no more than 300 words Grantee to briefly describe how they have performed against the Performance Indicator during the performance reporting period. If you wish to provide a more detailed response, please provide this as an attachment to this report.</i>
Provide comprehensive Aboriginal and Torres Strait Islander alcohol and other drug information on the Alcohol and Other Drug Knowledge Centre.	Provision of the number of new entries of publications, resources, programs, organisations and workforce information (events, courses, funding and jobs).	<i>Performance Report comment</i>



4. Activity Deliverables [Instruction: Grantee to complete]

Objective	Deliverables	Timeframe	Measures of Success	Outlet location(s) Information	Performance Report - [insert period <dd/mm/yyyy> to <dd/mm/yyyy>]
Briefly describe the intended outcomes in meeting need(s), target cohorts and why your service can assist	<p>Briefly describe key tasks/outputs required to achieve the Activity</p> <p>Include reference to any reporting (e.g. technical data report) where specified in Item B</p>	Specify the timeframe for delivery	Briefly describe the intended result for the deliverable, including quality expectations	Specify the location where activity will be delivered i.e. Town and State, include outreach locations as well	<p>Grantee to briefly report (no more than 300 words) on progress of activity during reporting period.</p> <p>If status is 'On Track'</p> <ul style="list-style-type: none"> A few short, sharp dot points are sufficient along with a sentence or two to demonstrate that you have successfully delivered including any good news stories, outputs/targets achieved within timeframe <p>If status is 'Some issues/challenges'</p> <ul style="list-style-type: none"> A few dot points as to what the issues/challenges are and a paragraph or two about what strategies you intend to implement to get the project back 'on track' and when this is likely to happen



4. Activity Deliverables [Instruction: Grantee to complete]

					<ul style="list-style-type: none"> If you wish to provide a more detailed response, please provide this as an attachment to this report 	
<p>Provide comprehensive Aboriginal and Torres Strait Islander alcohol and other drugs information on the Alcohol and other Drugs Knowledge Centre (AODKC) website.</p> <p>The Health/InfoNet is extremely well placed to host the AODKC given our strong history of hosting the AODKC with positive feedback from users and stakeholders.</p>	<p>Health information searched for, updated, curated, expanded and categorised to the various alcohol and other drugs (AOD) topics on the AODKC's online bibliography.</p> <p>The bibliography includes:</p> <ul style="list-style-type: none"> Publications Policies Resources (health promotion and health practice). <p>Other information added includes:</p> <ul style="list-style-type: none"> Programs Organisations Workforce information (events, courses, funding and jobs). 	01 July 2025-30 th June 2026	The number of new entries of publications and resources in the AODKC's online bibliography and the number of new entries for programs, organisations and workforce information (events, courses, funding and jobs).	National. https://aodknowledgecentre.ecu.edu.au/	Choose an item.	Performance Report comment



4. Activity Deliverables [Instruction: Grantee to complete]

	Conduct audits of existing information on the AODKC website to ensure content is accurate and free of broken links.	01 July 2025-30 th June 2026	Content (Resources, programs, organisations, funding, courses) for Health Impacts, Policies, Social Impacts, Community Portal, Workforce Development will be fully audited. Key facts pages will be updated for: Health Impacts, Community Portal, Workforce Development, and About us web pages			
Enhance the useability and relatability of the AODKC website.	Provide a technologically advanced, best-practice web resource for delivery of	01 July 2025-30 th June 2026	The percentage of time that the AODKC website is publicly available.	National.	Choose an item.	<i>Performance Report comment</i>



4. Activity Deliverables [Instruction: Grantee to complete]

The HealthInfoNet has a strong history of ensuring the AODKC is kept live, accurate and up to date.	comprehensive Aboriginal and Torres Strait Islander AOD information that is available 95% of the time.		Usage statistics for the AODKC website reported in performance report the annual performance report.			
<p>Facilitate knowledge exchange through the regular posting of AOD content via our 'social media platforms:</p> <ul style="list-style-type: none"> • Facebook • Instagram • LinkedIn. <p>The HealthInfoNet consistently ranks above industry average in engagement across each of its social media platforms.</p>	Regular social media posts of AOD content on Facebook, Instagram, and LinkedIn.	01 July 2025-30 th June 2026.	The number of social media posts, followers, impressions, engagements and click-throughs reported in the annual performance report.	National.		



4. Activity Deliverables [Instruction: Grantee to complete]

Regular updates of recent and emerging key information on AOD topics for users and other subscribers to the AODKC newsletter. The HealthInfoNet has a strong history of producing AODKC newsletters with positive feedback from subscribers.	Regular compilation of recent research, and other information relevant to the specified health topics for distribution via the AODKC newsletter.	01 July 2025-30 th June 2026.	8 newsletters produced and sent in the reporting period. Number of subscribers to the newsletter reported in the annual performance report.	National. https://healthinonet.ecu.edu.au/key-resources/newsletters/		
Engage with key stakeholders to inform the AODKC's Knowledge Exchange activities and to ensure the health workforce is fully aware of, and confident accessing, the AOD information on the AODKC website.	Ongoing development of strong, reciprocal, collaborative relationships, and/or partnerships, with key organisations in the Aboriginal and Torres Strait Islander AOD sector. Continued strong relationships with the HealthInfoNet's honorary Consultants	01 July 2025-30 th June 2026. 01 July 2025-30 th June 2026.	One online AODKC reference group meeting in the year. At least four email communications	National.		



4. Activity Deliverables [Instruction: Grantee to complete]

	with expertise in AOD.		with Consultants in the year.			
	Continued engagement with the workforce and other stakeholders.	01 July 2025-30 th June 2026.	Present the AODKC at one AODKC conference either as an exhibition, presentations and/or inserts in the year.			

5. Risk Management [Instruction: Grantee to complete]

Risk item	Managing the Risk	Risk Rating	Performance Report - [insert period <dd/mm/yyyy> to <dd/mm/yyyy>]
<i>Briefly describe the identified or foreseeable risk/s that may impact upon the delivery of the Activity.</i>	<i>Briefly describe how the risks will be managed including controls to treat/mitigate the risk.</i>	<i>Select a risk rating with controls in place</i>	<i>In no more than 300 words Grantee to briefly describe how you have managed the risk and whether the risk rating has changed/remained the same during the performance reporting period. If you wish to provide a more detailed response, please provide this as an attachment to this report</i>
<ul style="list-style-type: none"> cultural appropriateness 	The AODKC engages in periodic consultation with an AOD Reference Group which is made up of representatives from national AOD research institutes, Aboriginal and Torres Strait Islander AOD researchers and practitioners and	Low	<i>Performance Report comment</i>



	<p>Aboriginal and Torres Strait Islander people with lived experience of AOD issues.</p> <p>The AODKC fosters strong relationships and partnerships with key stakeholders & peak bodies in the sector which ensures the AODKC remains well regarded and utilised. Regular contact with these partners ensures that AODKC is responsive to any feedback that could enhance the cultural appropriateness of the website. Recent user survey data shows that there are very high levels of trust and satisfaction from users. Aboriginal and Torres Strait Islander respondents to the survey overwhelmingly rated the AODKC as culturally appropriate and safe.</p> <p>For over 26 years the Health/InfoNet has been guided by an Advisory Board that includes the CEOs of many peak Aboriginal and Torres Strait Islander peak health bodies. Advisory Board members will engage in a 2-day workshop during the funding period where they will be invited to discuss a plan of developing a strong and sustainable cultural governance mechanism for the Health/InfoNet inclusive of the AOKDC.</p> <p>The Health/InfoNet has appointed the first Aboriginal Director who provides</p>		
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	an additional level of oversight and guidance on its cultural appropriateness.		
<ul style="list-style-type: none"> quality control 	The quality of the information on the AODK web resource is dealt with by strong quality control procedures. These include adhering to AODKC inclusion criteria for information added to the website. The AODKC has developed standard formats for the various types of information to be added to the web resource, and all new additions are subjected to a 'second setting' process that means that all additions developed by a staff member are checked by at least one other person.	Low	
<ul style="list-style-type: none"> financial 	The Health <i>InfoNet</i> operates within ECU's comprehensive governance framework and works closely in its financial operations with ECU's Finance Services Centre. In particular, the Health <i>InfoNet</i> Director works closely with ECU's Finance team in budgeting and monitoring income and expenditure. The Health <i>InfoNet</i> 's financial statements are authorised by ECU's Finance Manager.	Low	
<ul style="list-style-type: none"> staffing 	Because of the specialised nature of the AODKC and Health <i>InfoNet</i> 's operations, there are also staffing-	Low	



	<p>related risks. The specialised nature of its work means that there is quite a long orientation/training period before new <i>HealthInfoNet</i> staff, particularly those working in the research and IT areas, are fully aware of the complexities and procedures of the operations. These complexities are documented in a formal procedure manual. This has greatly assisted the orientation/training process, meaning that researchers become productive more quickly. Even then, the <i>HealthInfoNet</i> still has some risk with staff turnover, particularly with research and IT staff. Any greater-than-normal turnover would have an impact on the <i>HealthInfoNet</i>'s productivity.</p> <p><i>HealthInfoNet</i> strives to attract Aboriginal and Torres Strait Islander staff members. We are actively engaged in ECUs Aboriginal and Torres Strait Islander Supporting Plan which includes targets for increased Aboriginal and Torres Strait Islander employment. We access the ECU Aboriginal and Torres Strait Islander Talent Pool when recruiting for new positions. We will continue to work with ECU to attract Aboriginal and</p>		
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	Torres Strait Islander workers to the HealthInfoNet.		
<ul style="list-style-type: none">information technology	<p>With the HealthInfoNet's products being almost exclusively disseminated via the Internet, there is always a risk with the computer and network systems feeding into the Internet. As is the case with finances, the HealthInfoNet is protected to a large degree against these risks by operating within the ECU environment. The HealthInfoNet websites are run on an externally hosted virtual server which was procured by ECU IT. Daily backups are run by HealthInfoNet, in addition to the regular backups run by the hosting provider. The HealthInfoNet backups are stored externally on the Amazon S3 storage system. ECU IT regularly scan the websites for vulnerabilities and provides a report to HealthInfoNet with any areas of concern highlighted. Within the scope of capability, these vulnerabilities are addressed. The HealthInfoNet's IT staff are responsible for the specially developed database and related structures but can call on ECU IT staff, or the services of the hosting company, for assistance and/or advice if needed.</p>	Low	



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6. Stakeholder Engagement [Instruction: Grantee to complete]			
Stakeholder Details	Interest or Impact	Engagement Strategy	Performance Report - [insert period <dd/mm/yyyy> to <dd/mm/yyyy>]
<p>Name the stakeholders who the grantee will need to engage with in delivery of the Activity. This should include referral pathways with other organisations</p>	<p>Briefly describe why the grantee needs to engage with the stakeholder, i.e. what interest does the stakeholder have in the Activity / how will the Activity affect the stakeholder?</p>	<p>Briefly describe how the grantee will engage with the stakeholder to mitigate potential risks relating to the stakeholder's interest in, or the impact of the Activity</p>	<p>In no more than 300 words Grantee to briefly describe your progress of engagement with the stakeholder during the performance reporting period. If you wish to provide a more detailed response, please provide this as an attachment to this report</p>
<p>The HealthInfoNet engages actively with many stakeholder groups nationally which help promote the awareness and use of the AODKC. These include:</p> <ul style="list-style-type: none"> • The AODKC Reference Group • Aboriginal and Torres Strait Islander community-controlled health services and their representative bodies • government departments of health and Indigenous affairs 	<p>All stakeholders are users of the website, collaborators or partners. They are the organisations who work in the Aboriginal and Torres Strait Islander health sector and who we support so that they have the best possible evidence to do their work and inform their decisions.</p> <p>We are now embedded within the health sector as a trusted go-to resource that is freely accessible.</p>	<p>Regular face to face and online contact with the broader stakeholder group in the form of meetings and Roundtables, at conferences, through email blasts advising them of new portals and resources that can assist them in their work, in exploring collaborations and facilitating the sector in helping to close the gap in health.</p> <p>One online meeting per year with AODKC Reference Group members.</p>	<p><i>Performance Report comment</i></p>



<ul style="list-style-type: none"> • non-government organisations • health service workforce (including Aboriginal and Torres Strait Islander Health Workers, doctors, nurses and other health workers) • research organisations • academic institutions including tertiary and technical • training organisations • our partners, funders, Advisory Board and Consultants • professional associations 		<p>In 2026, the AODKC will co-convene the International Society for the Study of Drug Policy (ISSDP) in Perth WA along with the National Drug Research Institute. This will provide an opportunity to showcase the AODKC to an AODKC drug policy audience.</p>	
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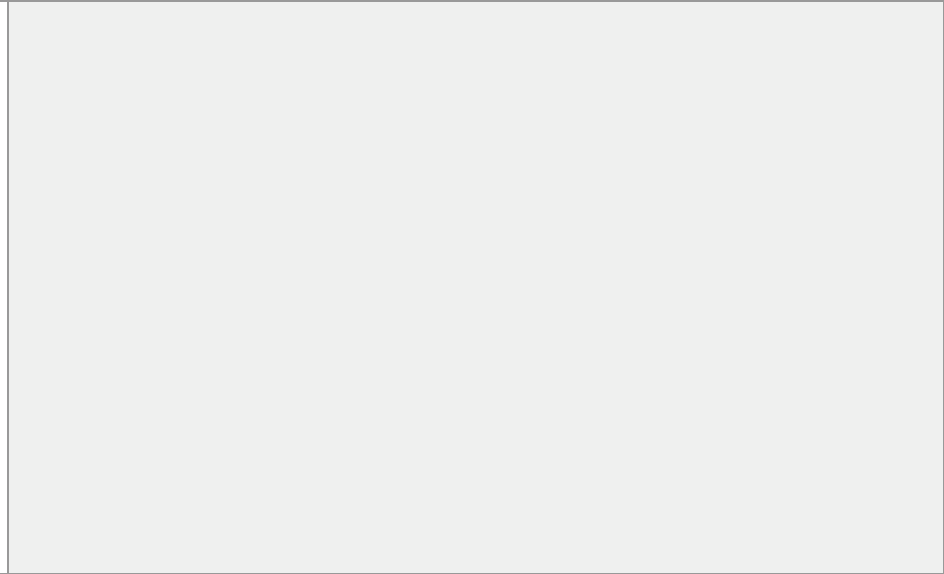
7. Governance [Instruction: Grantee to complete]

<p>Governance Details</p> <p><i>Describe the governance arrangements the grantee has in place to oversee the delivery of the Activity. Describe the relevant expertise, skills, qualifications and experience including broad structure of the organisation, as well as operational and business management supported by details of financial management systems, internal policies, procedures and quality improvement mechanisms. Include current accreditations where applicable. Any actual, perceived or potential conflicts of interest between board members/key staff members should also be reported in accordance with the conditions of the grant agreement.</i></p>	<p>Performance Report - <i>[insert period <dd/mm/yyyy> to <dd/mm/yyyy>]</i></p> <p><i>In no more than 300 words Grantee to briefly describe governance arrangements within the reporting period .e.g. any changes to key organisational staff and positions. If you wish to provide a more detailed response, please provide this as an attachment to this report</i></p>
<p>The Health/InfoNet operates within ECU's comprehensive governance framework. This assists the Health/InfoNet's operations in terms of human</p>	<p><i>Performance Report comment</i></p>



resources, finance, contracts and risk management. The Health/InfoNet grants are administered through the ECU Research Services team who provide research-related support.

The Health/InfoNet had begun a process of establishing a strong cultural governance mechanism. We are currently completing the Australian Indigenous Governance Toolkit self-assessment to identify potential models of cultural governance for the Health/InfoNet. This process will help identify potential Aboriginal and Torres Strait Islander controlled organisations who could provide governance of the Health/InfoNet. ECU Executive Leadership are strongly engaged in this process with Health/InfoNet. ECU Executive Leadership are also actively engaged in a process of developing an Aboriginal and Torres Strait Islander governance mechanism for the university.





8. Budget [Instruction: Grantee to complete]

Where specified under Item E.2 of grant agreement, this template is designed to assist the Grantee to develop a budget either for inclusion under the supplementary terms and conditions of the Standard Grant Agreement (CB2. Activity Budget) or as a milestone deliverable (Item E. Reporting) depending on what has been negotiated with the Department of Health and Aged Care. The template has been designed to comply with the standard definitions, categories and structure used in the [National Standard Chart of Accounts \(NSCOA\)](#). The standardised NSCOA structure has been recommended because it is used by many organisations that receive departmental funding. This template specifies the minimum amount of detail required to develop a budget, however in consultation with the Commonwealth it may be expanded to meet Activity requirements. Also refer to the Grant Opportunity Guidelines and Item B. Activity details of grant agreement for any specified budget inclusions and exclusions.

		Budget Amount \$ (GST exclusive) 01/07/2025 – 30/06/2026	Actuals Amount \$ (GST exclusive) [insert FY period] <dd/mm/yyyy> to <dd/mm/yyyy>	Performance Report – [insert period <dd/mm/yyyy> to <dd/mm/yyyy>] Grantee to include explanation of variance between budget and actual line item amounts
Income	Grant Activity Funds	\$412,000.00		
	Approved Activity Unspent Funds (Brought Forward) *	\$14,101.00		
	Interest on Activity Funds ^			
	Proceeds on Sale of Activity Funded Assets			
	Government Contributions (inc Medicare Benefits)			
	Other Contributions - Grantee			
	Other Contributions – Third party			
	Total Income (A)	\$426,101.00	\$0.00	



Expenses	Salaries & Wages	\$336,025.00		
	Accounting / Audit fees	\$0.00		
	Advertising & Promotion	\$5,500.00		
	Board / Governance (Travel, Accommodation & Training)	\$0.00		
	Client Support Services/Consumables	\$0.00		
	Communications & IT	\$176.00		
	Consultants & Contractors	\$0.00		
	Insurance (excl Motor Vehicle)	\$0.00		
	Motor Vehicle Expenses (incl Insurance and Repairs & Maintenance)	\$0.00		
	Rent	\$0.00		
	Repairs & Maintenance (excl Motor Vehicles)	\$0.00		
	Travel & Accommodation (excl Board / Governance)	\$2,000.00		
	Training & Development (excl Board / Governance)	\$0.00		
	Utilities	\$0.00		
	Asset Purchases #	\$0.00		
	Other Expenses (Research Support cost)	\$82,400.00		
	Total Operational Expenses (B)	\$426,101.00	\$0.00	



Capital Expenditure	Asset Purchases #	\$0.00		
	Total Capital Expenditure (C)	\$0.00	\$0.00	
Balance	Balance = A - (B+C)	\$0.00	\$0.00	

* only include if rollover of surplus and uncommitted funds has been identified under CB27 of the supplementary terms and conditions

^ only include if required under the standard grant conditions definition of a Grant

only include if CB5 of the supplementary terms and conditions has been invoked



9. AWP Approval

Once approved by the Commonwealth, the AWP [and budget] will form part of the Grant Agreement. Frequency of performance reporting against the AWP is specified under Item E of the Grant Agreement. If the Grantee or the Commonwealth identifies a need to update or revise the approved AWP [and budget], any proposed changes must be accepted and approved by the Commonwealth.

Declaration:

- The grantee certifies that the AWP is not misleading by reason of any material misstatements or omissions.
- The grantee acknowledges that a change to the Activity without prior approval of the Commonwealth will be regarded as a breach of the Agreement, and the grant may consequently be reduced or revoked.
- The grantee must ensure its personnel and subcontractors do not engage in any fraud or corruption in relation to the Activity.
- The Grantee acknowledges their obligation to report suspected and actual criminal offences such as fraud or corruption to the Commonwealth and to their law enforcement agency and relevant regulatory agencies within 5 business days, as well as to provide assistance to investigating authorities if requested/required.
- The grantee acknowledges that under section 137.1 of the schedule to the Criminal Code Act 1995 it is an offence to provide false or misleading information to the Commonwealth.
- The report has been signed by the Board, the Chief Executive Officer or an Authorised Officer of the Grantee.

<Legal Organisation Name>	<Commonwealth Representative>
Signed for and on behalf of:	Signed for and on behalf of Commonwealth of Australia, <u>represented by and acting through Department of Health and Aged Care</u> , ABN 83 605 426 759:
Name:	Name:
Position:	Position:
Date: ____ / ____ / ____	Date: ____ / ____ / ____
Additional signatory (where applicable)	
Signed for and on behalf of:	
Position:	
Date: ____ / ____ / ____	