PROPOSED SUB-CONTRACT / BROKERAGE MODEL

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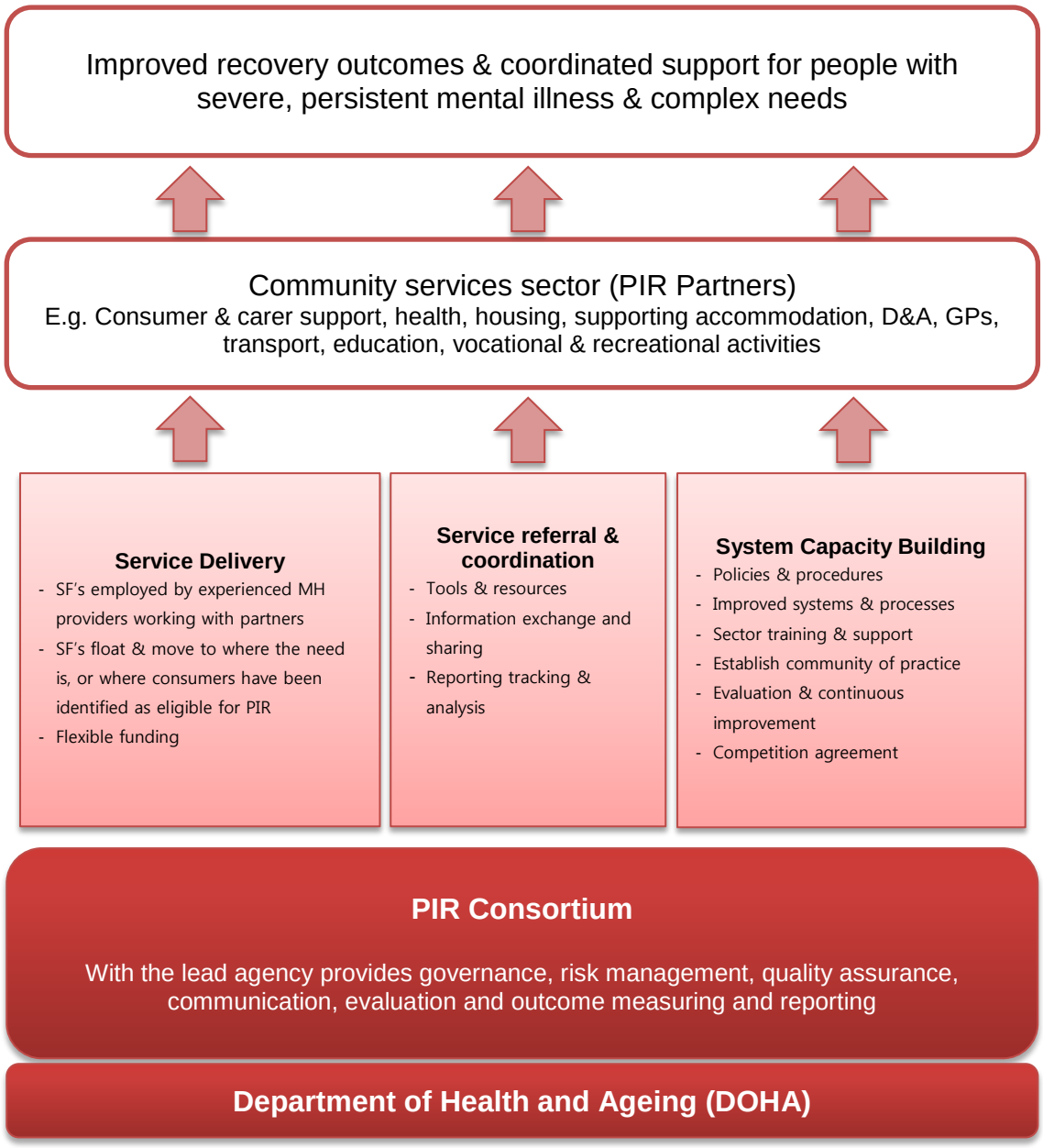

The consortium model

The management and decision making approach for a PIR Consortium should be tailored to the real needs of the area in terms of scale and complexity. The coordination of the program is a demanding and complex management task that requires a well-qualified and experienced lead agency. It is suggested the lead agency carries out the following tasks:

- Receive the funding and distribute it in accordance with the consortium and grant agreement;
- Manage the contract with DOHA and partner agencies, including records management, financial management and reporting;
- Be an intermediary for efficient and correct communication between the participants and reporting regularly to the participants and to the funder on the progress of the project;
- Ensure that all partners have access to all necessary information to deliver the agreed outcomes;
- Coordinate the Support Facilitator services across the ML Region on the basis agreed by the Consortium;
- Monitor the compliance by the partners with their obligations, based on the outcome measures required by DoHA and agreed by the consortium.

The role of the consortium members is to provide advice and consensus decision-making about the management of PIR in the following areas:

- Vision and purpose
- Consortium working
- Service delivery standards
- Governance
- Financial management and decision making

The model will also require advice and direction from the wide range of services within a region. For this reason, an **Advisory Committee** could be established to provide input to the consortium members (every 3 months as an example) about the effectiveness of service delivery, identification of gaps and suggested improvements for services and system changes.

To assist with the transparency of the model, **an independent Chairperson** could be appointed for the consortium through consultation and/or voting by the Advisory Committee and other stakeholders in the region. The Chairperson could be appointed from within the consortium members or could be chosen because of particular skills, knowledge and experience that this person brings to PIR. For example, a representative from a consumer or carer organisation might be appropriate, or someone from a university or other mental health research organisation might also be appropriate. The independent chair could also have a casting vote if needed when consensus is not able to be reached amongst the consortium members. One of the crucial aspects for the successful operation of a consortium with an established NGO mental health provider is having clear principles and guidelines for decision making and the overall governance for PIR.