



2025

MEMORANDUM OF UNDERSTANDING (MOU)





CENTRAL NSW JOINT ORGANISATION

AND

RURAL DOCTORS NETWORK

Parties	<p>Central NSW Joint Organisation ABN 30 467 146 006 (CNSWJO)</p> <p>NSW Rural Doctors Network, trading as Rural Doctors Network, ABN 52 081 388 810 (RDN)</p>
Introduction	<p>Improving health outcomes and the systems, infrastructure and workforce that enable health outcomes; are critical to the viability and sustainability of remote, rural and regional NSW.</p> <p>Central NSW Joint Organisation (CNSWJO) and Rural Doctors Network (RDN) see value in formally recognising their joint interests in more substantial health outcomes for remote, rural and regional NSW and developing collaborative activities that support the continued growth and sustainability of NSW's rural health systems, infrastructure and workforce.</p>
Background	<p>CNSWJO</p> <p>The Central NSW Joint Organisation consists of 11 member councils – Bathurst, Blayney, Cabonne, Cowra, Forbes, Lachlan, Lithgow, Oberon, Orange, Parkes and Weddin. Central Tablelands Water and Upper Macquarie County Council are all Associate Members. The Board also values working with key stakeholders, importantly the NSW Government.</p> <p>Central NSW is a diverse area that covers around 51,567 km² with a population estimated to be 177,854 persons (based on Office Local Government – Council statistics – 2016 Census data).</p> <p>RDN</p> <p>Established in 1998 as an outcome of the 1987 NSW Rural Doctors Dispute, RDN is an independent charitable organisation that works to create and sustain access to quality multidisciplinary healthcare for all Australians – no matter where they live.</p> <p>RDN strives to operate as a values-based and evidence-based organisation. RDN program activities and methods are developed aligned to RDN's 2022-25 IMPACT measures that relate to creating and sustaining health access. These include improving rural community health system resilience, building a rural workforce pool, and enhancing rural health professionals' capability.</p>
Aim	<p>The MOU aims to enable ongoing cooperation and collaborative activities that support achieving shared priorities.</p> <p>The role of the MOU is to provide a framework for the parties to operate within.</p>
Liaison	<p>The primary liaison contacts for each party regarding the MOU are –</p> <p>CNSWJO: Executive Officer</p> <p>RDN: General Manager, Service Delivery</p> <p>It is envisaged that the implementation of the MOU's collaborative activities will have separate designated points of contact.</p>
Collaborative activities	<p>CNSWJO and RDN are innovative and forward-looking organisations aiming to deliver tangible community benefits. This collaboration seeks to align direction and expectations between CNSWJO and RDN where it will produce outcomes.</p> <ol style="list-style-type: none"> 1. MOU governance and relationship management. 2. Collaborative activity planning and workplan/s, program development. 3. Supporting community health system understanding and workforce literacy. 4. Policy and advocacy 5. Joint promotion

MOU administration	<p>It is envisaged that the management mechanisms to enable the MOU will include –</p> <ol style="list-style-type: none"> 1. Regular check ins regarding items included in the schedule Joint half-year review of activities included in the schedule <p>Schedule 1 outlines the proposed activities for the 2025 year and schedule 2 summaries key successes from the 2024 year.</p>
Conditions	<ol style="list-style-type: none"> 1. Each party is responsible for its costs in implementing the MOU. 2. Each party must maintain adequate insurance to cover it against any liability arising because of participation in projects associated with the partnership and all insurances required under Worker’s Compensation legislation and for taking all other actions required as an employer. 3. Each party retains ownership of its existing intellectual property. 4. This MOU is not intended to create binding or legal obligations on either party. Despite any detriment or expense incurred by either party before the execution (if any) of formal legal agreements, no binding legal relations shall arise before that time. 5. Every reasonable effort has been taken to ensure the accuracy of this MOU's proposed method. However, all statements of opinion or belief in this MOU, all views expressed and all projections, forecasts or statements regarding current or future events represent the assessment and interpretation of circumstances existing as of the date of this MOU by either party. 6. No representation is made or assurance is given that such statements, views, projections, or forecasts will eventuate. To the extent permitted by law, either party takes no responsibility for the information contained in this MOU. 7. Both parties agree to disclose any actual or potential conflict of interest. 8. The MOU is not intended to constitute either party as an agent, partner or joint venture of the other, and neither party has the authority to bind or pledge the credit of the other. 9. Each party will (with prior written approval) jointly market and showcase the MOU. This may include co-branding (including the use of name and logo), marketing and media activities as negotiated and agreed in writing by the partners. 10. Both parties recognise that the MOU is neither an exclusive nor binding contract and that both parties may explore other similar collaborative arrangements with other entities as they see fit.
Period	The MOU is reviewed every 12 months and signed off by Chairs (1-year) period.
Disputes	Should any party have an issue with the operation of the MoU, they should raise this with the designated liaison for each partner, who will report to the senior teams from the respective organisation. If both parties agree, an independent third party may act as a facilitator.
Termination	Either party may terminate the MoU at any time by giving the other party thirty (30) days prior written notice.
Confidentiality	All information shared between the parties under this agreement, whether in written, oral, or other form, shall be considered confidential unless such information is already publicly available or subsequently becomes public through no fault of the receiving party. The receiving party agrees not to disclose or use the confidential information for any purpose other than in connection with

	the performance of this agreement, unless required by law, without prior written consent from the disclosing party.
Variation	The parties may agree to vary any of the requirements of this MOU. Such agreement must be in writing and signed by both parties.
Signed	<p>For CNSWJO</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  Cr Kevin Beatty Chair Central NSW Joint Organisation Date: </div> <div style="text-align: center;">  Cr Phyllis Miller Portfolio Chair Health and Ageing Date: </div> </div>
	<p>For RDN</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">  Prof Peter O'Mara Chair Rural Doctors Network Date: </div> <div style="text-align: center;">  Richard Colbran PhD Chief Executive Officer Rural Doctors Network Date: </div> </div>

Schedule 1

MOU Framework	2025	Other potential activities for consideration
MOU governance and relationship management	<ul style="list-style-type: none"> • MOU completion and signing (November 2024) • RDN attendance at appropriate CNSWJO meetings 	<ul style="list-style-type: none"> • CNSWJO introduction to RDN Board (March 2025 TBC)
Collaborative activity planning Program development.	<ul style="list-style-type: none"> • CNSWJO & RDN review the health literacy project for next steps. 	<ul style="list-style-type: none"> • Health advice into the CNSWJO Statement of Strategic Regional Priority • CNSWJO considers its role to inform and support RDN's community-based development method in local approaches.
Supporting community health system understanding and workforce literacy.	<ul style="list-style-type: none"> • CNSWJO leverage community engagement products delivered by RDN, such as the 'Health Interpreter' Podcast series members and community leaders. • CNSWJO contribute to RDN's key reports, and circulation of same. • RDN promote service offerings and provide updates of engagement in CNSWJO footprint • CNSWJO participation in co-design of Centre for Health Access to consider how community views on health can inform how to improve health access 	<ul style="list-style-type: none"> •
Policy and Advocacy	<ul style="list-style-type: none"> • Development of joint funding pitches, if required for other MoU-associated activities. • Mutual input on submissions, and other advocacy activities, where appropriate. • Investigate opportunities to work with Charles Sturt University on Policy Lab for barriers and enablers to growing our own health workforce. 	<ul style="list-style-type: none"> • RDN & CNSWJO to work with Country Mayors Association to support the ongoing funding by the NSW Government across the whole of NSW based on the pilot program. • RDN provide policy advice to CNSWJO on rural health issues.
Joint promotion	<ul style="list-style-type: none"> • Corporate collateral acknowledgements (e.g., websites), Annual Reports 	<ul style="list-style-type: none"> • RDN & CNSWJO consider profiling their work to sitting MPs in Canberra at the National Rural Health Awards event, including purchasing an annual award table.

	<ul style="list-style-type: none"> • Joint promotion of the pilot evaluation and “State of Play” framework for Regional Council areas. 	<ul style="list-style-type: none"> • CNSWJO promotes RDN health professional products, grants, services, scholarships, and the Specialist Health Access Outreach Program supported by the Australian Govt or the distribution of over \$ 5 million in training grants to NSW rural health professionals since 2020.
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Schedule 2

2024 Key successes
<ul style="list-style-type: none"> - Delivery of the Local Government Workforce Planning Program with the Central NSW Joint Organisation. This included engaging with 11 Councils, producing Snapshots and Action Plans, presenting findings to senior Council staff and development of a final report. - The final report submitted to the Ministry of Health advocated for system challenges faced in the CNSWJO footprint, in particular housing and childcare. - Development and submission of a joint tender application for the welcome experience. - Development and submission into a joint inquiry on essential housing in rural areas. - RDN attended regular CNSWJO meetings and engaged with the Health Mayors portfolio. - RDN attended the Country Mayors forum and briefed on the successes of the approach undertaken with CNSWJO as part of the Local Government Workforce Planning Program.