

Strategic KPIs Progress Report 2026

At the 2025 strategic planning workshop, the Board agreed to the following strategic KPIs for 2025-26. KPI application to the strategic plan is focussed at a primary goal level and an adverse trend in any of the areas would be an indicator of HLNT failing to deliver on its strategic plan.

Strategic Priority Area	Goal	#	Proposed KPI	Rationale	Report
Financial solvency	4	A	Financial reserves maintain a green light indicator as defined in HLNT's Reserves Policy	To demonstrate long term organisational and financial stability. Any unplanned decline in performance would indicate a significant issue likely to impair HLNT's ability to achieve its strategic objectives.	Page 2
	4	B	Diversification of sources of income is maintained and expanded.	To demonstrate long term organisational and financial stability. Any significant decrease in the diversity of HLNT's sources of income would indicate a material issue with potential to impair HLNT's ability to achieve its strategic objectives.	Page 4
Fulfilling Service Agreements	3, 4	C	To meet all external Service Agreement KPIs and reporting requirements	To demonstrate funder satisfaction with performance and the delivery of services. Any decline in performance would indicate a significant issue likely to impair HLNT's ability to achieve its strategic objectives and financial stability.	Page 11
Community satisfaction	1, 2, 3	D	Community, client and stakeholder satisfaction levels are maintained, based on longitudinal data	To demonstrate ongoing satisfaction with HLNT services and programs, measured through a variety of mechanisms including program and service evaluations, client evaluation and feedback forms, TW reader feedback, cyclical stakeholder feedback such as Quality reviews and strategic stakeholder engagement reviews. Any decline in performance would indicate a significant issue likely to impair HLNT's ability to achieve its strategic objectives and financial stability.	Page 13
Human resources	1, 2, 3, 4	E	Vacancy rate in staff and Board positions based on longitudinal data.	To demonstrate that Healthy Living NT has adequate human resources to sustain program and service delivery in accordance with Service Agreements. A high staff vacancy rate or active staff positions remaining unfilled for a lengthy period (> 3 months) would indicate that increased level of risk in terms of being able to deliver contracted services and/or reduced income, thus impairing HLNT's ability to achieve its strategic objectives and financial stability. Retention rates will also be monitored under this indicator but are considered less relevant in the context of service delivery and income. Retention rates are pertinent to consider in terms of corporate knowledge and governance.	Page 22

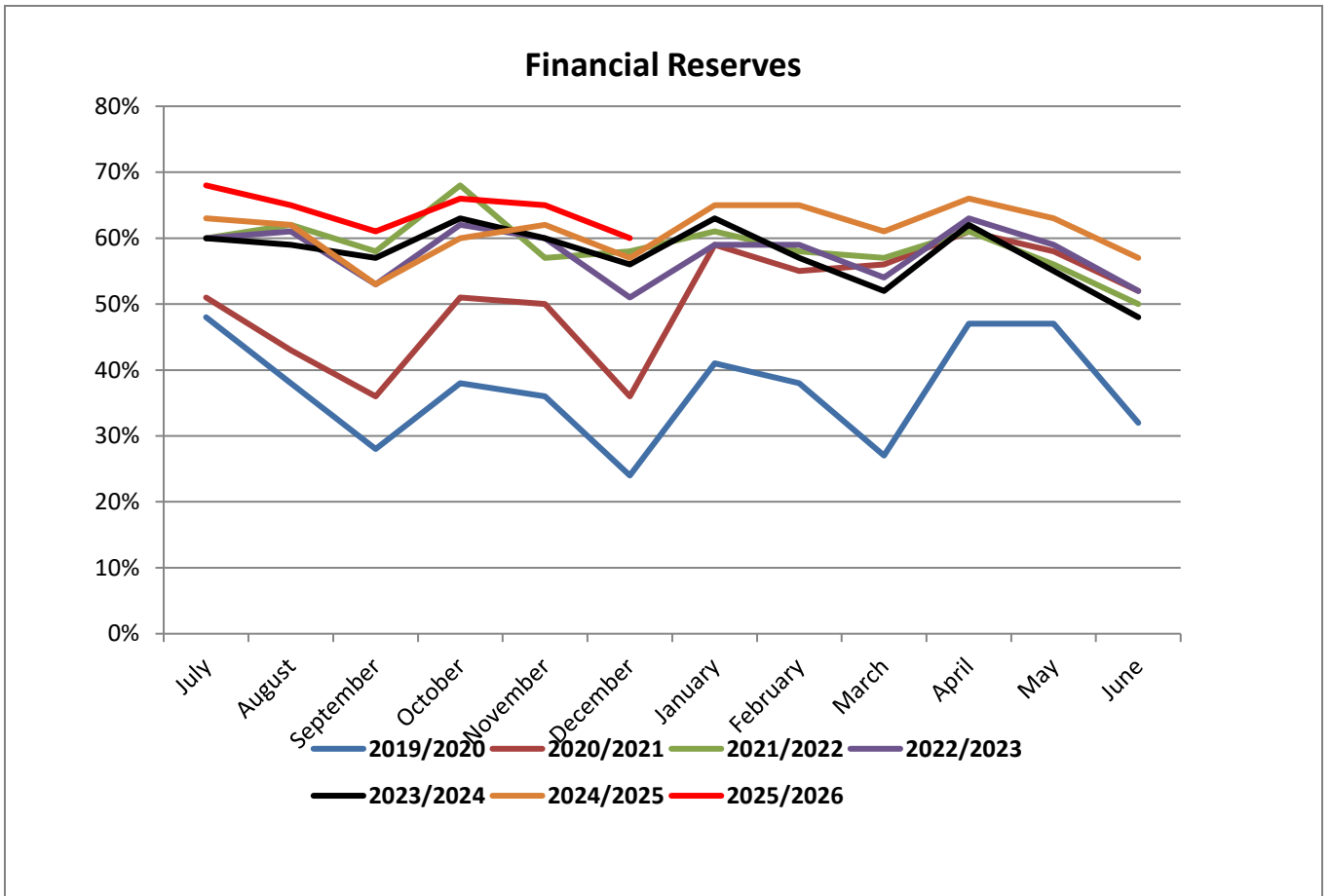
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Strategic Priority Area	Goal	#	KPI	Rationale
Financial solvency	4	A	Financial reserves maintain a green light indicator as defined in HLNT’s Reserves Policy	To demonstrate long term organisational and financial stability. Any unplanned decline in performance would indicate a significant issue likely to impair HLNT’s ability to achieve its strategic objectives.

Progress Report:

As indicated in the chart on page 3, for the period from 2019/20 onwards:

- HLNT maintained discretionary cash reserves well in excess of management threshold levels i.e. Green light maintained throughout period
- In 2019/20 and the first half of 2020/21, discretionary cash reserves were at lower threshold levels (20-40%) following recovery from expenditure of significant cash in 2018/19 for the fit-out of shop 3 Tiwi Place.
- From January 2020/21, cash reserves showed decreasing levels of variance as reserve levels normalised
- From 2021/22 onwards, cash reserves were consistently maintained above 50%
- YTD trends in 2025-26 show reserves continuing to consistently sit above 50%.



Traffic Light	Reserve Threshold Definitions
●	Cash assets (reserves) exceed the cash value of current liabilities by greater than or equal to 20% ($\geq 20\%$); no action required.
●	Cash assets (reserves) exceed the cash value of current liabilities by greater than or equal to 10% but less than 20% ($\geq 10\% - < 20\%$); careful administration and monitoring by management required.
●	Cash assets (reserves) exceed the cash value of current liabilities by less than 10% ($< 10\%$); immediate management review and action required.

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Strategic Priority Area	Goal	#	KPI	Rationale
Financial solvency	4	B	Diversification of sources of income is maintained and expanded.	To demonstrate long term organisational and financial stability. Any significant decrease in the diversity of HLNT's sources of income would indicate a material issue with potential to impair HLNT's ability to achieve its strategic objectives.

Progress Report:

HLNT's sources of income for 2024-25 is shown in the chart on page 6. It indicates a well-diversified portfolio of income sources and contracts.

Diversity of Income Sources

The charts on page 7-9 (for the period from 2009/10 – 2024/25 inclusive), show a longitudinal perspective of sources of income and proportion of income by source:

- Consistent maintenance of diversified sources of income over the period
- Commencement of **6 new program income sources** over the period, of which **3** are ongoing:
 - Outreach Health Services: commencing 2010/11 with Service Deed through to 30 June 2027 and a Program Agreement to 30 June 2026.
 - Active Recreation Program: commencing 2016/17 on the basis of an annual agreement up until 2018/19. Established as a 5-year agreement in 2019/20 to 30 June 2024. Extended in further a 5-year agreement in 2024 to 30 June 2029
 - Healthy Ageing Program Alice Springs: Funded by the NT PHN. Commencing Q2 2023/24 and contracted until 30 June 2025. Ceased 2025
 - Healthy Territory Kids Pilot project: commencing 2017/18 for a 2-year period. Ceased December 2019
 - Psychology Services pilot project in 2019/20 funded by the PHN. One-year pilot project not re-funded with the PHN favouring a more centralised approach to mental health services
 - Multi-Disciplinary Team Program – System Navigator function – Funded in June 2025 through to June 2028.

Overview of Core Income Sources

- **Core NT DoH service contracts:**
 - 5-year service agreement 2022-2027 commencing 1 July 2022 provided for the amalgamation of service plans for health education services. This allows for significantly greater flexibility in service delivery and resource allocation, improved efficiencies in reporting and more contemporary KPIs.
 - Stagnation in funding levels– unlikely to change in the future except for minor indexation.
 - Priorities of NT Government are not focussed on health or preventative health. NT DoH and NTG fiscal constraints

➤ Comfortably meeting KPIs

- **NDSS**

- 2021-24 NDSS Agreement extended for 1 year period to June 2025 and again extended for a further 1 year period to June 2026. CDoH has confirmed likelihood of further extension (vs. closed tender) to 2028.
- The apparent increase in NDSS funding levels in 2021/22 is largely due to the incorporation the RAAHS Supply Scheme within the NDSS Agreement (it previously sat outside the NDSS Agreement in the form of a direct agreement between CDoH and HLNT and shown as Direct Income).
- NDSS Agreement 2021-2024 imposed high degree of risk and variability in services and funding due to (self-serving) centralisation by DAL, concentration on nationally consistent services, digital by default approach and efficiency dividends.
- New funding model (needs-based vs population-based) introduced in 2022/23 significantly favoured HLNT; increasing funding to ~\$1m, also showing the level of underfunding the NT has received over the decades. 2023/24 and 2024/25 funding is at a similar level. No transparency at Agent level and limited ability to influence.
- 25% increase in NDSS funding received part-way through 2025-26, which is intended to be recurrent in 2026-27. This has the potential to raise the proportion of income from the NDSS to >35%, indicating that a degree of caution should be applied to ensure that HLNT does not become dependent on a single source of income.
- DAL will seek to increase the degree of centralisation (funds and services) within the merged DA Group. WA, SA, NT and Vic will be collaboratively advocating to the CDoH in respect of the next contract but limited in ability to influence / lack of visibility and transparency.

- **Outreach Health Services:**

- The NT PHN's contract with Commonwealth DoH for the MOICD Program ceases on 30 June 2026. The Commonwealth has projected the release of a new tender for a (renamed) First Nations Health Outreach Services Grant for the 2027 and 2028 financial years. In this yet to be released tender, the PHN will be invited to apply in a closed, non-competitive, arrangement for funding of \$7-7.5M per annum.
- While there is every indication that HLNT services will be ongoing, the shape and quantum are not known at this stage. Additionally, the level of funding outsourcing directly to AMS is likely to increase. Remote service provision will become increasingly unviable.
- Significant variability in income levels from Outreach Health Services Program (potentially becoming an overly significant income source in 2014/15 but has been declining since) due NT PHN policy to transition services and funding to community-controlled services and NT DoH.
- Funding level horizons are not greater than 6 months and are subject to change. Increasing community control of funding and services has resulted in lower fee for service income over the past 3-4 years.
- 2019/20-2021/22 income from this program impacted by COVID-19 through service cessation, travel logistics and clinic capacity / priorities.
- 2023/24 income increased marginally due to PHN realisation that outsourcing funding to NT DoH is not producing the same outcomes/results as service provision contracted to HLNT. However, the remote health sector is extremely fragile and beset by primary health care workforce collapse which diminishes clinic ability to support visiting services.

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➤ 2024/25 income decreased marginally. Increased outsourcing to AMS sector leading to reduced / ad hoc contracting to HLNT

- **Active Recreation Program:**

➤ 5-year agreement 2024-2029 achieved. Comfortably meeting KPIs

- **Multi-Disciplinary Team Program:**

➤ This is a significant new program for HLNT. MDT program funding (GST exc.) over the life of the Agreement is a maximum of \$978,469, projected as follows:

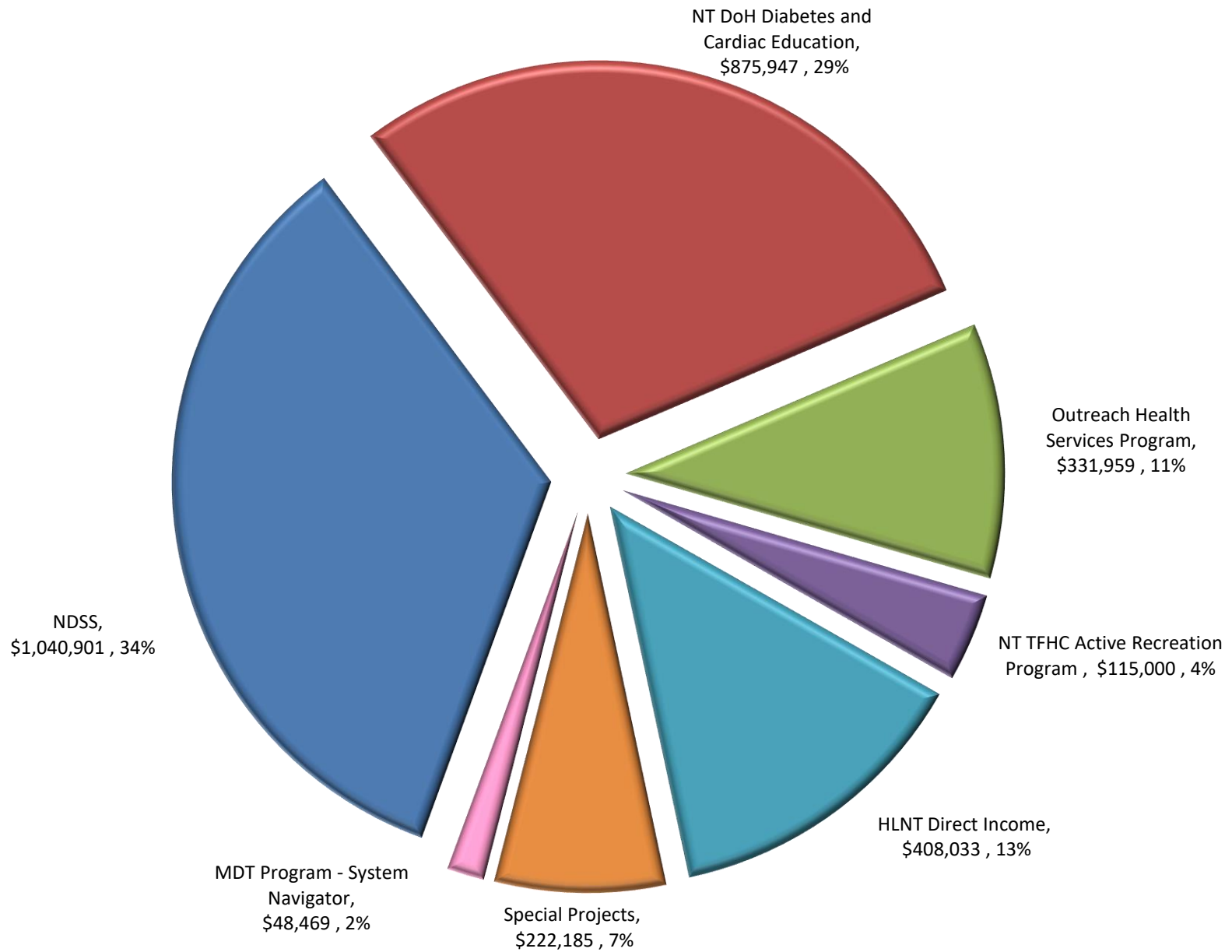
Funding (GST Exc.)	2024/25	2025/26	2026/27	2027/28
System Navigator	\$48,469	\$250,000	\$250,000	\$250,000
Supplementary Funding	-	\$10,000	\$10,000	\$10,000
Allied Health Services		Variable	Variable	Variable
Support Services		150,000		

- **HLNT Direct Income:**

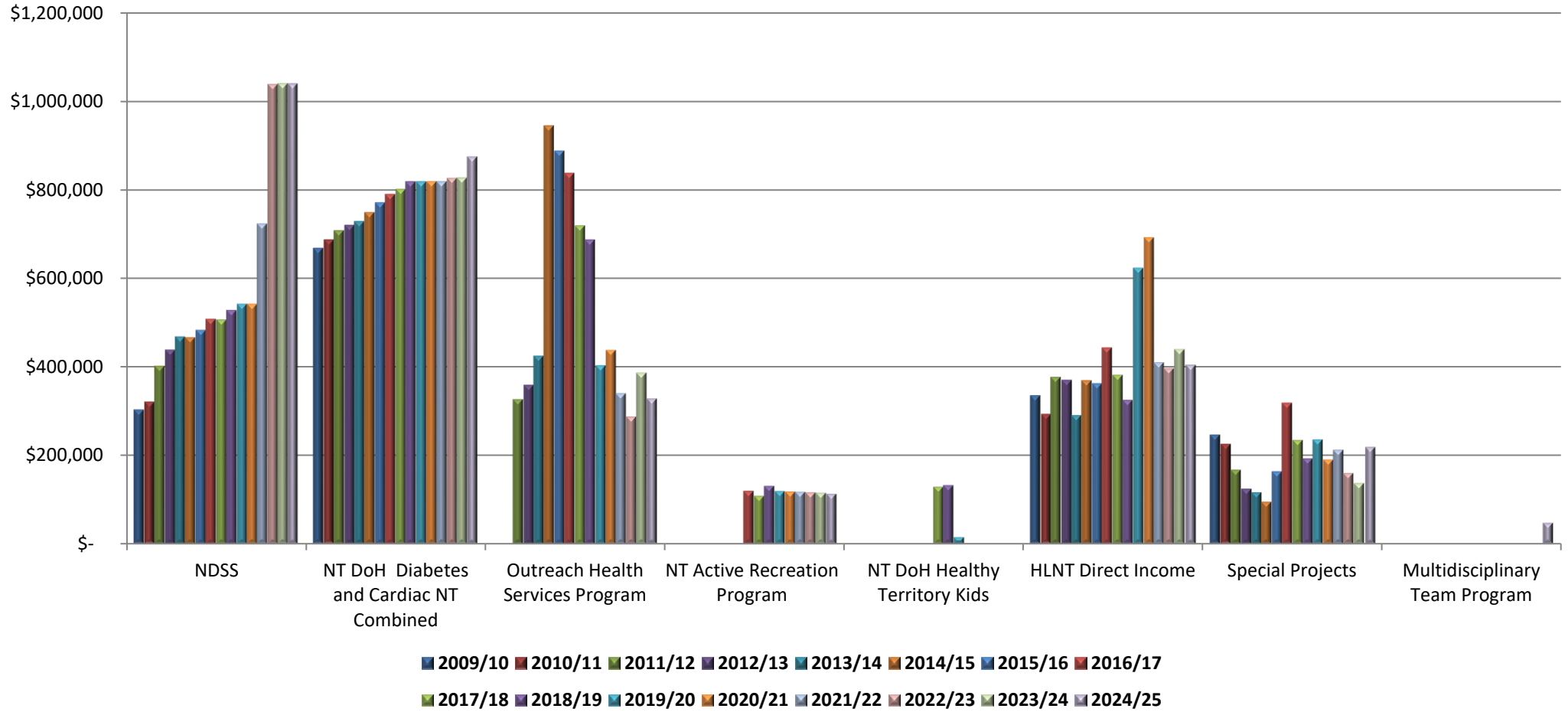
➤ Fairly constant HLNT independent income to 2018/19, with a spike in 2019/20 and 2020/21 reflecting Federal Government stimulus support in relation to COVID-19. Decrease in 2021/22 due to the incorporation the RAAHS Supply Scheme within NDSS income – Refer charts on page 7

- **Special Project Income:** Normal cyclical variation in Special Project income

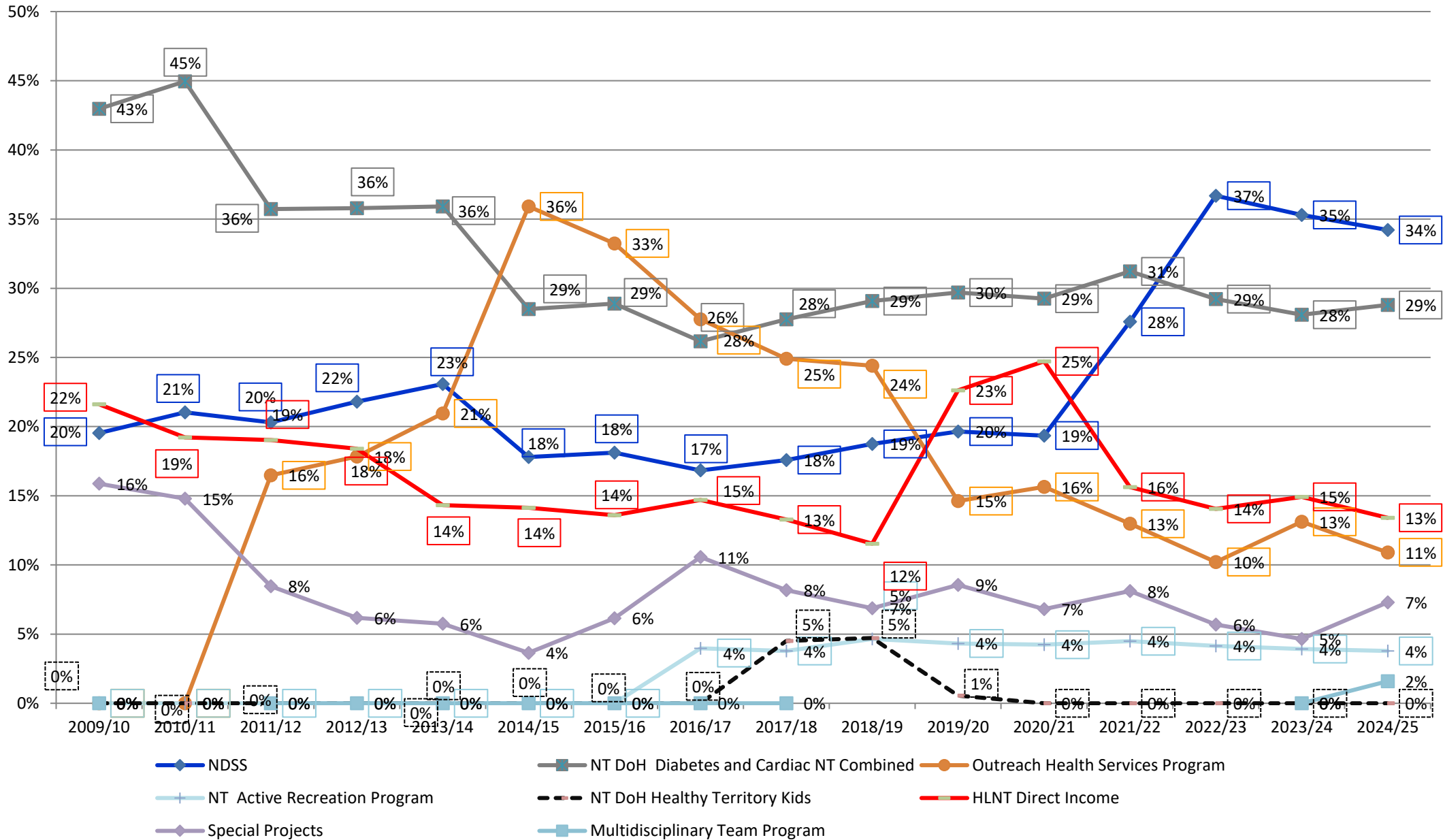
2024-25 Income By Source



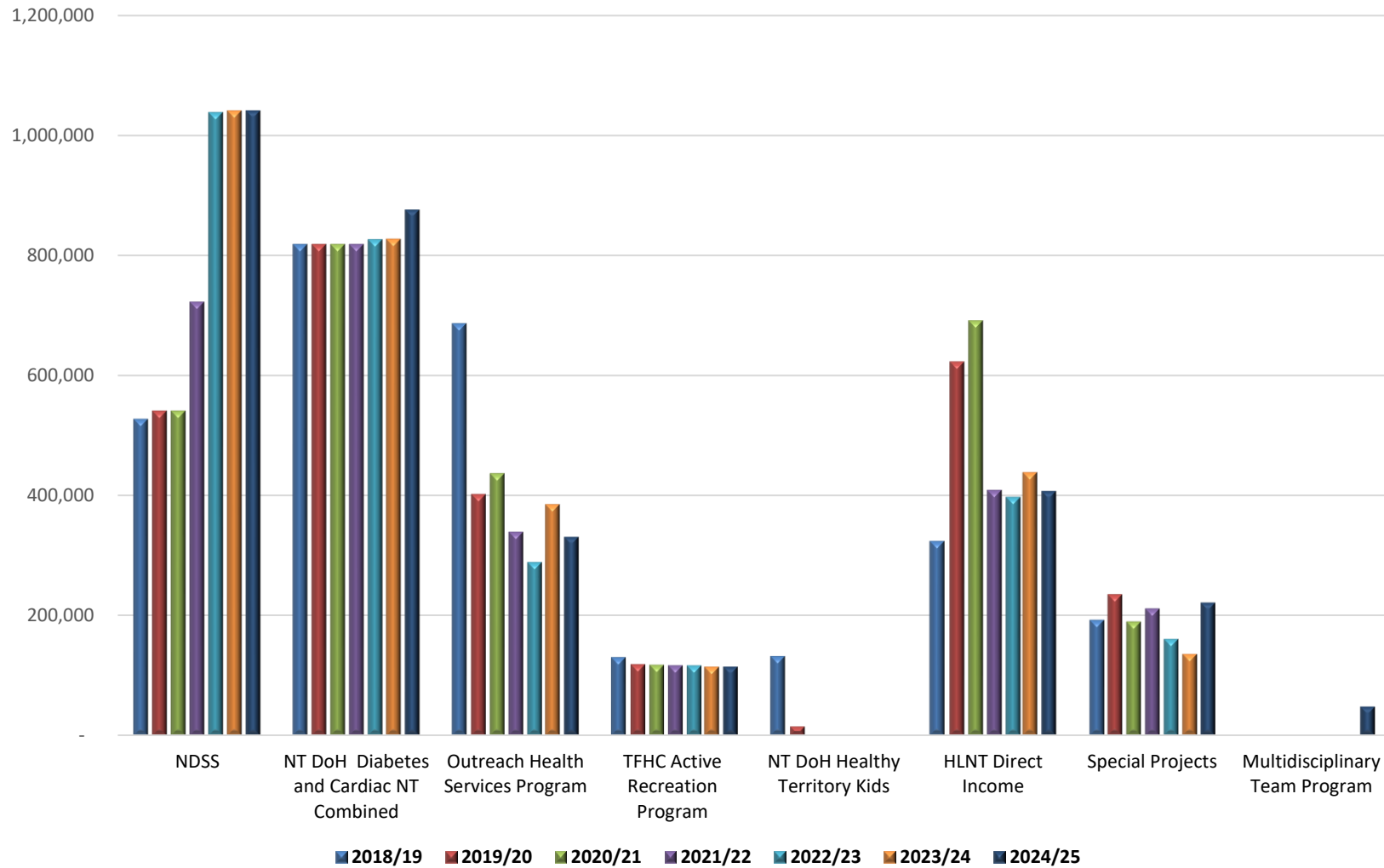
HLNT Sources of Income 2009/10 - 2024/25



HLNT Proportion of Income by Source



Comparison of Income Sources 2019 - 2025



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Strategic Priority Area	Goal	#	KPI	Rationale
Fulfilling Service Agreements	3, 4	C	To meet all external Service Agreement KPIs and reporting requirements	To demonstrate funder satisfaction with performance and the delivery of services. Any decline in performance would indicate a significant issue likely to impair HLNT's ability to achieve its strategic objectives and financial stability.

Progress Report:

Healthy Living NT holds a number of service contracts:

Contract	Funder	Held since	Term	Expiry	Contract Performance
NT Agent for NDSS	DoH/DAL	1987	4 years	30 June 2024 Extended 30/6/2025 Extended 30/06/2026 Probable extension 30/06/2028	All quarterly and annual reports and acquittals and annual Audited Financial Statements accepted by funders. All KPI and reporting requirements met. Significant advocacy in the context of the National Consistency Taskforce resulted in HLNT education programs being accepted as nationally non-consistent services. Further program and 25% funding uplift in mid 2025/26
<ul style="list-style-type: none"> NDSS Access Point 	DoH/DAL	1987/2016	3 years	30 June 2026	All reporting and delivery requirements met. Remote Distribution and Access Point operations underwent significant scrutiny in the context of the National Consistency Taskforce in the 2021-24 contract. Both were reaffirmed: <ul style="list-style-type: none"> Remote Distribution as a National Service Delivery Program Access Point status as a nationally non-consistent service. DAL is likely to want to increase the degree of centralisation (funds and services) within the merged DA Group. WA, SA, Vic and NT are collaboratively advocating to the Commonwealth in respect of the next contract
<ul style="list-style-type: none"> NDSS RAAHS Distribution 	DoH/DAL	2016	3 years	30 June 2026	
Diabetes and Cardiac Education Services – TE & CA	NT DoH	1989/2002	5 years	30 June 2027	5-year service agreement 2022-2027 provided for the amalgamation of service plans for health education services. This allows for significantly greater flexibility in service delivery and resource allocation, improved efficiencies in reporting and more contemporary KPIs.
Free Syringe program	NT DoH	1999			All six monthly and annual reports and acquittals accepted by funder. All KPI and reporting requirements met. Funding submission to NT DoH for increased resourcing of historically funded services unsuccessful in the context of NTG fiscal restraints

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MOICD Diabetes, Dietetic and Cardiac Education	NT PHN/DoH	2011	Varied 6 months-3 years	Service Deed 30 June 2027 Program Agreement 30 June 2026	<p>Fee for service contract. All reporting and delivery requirements met.</p> <p>NT PHN confirmed as fundholder to 2026. The NT PHN's contract with Commonwealth DoH for the MOICD Program ceases on 30 June 2026. The Commonwealth has projected the release of a new tender for a (renamed) First Nations Health Outreach Services Grant for the 2027 and 2028 financial years. In this yet to be released tender, the PHN will be invited to apply in a closed, non-competitive, arrangement for funding of \$7-7.5M per annum</p> <p>Further transition of funds to community-controlled health services expected. HLNT services will be ongoing, but the shape and quantum are not known at this stage.</p>
Physical Activity	NT People, Sport and Culture	2015/16	5 years	30 June 2029	All six monthly and annual reports and acquittals accepted by funder. All KPI and reporting requirements met. Converted to 5-year agreement in 2019/20.
MDT Program – System Navigator	NT PHN	2024-25	3 years	30 June 2028	<p>New program – all reporting and KPIs met.</p> <p>Slow build-up of referrals to program. GP marketing is a PHN responsibility</p>
MDT Program – Allied Health Services	NT PHN	2025-26	3 years	30 June 2028	<p>New program – all reporting and KPIs met.</p> <p>Slow build-up of referrals to program. GP marketing is a PHN responsibility</p>
MDT Program – Support Services	NT PHN	2025-26	1 year	30 June 2026	<p>New program – all reporting and KPIs met.</p> <p>Slow build-up of referrals to program. GP marketing is a PHN responsibility</p> <p>Program may or may not be extended in 2026/27</p>

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Strategic Priority Area	Goal	#	KPI	Rationale
Community satisfaction	1, 2, 3	D	Community, client and stakeholder satisfaction levels are maintained, based on longitudinal data	<p>To demonstrate ongoing satisfaction with HLNT services and programs, measured through a variety of mechanisms including program and service evaluations, client evaluation and feedback forms, TW reader feedback, cyclical stakeholder feedback such as Quality reviews and strategic stakeholder engagement reviews.</p> <p>Any decline in performance would indicate a significant issue likely to impair HLNT's ability to achieve its strategic objectives and financial stability.</p>

Progress Report:

Community and client satisfaction are measured at a number of touchpoints including activity, program and service level. The following charts show overall client satisfaction at a high service level with HLNT for its primary client groups (diabetes and cardiac) in both Alice Springs and Darwin. They provide longitudinal snapshots of client feedback by year. Whilst annual variances are evident, there are no discernible negative trends and positive results are broadly consistent over the period.

However, it is important to note that sample sizes are becoming smaller/skewed over the years as HLNT Darwin takes on more new clients (particularly GDM) and fewer review clients. The evaluation results shown on pages 15-21 relate only to clients receiving an individual consultation due to the evaluation requirements of group education programs. Since 2023, the vast majority of responses are from the Alice Springs service. In **2025**, 95% of responses were from clients with diabetes in Alice Springs (n=74) comprising the following age groups: <40 years – 18%, 40-60 years – 46% and >60 years – 36%. Of these:

- 100% of clients would recommend our service to another person
- 100% of clients intended to return to Healthy Living NT for ongoing review
- 100% of clients felt welcome to contact Healthy Living NT in the future

Specific program and activity evaluations are detailed in:

- Annual and Performance Reports
- The Life. Be in it. Annual Report
- Territory Way reader evaluations
- Project specific reports

The Bill Raby Diabetes Fellowship also contributes significantly to community engagement and successful recipients are likely to be strong promoters of HLNT.

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Client satisfaction (2025) at a **program level** is high with all health education programs receiving Net Promoter Score (NPS) as below (note: any score above 58 is considered excellent):

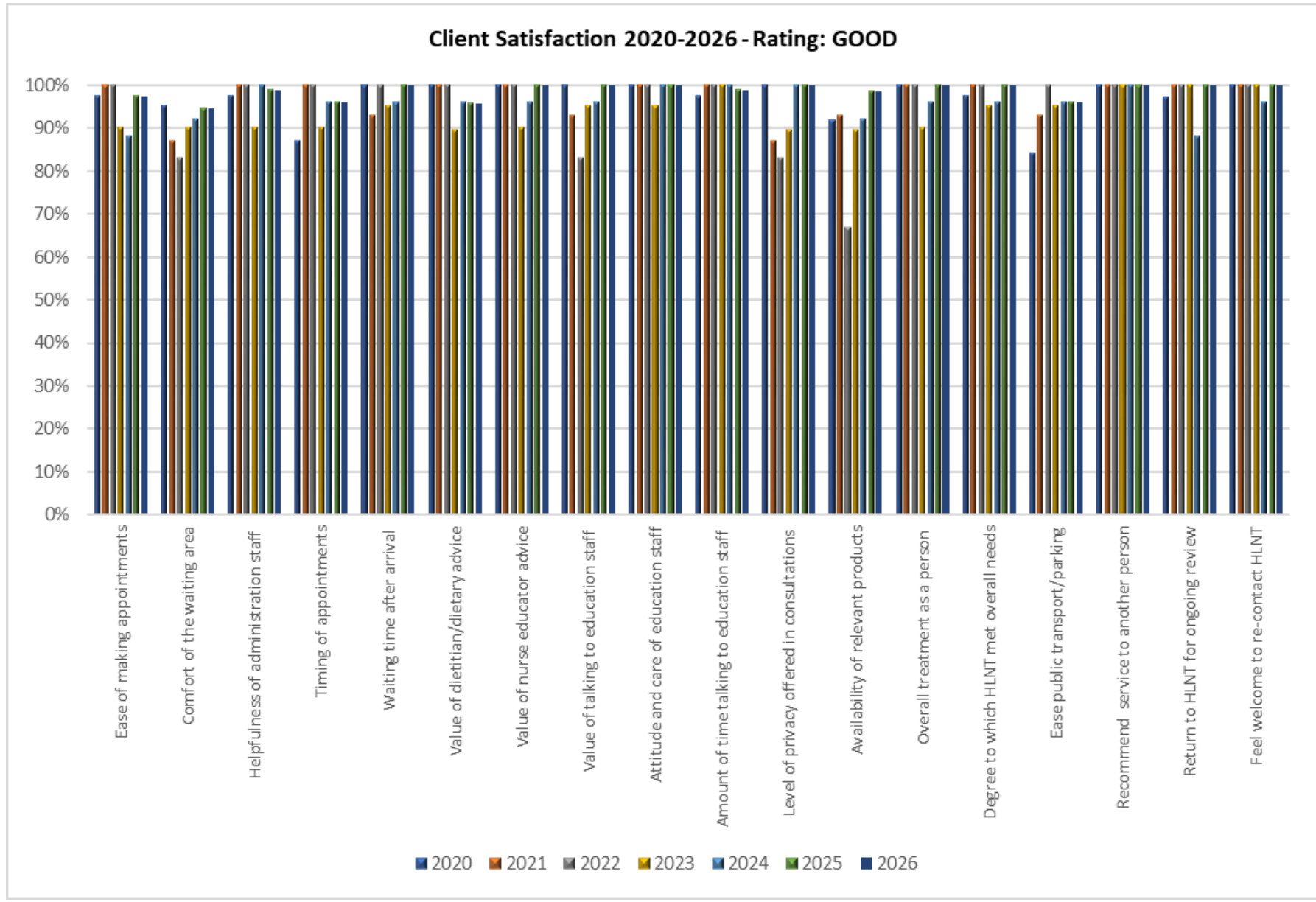
- Getting Started Group **NPS: 63.4** (259 respondents)
- Gestational Group **NPS: 70.7** (368 respondents)
- Healthy Heart Program **NPS: 94** (122 respondents)
- Health Promotion programs:
 - Healthy Ageing ASP **NPS: 93** (105 respondents, combination of program and workshops)
 - Seniors Resistance Program **NPS: 95.5** (90 respondents)

The Net Promoter Score was formally adopted as a universal key satisfaction indicator in 2023-24. Longitudinal data (as shown below) will be built upon through time:

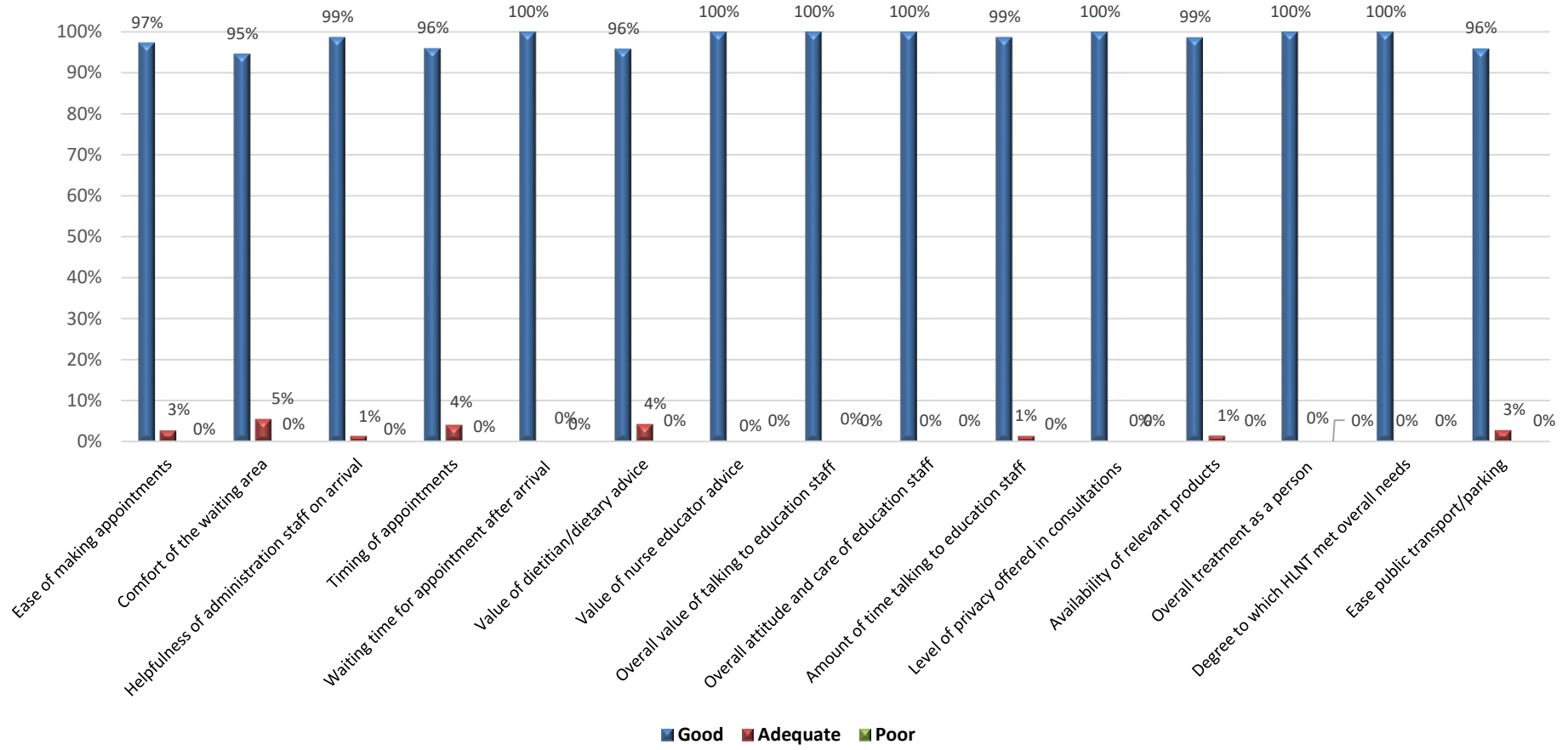
Net Promoter Score	2023	2024	2025
Getting Started Group	71	72	63
Gestational Group	79	77	71
Healthy Heart Program		91	94
Healthy Ageing ASP		88	93
Seniors Resistance Program			95

Annual variance is monitored with underlying causes known in most cases.

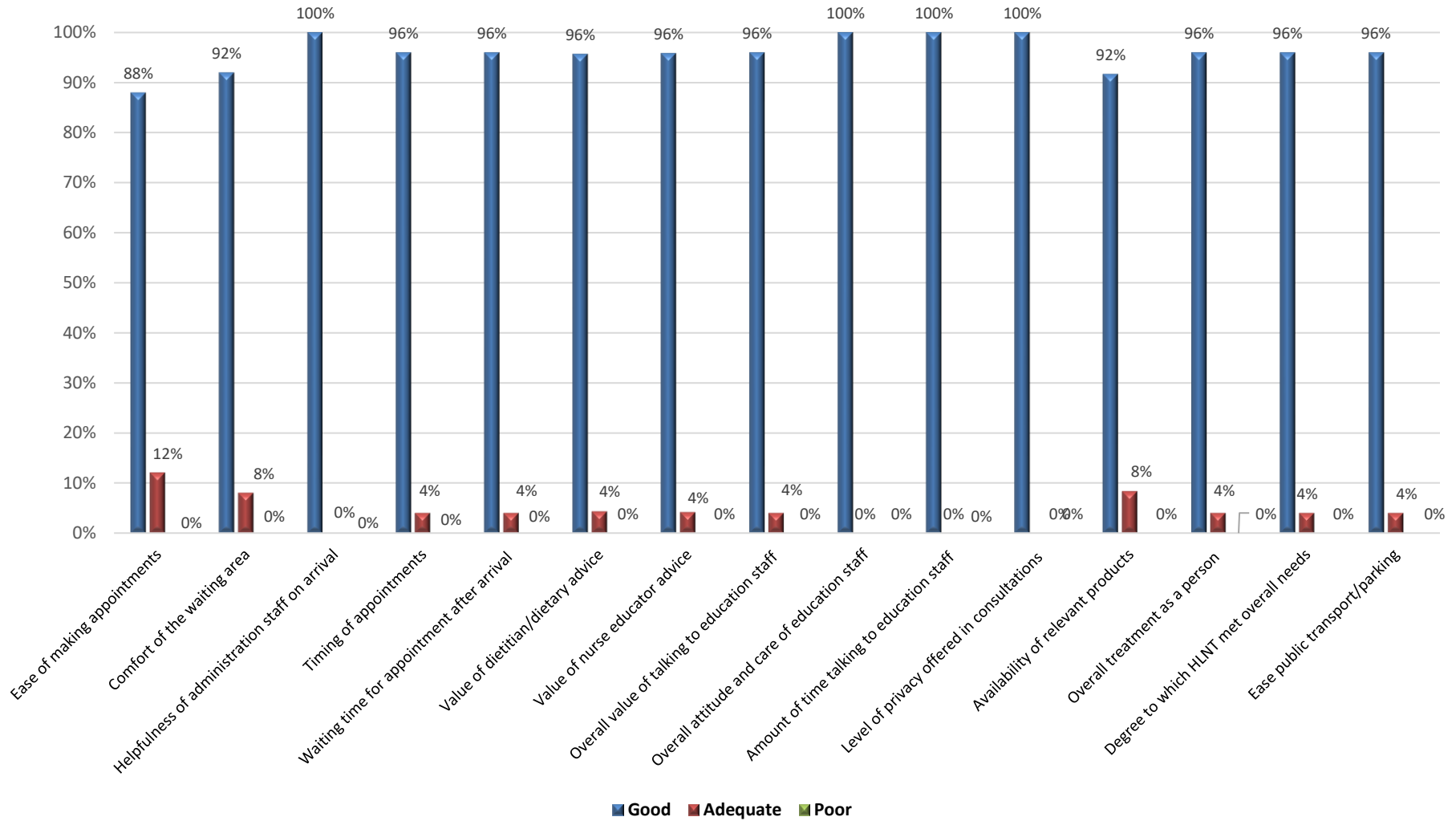
Remote education services are not evaluated at a client level at the funder's direction. Feedback is limited to formal, but sporadic reports from clinics and verbal feedback on the ground from clients and clinic staff. Due to the dynamics of remote communities such as mobile population, cultural expectations and clinic closures, client satisfaction cannot be inferred through statistics such as how many people received review education. The NT PHN undertakes service evaluation for the whole of the MOICD and its other remote programs.



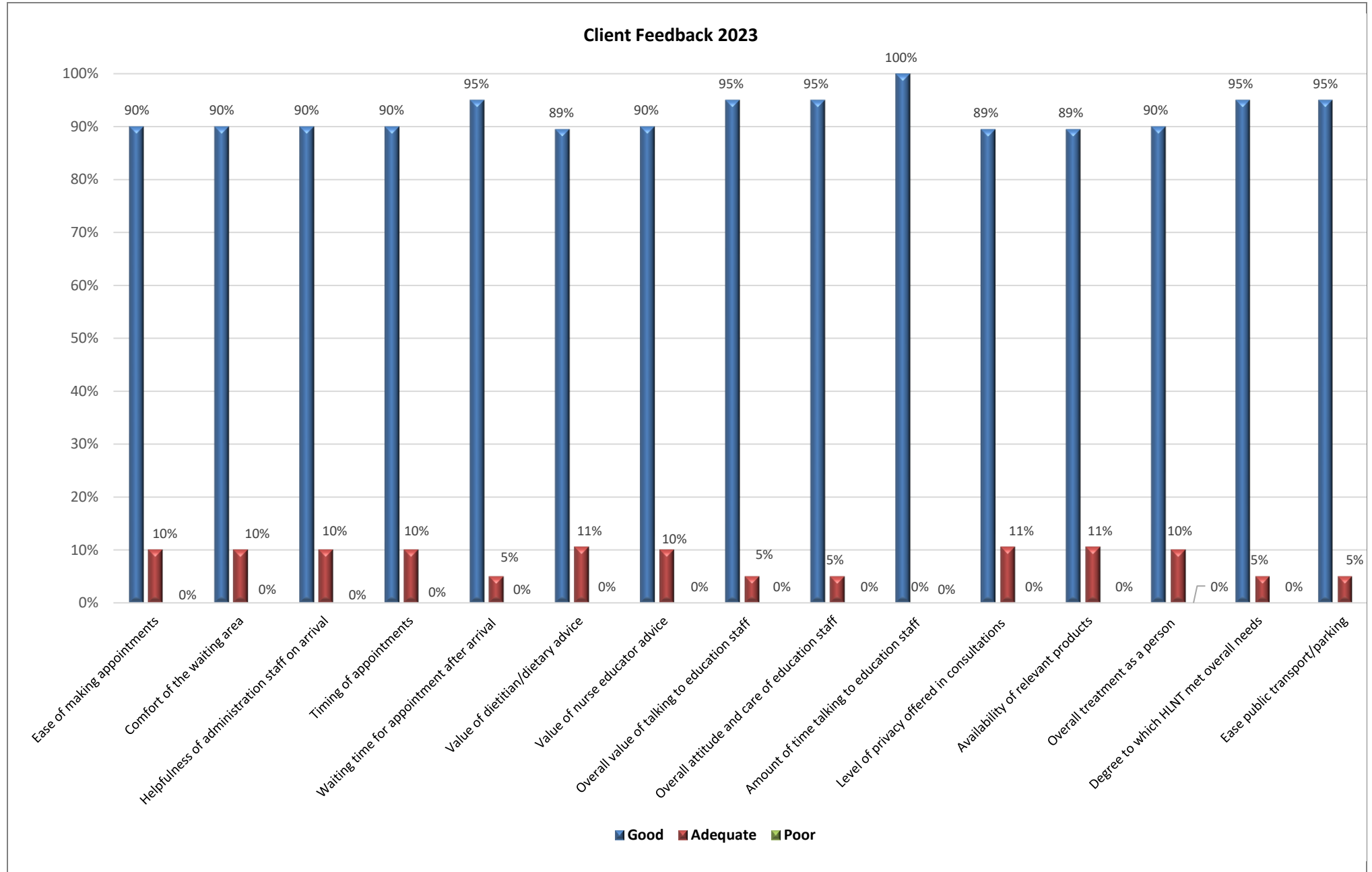
Client Feedback 2025



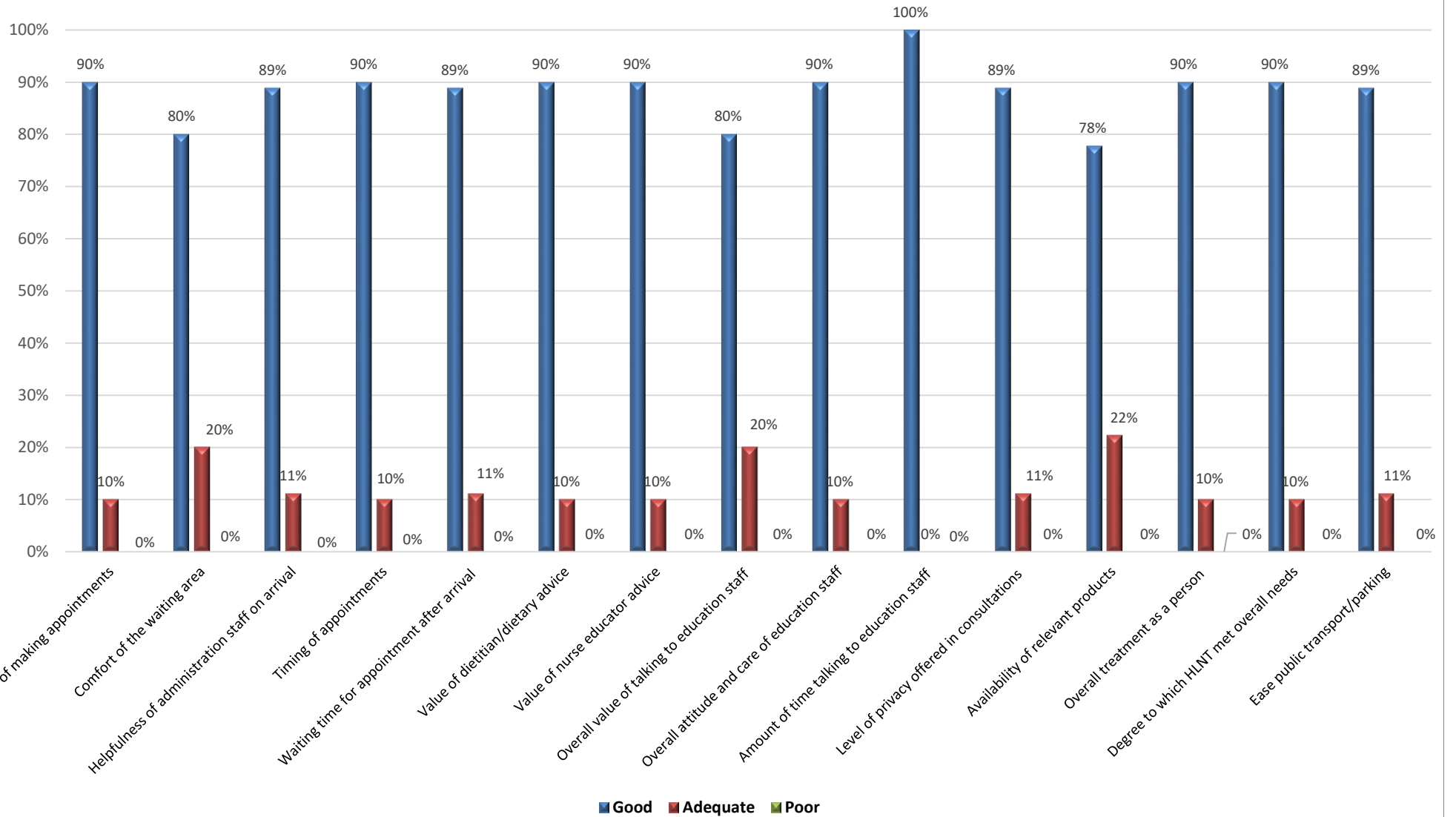
Client Feedback 2024



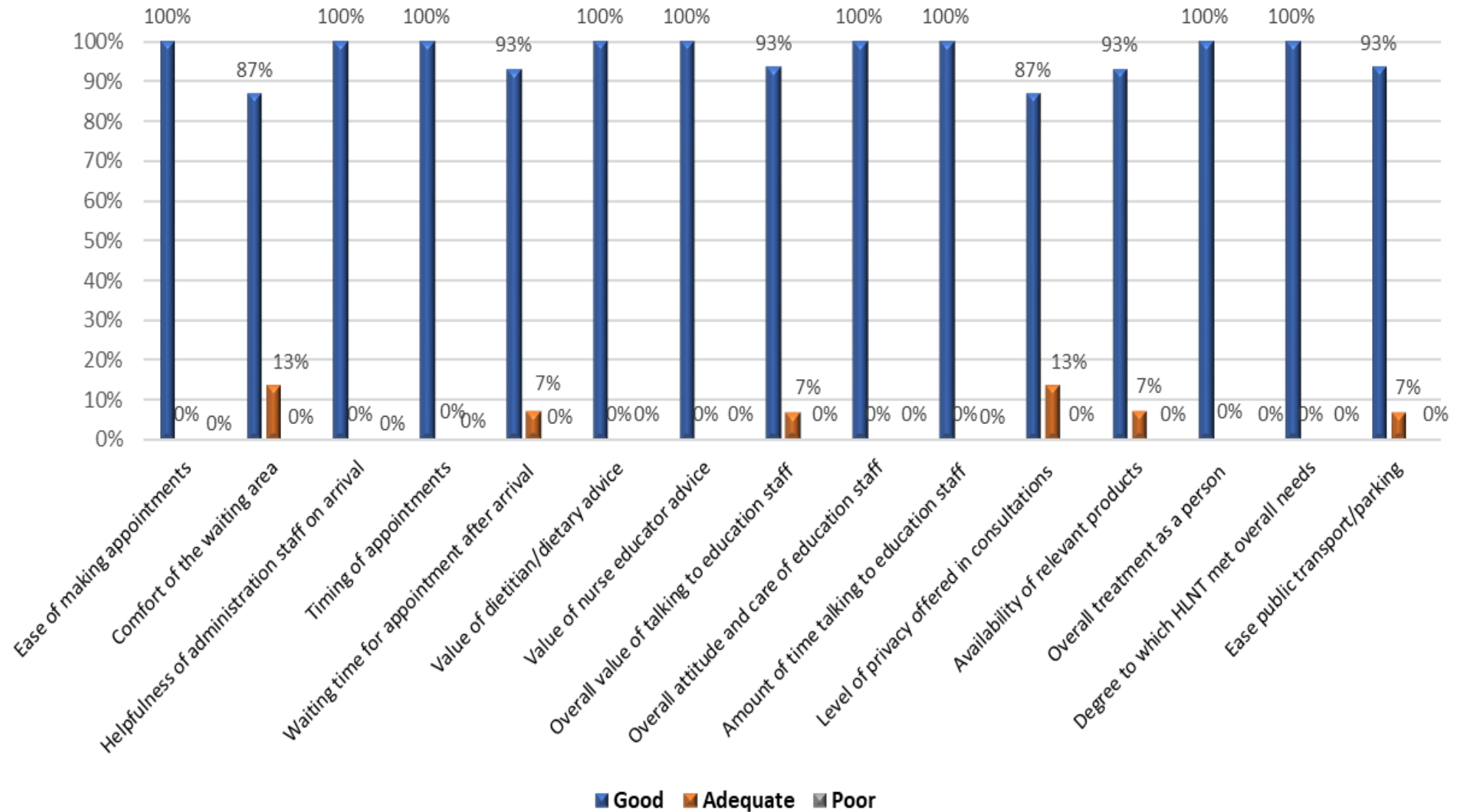
Client Feedback 2023



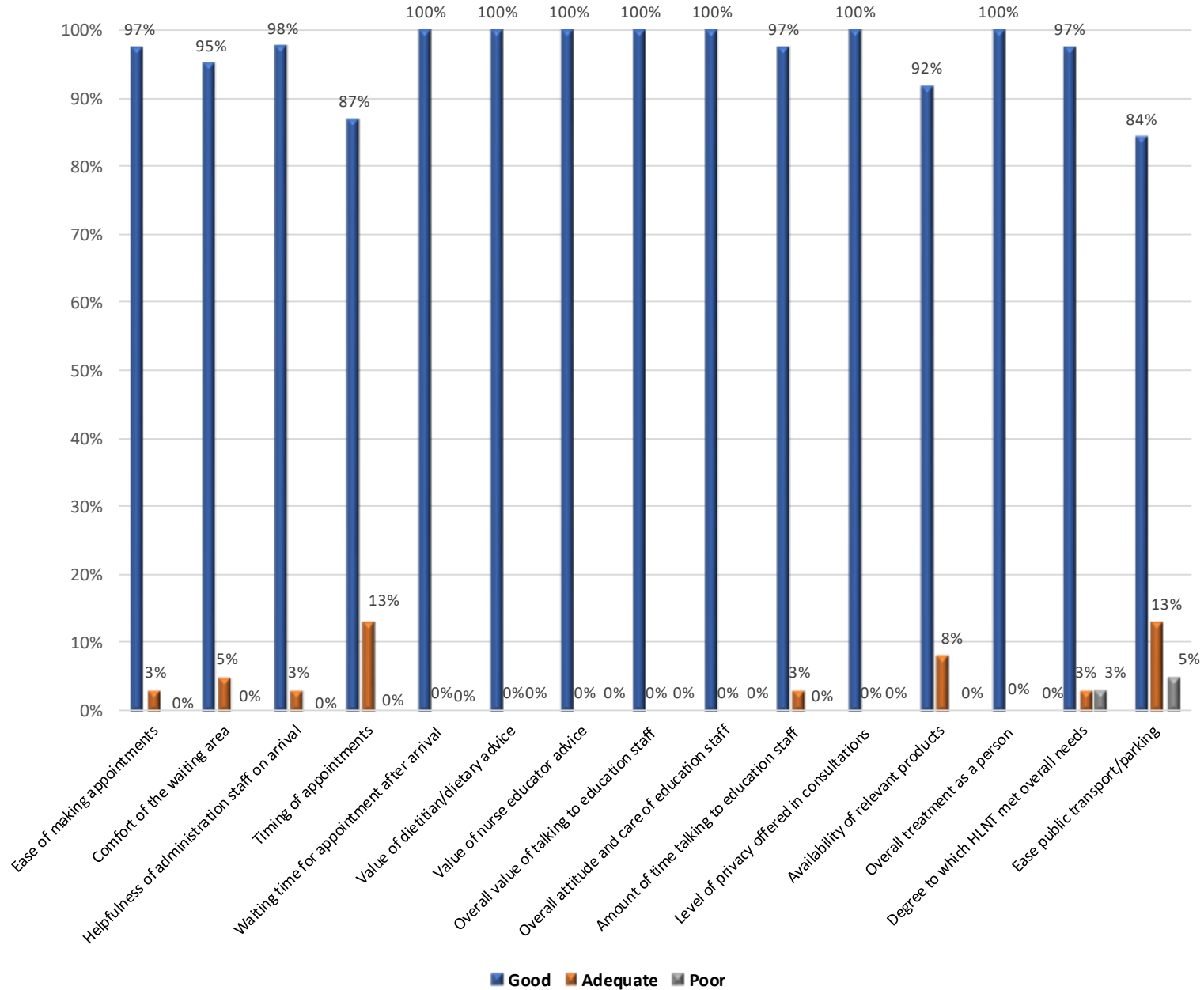
Client Feedback 2022



Client Feedback 2021



Client Feedback 2020



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Strategic Priority Area	Goal	#	KPI	Rationale
Human resources	1, 2, 3	E	Vacancy rate in staff and Board positions based on longitudinal data.	<p>To demonstrate that Healthy Living NT has adequate human resources to sustain program and service delivery in accordance with Service Agreements.</p> <p>A high staff vacancy rate or active staff positions remaining unfilled for a lengthy period (> 3 months) would indicate that increased level of risk in terms of being able to deliver contracted services and/or reduced income, thus impairing HLNT's ability to achieve its strategic objectives and financial stability.</p> <p>Retention rates will also be monitored under this indicator but are considered less relevant in the context of service delivery and income. Retention rates are pertinent to consider in terms of corporate knowledge and governance.</p>

Progress Report:

1. Board (based on previous year AGM)

Refer charts overleaf on page 23.

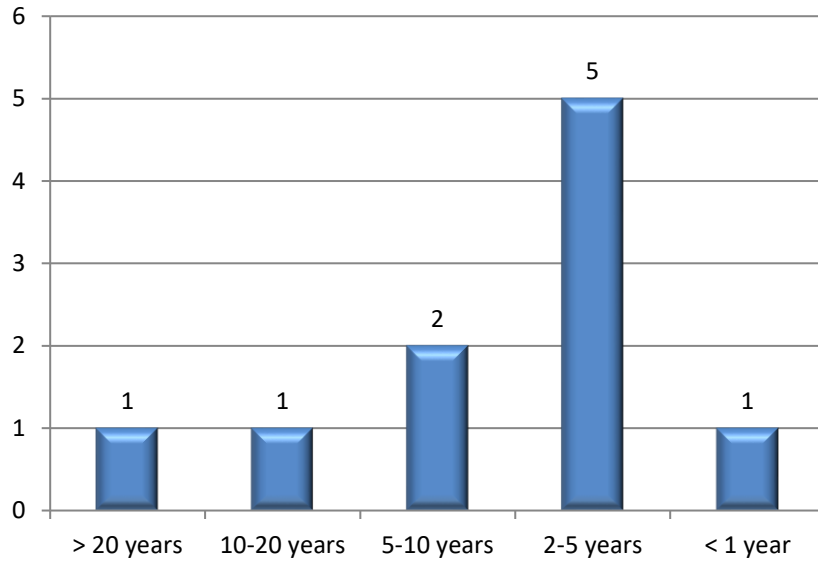
- There have been no instances of vacancies in the Board in the past 10 years. The current Board has maintained 10 members for 3 consecutive years compared to the 6-8 members in the prior 4 years.
- 40% of Board members had served for 5 years or more
- 40% of Board members were aged >60 years; 30% of Board members were aged <40 years

2. Staff (based on previous year AFS)

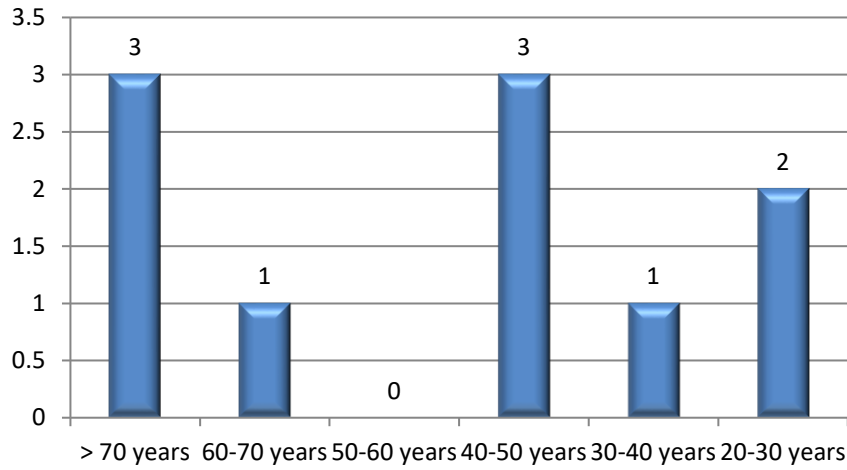
Refer charts overleaf on pages 24-31. Over the past 10 years:

- ~≥50% of employees have greater than 2 years' service with HLNT (2025 = 68%). This statistic should be considered in the context of the turnover/short term appointments of remote education staff, repeat offenders and /or dedicated project specific staff, and maternity leave.
- The number of new staff annually needs to be considered in a broad number of contexts: project commencements, probationary periods and a person's fit with the organisation, and new staff re-employed (i.e. former employees) to work for HLNT.
- Over the past 10 years, there have been 11-12 instances where a position has been vacant for >3 months. These have been specialist health professional positions in both Darwin and Alice Springs, and sometimes, part-time positions which are harder to recruit to. Telehealth and FIFO options have been implemented in the past to overcome specific shortages and will be used again in the future. All health professional positions are currently full.
- Employing Indigenous staff to ATSI-designated programs has been challenging over the past few years, however a new manager ATSI programs is scheduled to commence in March. Retention of ATSI staff been impacted by program delays at a national level.

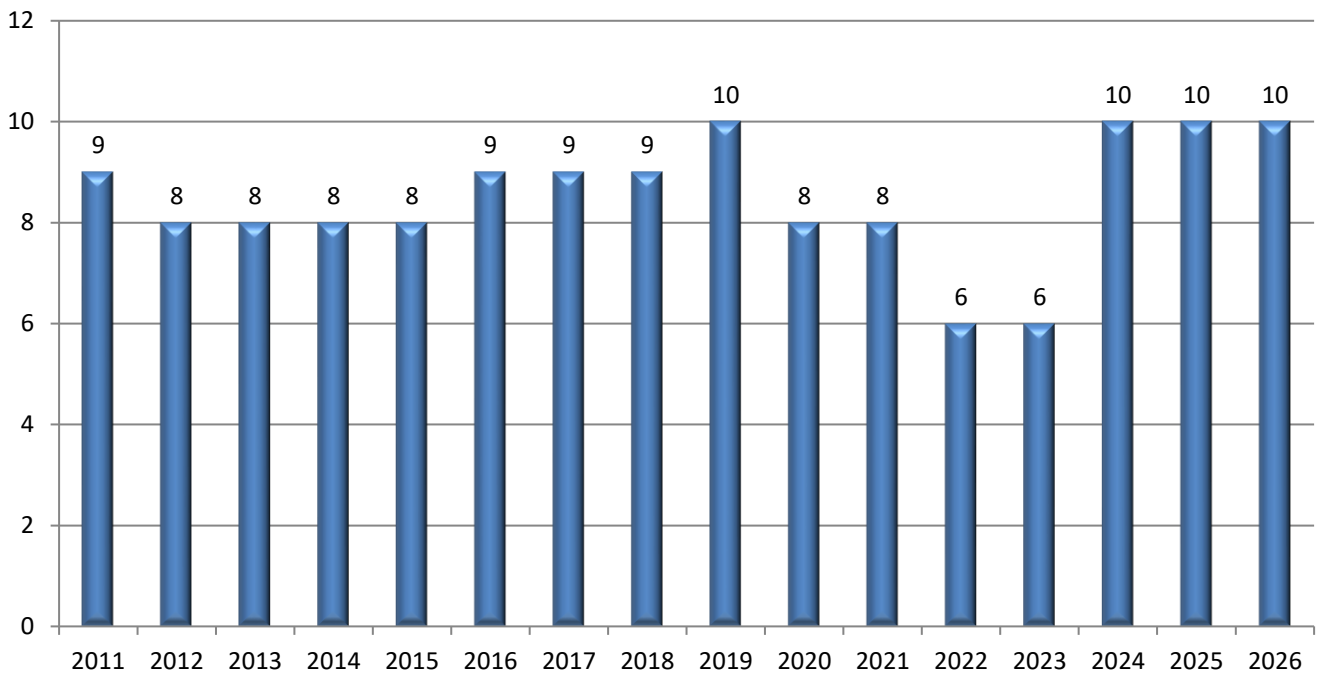
Board Member Length of Service 2026



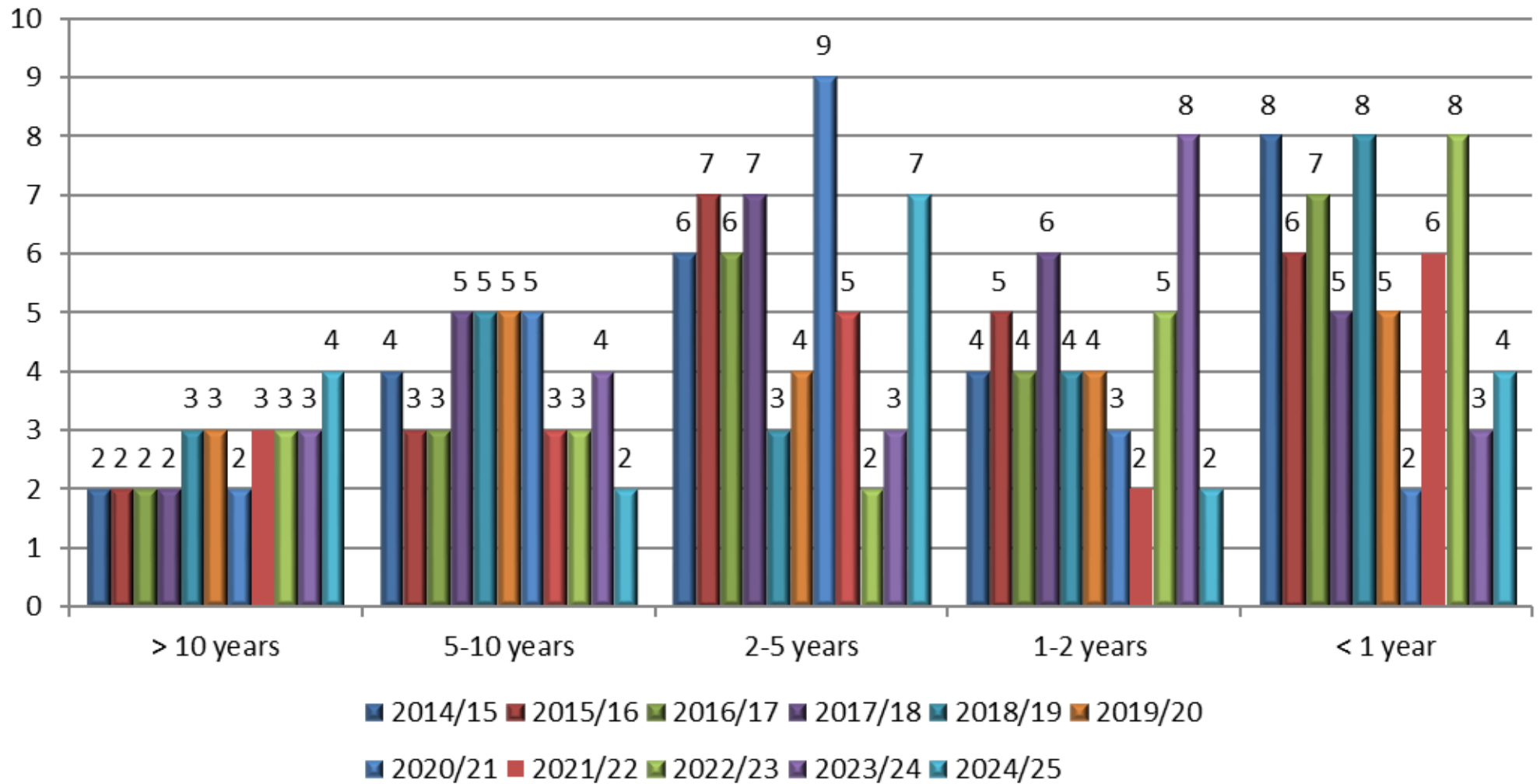
Board Member Age Profile 2026



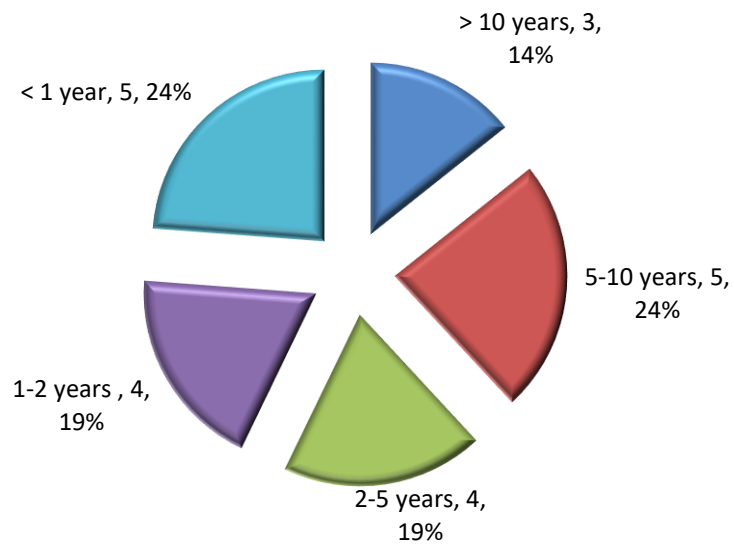
Number of Board Members



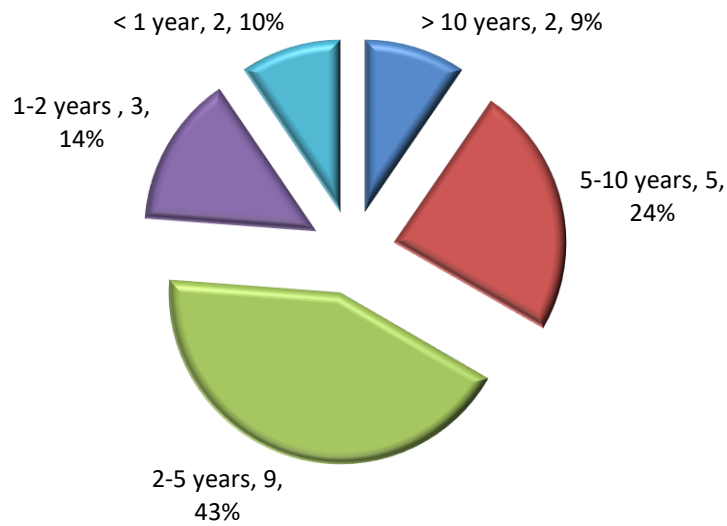
HLNT Employees - Length of Service



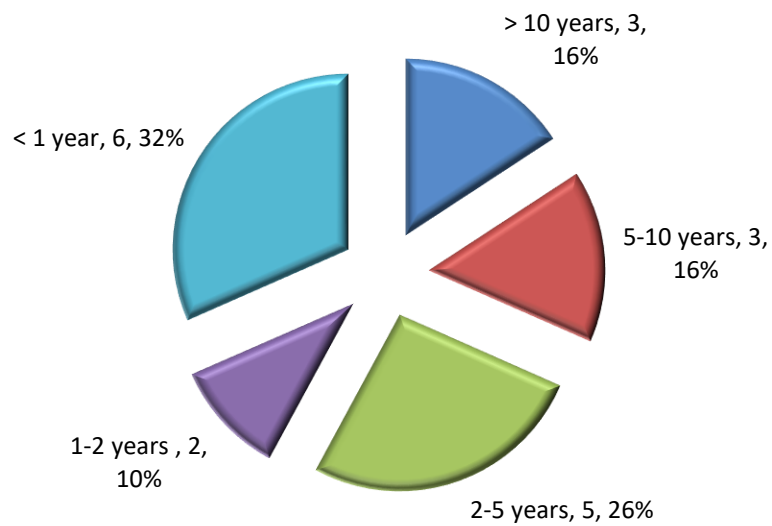
2019/20 Length of Service - Employees



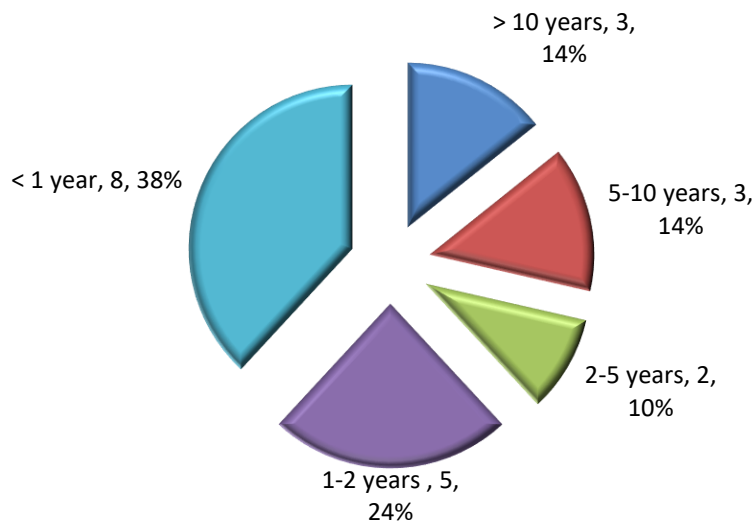
2020/21 Length of Service - Employees



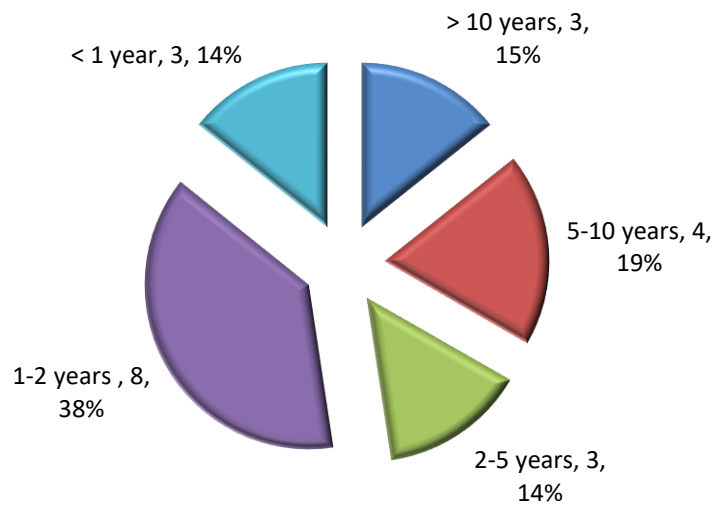
2021/22 Length of Service - Employees



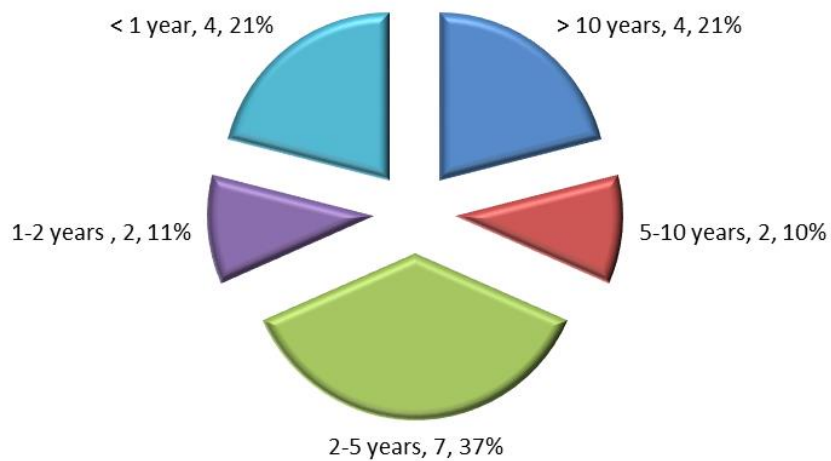
2022/23 Length of Service - Employees



2023/24 Length of Service - Employees



2024/25 Length of Service - Employees



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	2025 Status											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Darwin												
CEO	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Education Services Manager	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Finance & Admin Manager	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Finance Executive	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green
Diabetes Nurse Educator	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Diabetes Nurse Educator A	Red	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Diabetes Nurse Educator B	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green
Diabetes Nurse Educator C (1.0 FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Red	Yellow	Green
Nutrition Educator (1.0 FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Nutrition Educator A 1.0 FTE	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Telehealth Dietitian (0.6FTE)	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Cardiac Education Co-ordinator (0.8)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Cardiac Nurse Educator A	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	Green
T/H Cardiac Nurse Educator (0.2FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Cardiac Nurse Educator C	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Health Promotion Manager (1.0FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Physical Activity Officer (Casual)	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green
Psychologist	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Information Services Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Admin Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Finance/Admin Officer	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Customer Service Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Office Assistant	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Admin Assistant - MDT	Grey	Grey	Grey	Grey	Green	Green	Green	Green	Green	Green	Green	Green
Manager ATSI Program	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Aboriginal Health Educator	Red	Red	Red	Red	Red	Red	Red	Grey	Grey	Grey	Grey	Grey
Alice Springs												
Diabetes Nurse Educator	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Cardiac Nurse Educator (0.4 FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Customer Service Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Healthy Ageing Co-ordinator 0.6FTE	Green	Red	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green
ATSI Community Engagement 0.6FTE	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Nutrition Educator (CAHS)	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey
Remote DNE/CNE	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey






Position Occupied
 Position Vacant

Under Change
 Not a current position

Telehealth Service while recruitment underway

Strategic KPIs Progress Report 2026

	2024 Position Status											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Darwin												
CEO												
Education Services Manager												
Finance & Admin Manager												
Diabetes Nurse Educator	LSL/AL 12 months							To ATSI Program Manager				
Diabetes Nurse Educator A												
Diabetes Nurse Educator B												
Diabetes Nurse Educator C (1.0 FTE)												
Nutrition Educator (1.0 FTE)												
Nutrition Educator A 1.0 FTE												
Telehealth Dietitian (0.6FTE)												
Cardiac Education Co-ordinator (0.8)												
Cardiac Nurse Educator A												
T/H Cardiac Nurse Educator (0.2FTE)												
Cardiac Nurse Educator C												
Health Promotion Manager (1.0FTE)												
Physical Activity Officer (Casual)												
Psychologist												
Information Services Officer												
Admin Officer												
Finance/Admin Officer												
Customer Service Officer												
Office Assistant												
Manager ATSI Program												
Aboriginal Health Educator												
Alice Springs												
Diabetes Nurse Educator												
Cardiac Nurse Educator (0.4 FTE)	Telehealth - FIFO											
Customer Service Officer												
Healthy Ageing Co-ordinator 0.6FTE												
Nutrition Educator (CAHS)												
Remote DNE/CNE												

	Position Occupied		Position Vacant
	Under Change		Not a current position
	Telehealth Service while recruitment underway		

Strategic KPIs Progress Report 2026

	2022 Position Status												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Darwin													
CEO	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Education Services Manager	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Finance & Admin Manager	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Diabetes Nurse Educator	Green	Green	Green	Green	Green	Green	Green	Green	LSL/AL 12 months			Green	
Diabetes Nurse Educator A	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Diabetes Nurse Educator B	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	LSL/AL Cover			Green	
Diabetes Nurse Educator C	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Nutrition Educator (1.0 FTE)	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Nutrition Educator A 1.0 FTE	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Cardiac Education Co-ordinator	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Cardiac Nurse Educator A	Red	Green	Green	Green	Green	Green	Green	Green	Red	Red	Green	Green	
Cardiac Nurse Educator B	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Cardiac Nurse Educator C	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Health Promotion Manager	Green	Red	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Psychologist	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Information Services Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Admin Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Finance/Admin Officer	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Customer Service Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Office Assistant	Green	Red	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Aboriginal Health Practitioner	Grey	Grey	Grey	Grey	Grey	Grey	Yellow	Yellow	Green	Green	Green	Green	
Community Liaison Officer	Grey	Grey	Grey	Grey	Grey	Grey	Yellow	Yellow	Red	Green	Green	Green	
Alice Springs													
Diabetes Nurse Educator	Telehealth/FIFO support 0.6FTE								1.0 FTE Local			Green	
Cardiac Nurse Educator	Telehealth support 0.4FTE								Telehealth/FIFO 0.4 FTE				
Customer Service Officer	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	
Nutrition Educator (CAHS)	Position not being filled by CAHS; being supported from Darwin FI/FO												
Remote DNE/CNE	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	Grey	
Projects													
GHANT	Position Made Redundant April 2021												
	Red	Position Vacant						Green	Position Occupied				
	Grey	Not a current position						Yellow	Under Change				
	Blue	Telehealth Service while recruitment underway											

Strategic KPIs Progress Report 2026

	2021 Position Status											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Darwin												
CEO	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Education Services Manager	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Finance & Admin Manager	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Diabetes Nurse Educator	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Diabetes Nurse Educator A	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Diabetes Nurse Educator B	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position
Diabetes Nurse Educator C	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position
Nutrition Educator (1.0 FTE)	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Nutrition Educator A 1.0 FTE	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Cardiac Education Co-ordinator	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Under Change	Under Change	Occupied	Occupied	Occupied
Cardiac Nurse Educator A	Occupied	Occupied	Occupied	Occupied	Vacant	Vacant	Vacant	Telehealth Service while recruitment underway	Occupied	Occupied	Occupied	Occupied
Cardiac Nurse Educator B	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position
Cardiac Nurse Educator C	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position
Health Promotion Manager	Under Change	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Psychologist	Not a current position	Vacant	Vacant	Vacant	Vacant	Vacant	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Information Services Officer	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Admin Officer	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Finance/Admin Officer	Occupied	Under Change	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Customer Service Officer	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Office Assistant (part-time)	Occupied	Occupied	Occupied	Vacant	Under Change	Under Change	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied
Alice Springs												
Diabetes Nurse Educator	Occupied	Occupied	Vacant	Vacant	Vacant	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway
Cardiac Nurse Educator	Occupied	Occupied	Vacant	Vacant	Vacant	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway	Telehealth Service while recruitment underway
Customer Service Officer	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Occupied	Vacant	Occupied	Occupied	Occupied	Occupied
Nutrition Educator (CAHS)	Occupied	Occupied	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant	Vacant
Remote DNE/CNE	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position	Not a current position
Projects												
GHANT	Position Made Redundant April 2021											
Legend:												
	Occupied	Position Occupied	Vacant	Position Vacant	Under Change	Not a current position	Telehealth Service while recruitment underway					