



**Australian Government**  
**Department of Health and Ageing**

Office Use Only  
**Ref. No:**

**HEALTH SYSTEM CAPACITY DEVELOPMENT FLEXIBLE FUND**  
**INVITATION TO APPLY FOR FUNDING**  
**GRANT FUNDING ROUND 1**

**Instructions for Submitting Applications for Health System Capacity Development Flexible Fund**

Applications close at **2:00PM** (Eastern Daylight Saving Time) on **Friday, 23 December, 2011**.  
You must submit your Application as follows:

**You must provide 4 unbound** (i.e. unstapled) copies (Word format, single sided) **AND** an electronic copy (on a CDROM that is Microsoft Word 2003 compatible) of your Application delivered to:

**Health System Capacity Development Fund**  
**Funding Round: 1**  
**ITA DoHA/111/1112**  
Department of Health and Ageing  
Tender Box  
Sirius Building,  
Foyer, Ground Floor,  
23 Furzer Street  
WODEN ACT 2606

**Late Applications**

The Department will accept your Application if it is late as a direct result of mishandling by the Department. In all other circumstances, in the interests of fairness, the Department reserves the right not to accept late Applications. In considering whether it would be fair to accept a late Application, the Department will take into account the degree of lateness, whether the cause of the lateness was beyond the Applicant's control and such other facts as it considers relevant. The Department may also ask the Applicant to provide evidence to support its claims regarding the reasons for late submittal. If an Applicant considers that their Application will be late they should email the [hscdfund@health.gov.au](mailto:hscdfund@health.gov.au) prior to the Closing Time advising of the circumstances for the lateness. The chair of the assessment committee will take the reasons into consideration when deciding whether or not to accept the late Application.

**Enquiries**

All enquiries relating to this Invitation to Apply for funding under the Health System Capacity Development Fund should be directed via email to [hscdfund@health.gov.au](mailto:hscdfund@health.gov.au).

**STRUCTURE OF THIS INVITATION TO APPLY**

PART A GENERAL INFORMATION FOR APPLICANTS

PART B ASSESSMENT OF APPLICATIONS

PART C HOW TO APPLY FOR FUNDING

PART D APPLICATION FORM

PART E FREQUENTLY ASKED QUESTIONS

ATTACHMENT A HEALTH SYSTEM CAPACITY DEVELOPMENT FLEXIBLE FUND GUIDELINES

ATTACHMENT B DEED FOR MULTI PROJECT FUNDING

## **PART A - GENERAL INFORMATION FOR APPLICANTS**

The purpose of the Flexible Funds is to improve the way the Department manages its grants and other programs, reduce red tape and increase flexibility and evidence based funding for the delivery of better health outcomes for the community.

The establishment of larger, flexible funding pools will simplify and streamline grant funding processes for stakeholders. Over time, many grant recipients, currently maintaining and reporting against multiple funding agreements, will move to an arrangement where they operate under one single agreement with the Department. This will reduce the administrative burden for grant recipients, leaving them more time to focus on their core business.

From 1 July 2011, a total of 159 predominantly grant programs have been consolidated into 18 new or expanded flexible Funds, with a further six programs transferred from the Department to the portfolio agencies of Cancer Australia and the National Health and Medical Research Council. A number of the Flexible Funds are comprised of predominantly grant programs and these Funds have been designed to continue to support health priorities through the provision of grants, but in a more streamlined and flexible manner.

No program funding is being reduced through the consolidation process, with all existing program funding to be included in the Flexible Funds.

### **1 Background**

- 1.1** In the 2011 Budget, the Australian Government allocated \$117.746 million of funding over four years to 30 June 2015 for the Health System Capacity Development Fund (the Fund). The Fund consolidates the activities of ten (10) existing programs, and will provide a larger, flexible funding pool for services that aim to increase the Government's understanding of the experiences that key population groups have in interacting with the healthcare system through a variety of means that may include, annual grant funding rounds, unsolicited or one-off activity funding and procurement.
- 1.2** Programs consolidated into the Fund comprise a broad range of grants provided to over 140 organisations. Grants values range from approximately \$5,000 to \$12 million per annum. Applicants seeking smaller or larger grants are welcome to apply, but should note that the total funding available to support all three priorities of the Fund, is up to \$2.7 million in 2012-13, up to \$8.2 million in 2013-14 and a similar amount in future years.
- 1.3** This funding will be provided for periods of up to three years, commencing from July 2012. The Department may, at its discretion extend any agreement entered into under this funding process for a further two financial years.
- 1.4** Funding will be determined based on the merit of each application, as assessed against the applicants response to the criteria contained in Part D.
- 1.5** Projects may seek funding to commence after July 2012.

### **2 Policy Context**

- 2.1** The Fund will enable the Australian Government to support activities which include, but are not limited to supporting:
  - Critical consumer, rural, student, professional and other stakeholder organisations to provide advice on their perspectives of the health care system contributing to future health system improvements;

- The development of primary health care research to better inform primary health care development and achieve objectives under the National Primary Health Care Strategy; and
- Key national population groups, including men, women and children, including achieving objectives under the National Male and National Women’s Health policies and other population group-specific national frameworks and strategies.

**2.2** The Fund Guidelines have been developed to underpin the operation of the Fund and articulate the Fund’s policy objectives, operating parameters, eligibility criteria and compliance requirements. A copy of the Health System Capacity Development Fund Guidelines is at [Attachment A](#).

**2.3** The funding is being provided as part of the Health System Capacity Development Flexible Fund. You can find more information about the Fund on the Department’s website: [www.health.gov.au](http://www.health.gov.au).

### 3 Funding Objectives

The funding is being provided to support the following Priorities:

<b>Priorities</b>
<ol style="list-style-type: none"> <li>1. supporting health, consumer, student and community organisations, including rural and remote organisations to support policy development and safe, high quality health care systems and services;</li> <li>2. supporting targeted research in the field of primary health care, promulgating targeted research and conducting research translation activities to develop a robust evidence base; and</li> <li>3. supporting population health improvements through a focus on the social determinants of health, including through national activities in relation to key population groups such as men, women and children.</li> </ol>

### 4 What Will Be Funded?

**4.1** The Department expects that funding will be provided for activities that fall under priority areas 1, 2 and 3 of the Fund.

**4.2** This may include, but is not limited to, currently funded activities such as:

- In Priority Area 1:
  - Providing an interface between the Government, health professionals and consumers;
  - Strategic, priority driven evidence-based research;
  - Knowledge exchange, research translation, information sharing and dissemination of evidence-based research and data;
  - Health professional and community education, training and support;
  - Telephone and other support services;
  - Community views on policy and future ideas on the health of Australians and the health workforce; and
  - Supporting workforce development including through fellowships and scholarships, information education and training and the provision of networking opportunities.

- In Priority Area 2:
  - Development of strategic, priority driven evidence-based research;
  - Development of evidence-based guidelines;
  - Translation of research for community, consumer, and policy audiences; and
  - Dissemination and publication of evidence-based research.
- In Priority Area 3:
  - Activities to promote women's health;
  - Activities to promote male health;
  - Activities to improve the evidence base for women's and male health, including sexual and reproductive health
  - Policy/program evaluation support for gender specific health activities;
  - Activities to improve the evidence base on maternity services; and
  - Policy/program advice and support to improve the safety and quality of maternity services.

## 5 **What Will Not Be Funded?**

5.1 Funding in this grant round will not be provided for:

- Capital and major equipment purchases, construction or motor vehicles;
- Activities undertaken by political organisations;
- Activities which subsidise commercial activities; and
- Activities that specifically focus on acute (hospital-based) care.

## 6 **Who Can Apply for the Funding?**

6.1 Applications are encouraged from a wide range of non government and government entities. Applicants are not required to have had a prior funding relationship established with the Department, but must be a legal entity to be eligible for funding.

6.2 Organisations eligible for funding are specified at Section 2.1 of the Fund Guidelines at **Attachment A**.

6.3 The Department encourages entities to form collaborations, consortia or partnerships to deliver projects. If more than one entity will be involved in the project, one entity must be identified as the lead entity and an authorised representative of the lead entity must sign the Application Form.

## 7 **When will Funding be made Available?**

7.1 Funding will be distributed to the successful Applicants commencing in 2012. The first payment of funding to the successful Applicants will occur as per the Terms and Conditions of the executed Project Agreement. The Department anticipates that disbursements may occur from July 2012.

## 8 Timeframes

- 8.1 The Department anticipates that successful funding Applicants will be selected by the end of March 2012. The Department will contact the successful Applicants after they have been selected to discuss the preparation of the Deed for Multi Project Funding (see clause 9).
- 8.2 The Department may not notify unsuccessful Applicants until it has executed a Deed for Multi Project Funding with the successful Applicants.
- 8.3 Funding will be for the period 1 July 2012 up until 30 June 2015. Funds made available under the Fund must be expended by the expiry date agreed in the Project Agreement. Funding will be paid across multiple financial years, provided that the Department is satisfied the funded entity has met the deliverables that are negotiated in the executed Deed or Project Agreement under any Deed.
- 8.4 The Department may incorporate a two-year extension to the project/activity, to be exercised at the Government's discretion, into any Deed or Project Agreement.

## 9 Deed for Multi Project Funding

9.1 The successful Applicants for funding will be required to sign either:

- a Deed for Multi Project Funding; or
- a Project Agreement under an existing Deed for Multi Project Funding,

with the Commonwealth, represented by the Department, before receiving any funding.

- 9.2 The Project Agreement will provide a detailed description of the activities to be undertaken in the project, based on the Application. The funding will be paid in instalments throughout the project period. The payment of funding is generally based on the funding recipient's achievement of outcomes and provision of deliverables (such as progress reports) and the demonstration of need for the instalment.
- 9.3 Applicants should note that, if they are successful, some details of their project (including a project outline, their name and the amount of funding awarded) will be posted on the Department's website as part of the Department's legislative reporting obligations.
- 9.4 The Deed for Multi Project Funding at **Attachment B** will form the basis of the Department's offer to successful applicants.
- 9.5 Applicants should note that the Department is currently developing a standard agreement for use across all programs and this may be the agreement offered to successful applicants. This new agreement will not contain Terms and Conditions that substantially differ from the agreement at **Attachment B** and will not impact on the activities, timeframe or level of funding approved.

## **10 Insurance**

**10.1** All Applicants should ensure that they have in place, or if successful are able to obtain, sufficient insurance to comply with the requirements for insurance specified below.

- Workers Compensation to an amount required by law,
- Minimum \$20 million Public Liability, and
- Minimum \$10 million Professional Indemnity.

**10.2** A Deed for Multi Project Funding with the successful Applicant will not be executed until the required insurances have been obtained and copies of certificates of currency for the required insurances provided to the Department.

## **PART B - ASSESSMENT OF APPLICATIONS**

### **1 How Will the Applications for Funding Be Assessed?**

- 1.1** An Assessment Committee will be established by the Department to assess Applications against the assessment criteria and select the successful Applicants. The Assessment Committee will consist of officers from the Department. Representatives from State or Territory health Departments and/or other representatives with relevant expertise may provide advice to the Assessment Committee as required.
- 1.2** Part D, Section 2 of the Application Form specifies the Threshold Criteria each applicant must satisfy in order to be considered for funding under the respective individual priorities. The Assessment Committee will undertake an assessment of the Threshold Criteria to determine whether these mandatory and/or minimum funding requirements are all satisfied by the applicant. Only applications that the Assessment Committee agree satisfies all the Threshold Criteria for a particular priority or set of priorities will be considered further by the Assessment Committee. Applications that do not satisfy all Threshold Criteria for a particular priority or set of priorities, will not be considered for further assessment.
- 1.3** The Assessment Committee will then further assess all applications which successfully met the Threshold Criteria against Part D, Section 1 to ensure Applicants meet the minimum requirements such as Legal Entity, required insurance levels or willingness to obtain, completion of Sections 3, 4 and 5 and the inclusion of letters of support for joint/collaborative Applications.
- 1.4** All applications will be assessed to ensure they deliver value for money.
- 1.5** *Decision Making*
- For the purposes of this Funding Round the Minister for Health and Ageing will be the decision maker.

### **2 Assessment Criteria**

- 2.1** When assessing the Applications for funding, the Assessment Committee will use the assessment criteria in Part D, Section 3.
- 2.2** Whilst not in a particular order each criterion will be weighted equally. The information from the assessment against the criteria will be used to identify those applications that will best meet the policy priorities of the Fund.
- 2.3** Applications may be submitted against all or some of the priorities, depending on the content of their application.
- 2.4** In assessing an Application against the assessment criteria, the Assessment Committee may consider the Applicant's financial viability and the risk of the Application.
- 2.5** In assessing an Application the Assessment Committee may use any material included the application.

- 2.6** The Assessment Committee may also seek information about any Applicant from any other source, including from within the Commonwealth, whether or not the individuals or organisations contacted are nominated as referees by the Applicant.
- 2.7** The Department may also consider information about the applicant that is made available through the normal course of business of the Department.
- 2.8** In accordance with transparency and fairness the Department undertakes to advise the applicant should any information apart from the application be provided to the Department that impacts on the success of the application.

## **PART C - HOW TO APPLY FOR FUNDING**

### **1 Complete the Application Form**

- 1.1** You must submit your Application for funding in the Application form in Part D and clearly identify the priority/ies under which you are applying.
- 1.2** The Declaration in the Application form must be signed by a person authorised to act on behalf of the Applicant.
- 1.3** The Application form must be completed in English.
- 1.4** If you are from a non-government or private sector organisation, you must include in your Application:
  - 1.4.1** one (1) copy of the organisation's Certificate of Incorporation; and
  - 1.4.2** one (1) copy of the organisation's previous financial year's audited financial statements. The Department may ask for further information about the Applicant's financial viability.

### **Applications from consortia**

- 1.5** If you submit a joint Application for funding or a consortia/collaboration, your Application must include a letter of support from each additional entity (apart from the lead Applicant) which will be involved in the project. Each letter of support must include:
  - 1.5.1** an overview of how the entity will work with the lead entity and any other entity(ies) to support the successful completion of the project.
  - 1.5.2** an outline of the relevant experience and/or expertise the entity will bring to the project team.
  - 1.5.3** the roles/responsibilities the entity will undertake, and the resources it will contribute (if any);
  - 1.5.4** details of a nominated management level contact officer; and
  - 1.5.5** details of the lead entity.

## 2 Complete the Application Checklist

- 2.1 Before you submit your Application, complete the following checklist to ensure that your Application is complete.

### Before You Begin

- [ ] Read this Invitation to Apply for Funding (including Part E - Frequently Asked Questions)
- [ ] Ensure that you understand the assessment criteria for each Priority set out in Part D, Section 3 (Funding Request).
- [ ] If an Applicant does not have a Funding Agreement in place with the Commonwealth represented by the Department of Health and Ageing the Applicant should read the Department of Health and Ageing's Deed for Multi Project Funding available to be downloaded with this Invitation to Apply for Funding. When the Applicant submits their Application, they must confirm that, if the Application is successful, they will accept the terms of the Deed for Multi Project Funding. Applicants must specify in their application (in Part D - Section 4) any areas where compliance is not possible and the reasons why.
- [ ] Where an Applicant does have a Funding Agreement in place with the Commonwealth represented by the Department of Health and Ageing, details must be included in their Application.

### Completing Your Application

- [ ] Use the template Application Form in Part D and complete the appropriate parts of every Section.
- [ ] Complete the Application Form in English.
- [ ] Indicate that the Applicant makes the acknowledgements in Part D, Section 4 of the Application Form by selecting 'YES'.
- [ ] Complete and sign the Declaration in Part D, Section 5 of the Application Form (Note: The Declaration must be signed by an authorised officer of the Applicant).

### Submitting Your Application

- [ ] Check that you have completed each Section of the Application Form that is required.

*For non-government Applicants:*

- [ ] Attach to the Application one (1) copy of the Applicant's Certificate of Incorporation.
- [ ] Attach to the Application one (1) copy of the Applicant's previous financial year's audited financial statements.

*For Applicants submitting a joint/consortia Application:*

- [ ] Ensure that the nominated lead entity (the Applicant) is a legal entity (incorporated body) capable of entering into a Deed for Multi Project Funding with the Commonwealth.
- [ ] Attach to the Application a letter of support from each of the joint/consortia Applicant entities. Ensure that each letter of support includes the information required by clause 1.5 of this Part C.

### **3 Submit Your Application**

- 3.1** You must submit your Application for funding in accordance with the submission details and methods on the cover page of the Invitation to Apply for Funding.
- 3.2** You are responsible for ensuring that your Application is completed accurately.
- 3.3** You may not alter the substance of your Application following its submission, except if you discover an error in your Application, in which case, you should email [hscdfund@health.gov.au](mailto:hscdfund@health.gov.au) immediately. The Department may seek information from you to clarify any aspect of your Application, but it is not required to do so.
- 3.4** The Department reserves the right to reject incomplete or faxed applications on the basis that the Assessment Committee has found the application to be non compliant.

### **4 Retain a Copy of Your Application**

- 4.1** It is suggested that you retain a copy of your Application for your records.

### **5 Taxation Implications**

- 5.1** Organisations are responsible for ensuring they comply with the appropriate taxation legislative requirements.
- 5.2** For some general guidance on the taxation treatment of grants and funding from the Commonwealth, applicants may wish to refer to the Australian Tax Office website at [www.ato.gov.au](http://www.ato.gov.au) However, applicants are advised to seek independent advice from a taxation professional on how funding paid to you (or to any entity you propose to establish to receive funding) under the program would be treated for tax purposes.

### **6 Dispute Resolution**

- 6.1** When the Department receives a written complaint an investigating officer must be identified. The investigating officer will be in the first instance, from the division responsible for managing the grants process and will be senior to the person responsible for managing the process.

- 6.2** The investigating officer is responsible for:
- acknowledging the complaint within 10 days of receipt, noting that the acknowledgement sent to the complainant should summarise the complaint, advise that the Department's Procurement and Funding Complaint Handling Procedures are accessible via the 'About Us' page on the Department's internet site and indicate the expected timeframe for a formal response;
  - ensuring all correspondence on the complaint is recorded and filed appropriately;
  - investigating the complaint;
  - preparing a report; and
  - advising the complainant in writing of the outcome.
- 6.3** The response to the complainant will be in writing and outline the issue that has been raised, what action has been taken to examine the issue and an assessment of the complaint.
- 6.4** If this does not resolve the issue, the complainant should be advised that they have the option of an independent internal review.
- 6.5** Where a complainant subsequently lodges a request for further examination, an independent internal review should be conducted.
- 6.6** The internal review officer will promptly notify the complainant in writing to advise of their appointment and the expected time frame for making the internal review decision. The notice will set out the matters that the reviewing officer considers may be relevant to the review decision. The notice should also request any necessary further information that is required from the complainant to conduct the review.
- 6.7** The internal review officer will notify the complainant in writing of the decision within the timeframe specified in the original notice. The notice of decision will outline the issue that has been raised and the matters taken into account in making the decision.

## PART D - APPLICATION FORM

Please submit your Application in the following form.

### SECTION 1 - APPLICANT DETAILS

#### Details of Applicant

DETAIL REQUIRED	APPLICANT'S RESPONSE:
<p><b>Applicant Organisational Type</b></p> <p>[Indicate organisational type]</p>	<p>a) Incorporated Associations (incorporated under State/Territory legislation, commonly have 'Association' or 'Incorporated' or 'Inc' in their legal name);</p> <p>b) Incorporated Cooperatives (also incorporated under State/Territory legislation, commonly have 'Cooperative' in their legal name);</p> <p>c) Companies (incorporated under the Corporations Act 2001 – may be not-for-profit or for-profit proprietary company limited by shares or by guarantee or public companies);</p> <p>d) Aboriginal Corporations (incorporated under the Aboriginal and Torres Strait Islander Act 2006 and administered by the Office of the Registrar of Aboriginal and Torres Strait Islander Corporations);</p> <p>e) Organisations established through a specific piece of Commonwealth or State/Territory legislation (many public benevolent institutions, churches, universities, unions etc);</p> <p>f) Partnerships;</p> <p>g) Trustees on behalf of a Trust;</p> <p>h) State/Territory or Local Governments; and/ or</p> <p>i) where there is no suitable alternative, an individual or - jointly and separately – individuals.</p>

<p><b>Applicant Name</b></p> <p>[This must be the name of the <b>legal entity</b> submitting the Application. This will also be the name of the contracting party if the Application for funding is successful.]</p>	
<p><b>Australian Business Number (ABN)</b></p> <p>[If the Applicant is an entity registered on the Australian Business Register, then the ABN used by the Applicant must be given]</p>	
<p><b>Australian Company Number (ACN)</b></p> <p>[If the Applicant is an Australian company then the ACN must be given unless the number also appears in the ABN given above]</p>	
<p><b>Registered Business Name</b></p> <p>[If the Applicant uses a name registered under the business names register kept under the law of a State or Territory of Australia, then that name should be given]</p>	
<p><b>Registered Business Address</b></p> <p>[This needs to be the official address in respect of the legal entity submitting the Application. If the Applicant uses a business name, it may be the address registered in respect of the business]</p>	
<p><b>Address for Notices</b></p> <p>[This needs to be the address the Applicant primarily wishes to be used for notices to given under any contract (if different to the Registered Business Address)]</p>	
<p><b>Insurance</b></p> <p>Confirm current insurance levels are consistent with Part A, Clause 10</p> <p>OR</p> <p>Confirm willingness to obtain required levels of insurance if successful.</p>	

**Authorised Contacts**

	Preferred Contact	Alternative Contact
<b>Name:</b>		
<b>Position/Title:</b>		
<b>Postal Address:</b>		
<b>Street Address:</b>		
<b>Phone Number:</b>		
<b>Fax Number:</b>		
<b>Email:</b>		

**Referees**

	Referee 1	Referee 2
<b>Name:</b>		
<b>Company</b>		
<b>Position/Title:</b>		
<b>Phone Number:</b>		
<b>Email:</b>		

**Please briefly describe the Applicant’s main functions and activities and relevant experience and expertise that demonstrates their capacity to deliver the project.**

<Insert a brief description (maximum 500 words)

**Joint/consortia Applications**

**Is this a joint/consortia Application with other organisation(s)? [Indicate yes or no]**

NO → Go to Section 2.

YES → You must complete the rest of this Part.

**If YES, list the other organisation(s) (include their ABN or ACN).**

<Insert a brief description (maximum 500 words)

**Confirm that you have attached to this Application a letter of support from each organisation.**

YES, we have attached a letter of support from each organisation listed above. *Note: Where letters of support are not attached to the application the assessment committee may consider the application to be non compliant.*

<Insert a brief description (maximum 500 words)

**Does the Applicant(s) receive funding for Government activities, directly relating to this ITA, from any other source? Or have you applied for funding in relation to any other Government activities directly related to this ITA? If so please provide the following details:**

Source – Name of source, reference (Agreement No)	Activity	What organisation/community needs are met?	Value of funding	Date

**SECTION 2 – THRESHOLD CRITERIA**

**Priority Area 1**

Supporting health, consumer, student and community organisations, including rural and remote organisations, to support policy development and safe, high quality health care systems and services.

**Note: Applicants must satisfy all the following Threshold Criteria in order to be considered for funding under this priority**

DETAIL REQUIRED	APPLICANT'S RESPONSE:
Applicants applying for funding under Priority Area 1 must demonstrate that their activities are national in scope.	
Applicants must demonstrate they have a national membership base and have processes in place to effectively represent its members' views.	
Applicants must be either a not-for-profit, or community-based entity with a focus on representing the views of the relevant community group.	

**Priority Area 2**

Supporting targeted research in the field of primary health care, promulgating targeted research and conducting research translation activities to develop a robust evidence base.

**Note: Applicants must satisfy all the following Threshold Criteria in order to be considered for funding under this priority**

DETAIL REQUIRED	APPLICANT'S RESPONSE:
Applicants applying for funding under Priority Area 2 must detail why their project outcomes cannot be met through an alternative mechanism.	
The applicants applying must demonstrate ability to provide evidence, knowledge and specialised expertise to inform decision making for primary health care systems and services.	

<p>The applicants must demonstrate strong linkages across the Australian primary health care system for example across:</p> <ul style="list-style-type: none"> <li>• Research;</li> <li>• Policy;</li> <li>• Consumer; and/or</li> <li>• Practitioner communities,</li> </ul> <p>as well as how the project aligns with the national health reform agenda.</p>	
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<p><b>Priority Area 3</b></p> <p>Supporting population health improvements through a focus on the social determinants of health, including through national activities in relation to key population groups such as men, women and children.</p>
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**Note: Applicants must satisfy all the following Threshold Criteria in order to be considered for funding under this priority**

DETAIL REQUIRED	APPLICANT'S RESPONSE:
<p>Applicants applying for funding under Priority Area 3 must demonstrate that the activity(ies) proposed are national in scope.</p>	
<p>Applicants must outline which key priority population group they represent and be able to demonstrate how their proposed activities will promote/focus on health improvements for this key population group.</p>	

**SECTION 3 - FUNDING REQUEST**

<b>Please tick the box against the priority or priorities that is the subject of your application.</b>	
	<p><b>PRIORITY AREA 1 - Supporting health, consumer, student and community organisations</b></p> <p>Applicants are required to complete Assessment Criteria 1 - 4</p>
	<p><b>PRIORITY AREA 2 - Supporting primary health care research</b></p> <p>Applicants are required to complete Assessment Criteria 5 - 8</p>
	<p><b>PRIORITY AREA 3 - Supporting population health improvements</b></p> <p>Applicants are required to complete Assessment Criteria 9 - 12</p>

**Please Note: If Applicants apply for more than one Priority Area, they are required to complete the Assessment Criteria for each priority applied for.**

**PRIORITY AREA 1 – Supporting health, consumer, student and community organisations, including rural and remote organisations, to support policy development and safe, high quality health care systems and services.**

### **ASSESSMENT CRITERION 1 - NEED**

<b>Describe the activity you wish to fund with this Grant</b>	
<b>DETAIL REQUIRED</b>	<b>APPLICANT'S RESPONSE</b>
<b>Activity Name</b>	
<b>Physical address of the location of the activity</b>	
<b>Population group the activity will service</b>	
<b>The relevance of the activity to the priority area of the HSCDF, and the Government's Health Reform Agenda.</b>	
<b>Amount of funding requested (GST exclusive)</b>	<b>\$</b>
<b>Is the proposed project an extension of an existing activity?</b>  [If yes, please provide details]	<b>YES / NO</b>
<b>What activities are proposed to meet the priority and objective that is the subject of the application and how they will support the relevant priority?</b>	
<Provide your response here> <i>Note: A project plan must be attached to the application that details how the activities will meet the cited priority. The project plan must also include the outcomes to be achieved and how the outcomes will be measured (eg. performance measures).</i>	
<b>How will the activity meet the needs of the nominated population group for example, through an advocacy role or translation of research?</b>	
<Insert a brief description (maximum 500 words)>	
<b>Explain how your organisation will provide an interface between the Government and the population group identified in the activity.</b>	
<Insert response> (maximum 500 words)	

<b>Provide information to demonstrate that the project is consistent with the Government’s health policies for example, the National Health Priority Areas.</b>
<Insert a brief description (maximum 500 words)>
<b>List other organisations and stakeholders providing support to your project, and indicate their role and your relationship with the organisation (if applicable).</b>
<Insert a brief description (maximum 500 words)>
<b>How will your organisation support the particular population group(s) it represents?</b>
<Insert a brief description (maximum 500 words)>
<b>How have you assessed the population group(s) need(s) and determined that your organisation will meet them?</b>
<Insert a brief description (maximum 500 words)>

**ASSESSMENT CRITERION 2 – CAPACITY TO DELIVER THE PROJECT**

<b>What are your organisation’s objectives, key activities and timelines?</b>
<insert 1>
<insert 2>
[insert lines as required]

<b>What are the key activities your organisation will undertake to meet the proposed objectives?</b>
[insert key activities as required]
<b>What is your organisation’s ability to contribute to the development of responsive and well informed public policy and safe, high quality health care systems and services?</b>
<Insert a brief description (maximum 500 words)>
<b>What is the duration of the activities?</b>
[insert duration times as required]
<b>When will your organisation complete the activities?</b>
<b>How will you measure if your organisation has achieved the proposed objective?</b>
<Insert a brief description (maximum 500 words)>

**Project Management**

<b>Who will be directly responsible for the management of the agreement?</b>
<Insert response> (maximum 500 words)
<b>How will the agreement be managed?</b>
<Insert response> (maximum 500 words)
<b>Describe the relevant project management experience of the person managing the agreement.</b>
<Insert response> (maximum 500 words)

**Financial Management**

<b>How will your organisation manage the finances for the agreement?</b>
<Insert response> (maximum 500 words)
<b>Describe your organisation’s financial management experience.</b>
<Insert response> (maximum 500 words)

**Monitoring and Reporting**

<b>How will your organisation monitor and report on progress under the agreement and its outcomes?</b>
<Insert response> (maximum 500 words)

**ASSESSMENT CRITERION 3 – SUSTAINABILITY**

<b>Is this application dependent on other funding submissions you have made? If yes, please provide details.</b>
<Insert response> (maximum 500 words)
<b>Explain how the proposed outcomes are sustainable and can be continued after the Health System Capacity Development Fund funding is expended?</b>
<Insert response> (maximum 500 words)

**Governance, Accreditation and Quality Assurance**

**ASSESSMENT CRITERION 4 – Organisational Capacity**

<b>Describe the governance structure of your organisation. (NB: Flow charts will be accepted)</b>
<Insert response>
<b>Provide evidence that staff employed by your organisation are appropriately qualified to deliver the proposed activities in line with any required National or State/Territory standards.</b>
<Insert response> (maximum 500 words)
<b>List the staffing requirements needed to meet the objectives of the project. List the proposed staff recruitment needed to meet these proposed commitments. What contingency plans does your organisation have to ensure staffing will be maintained during the term of the grant?</b>
<Insert response> (maximum 500 words)

<b>How will your organisation manage any risks during the agreement?</b>
Please provide a risk management assessment.

**PRIORITY AREA 2 – Supporting targeted research in the field of primary health care, promulgating targeted research and conducting research translation activities to develop a robust evidence base.**

**ASSESSMENT CRITERION 5 - NEED**

Describe the project you wish to fund with this Grant	
DETAIL REQUIRED	APPLICANT'S RESPONSE
Project Name	
Physical address of the location of the project	
The relevance of the project to the priority area of the HSCDF.	
Amount of funding requested (GST exclusive)	\$
Is the proposed project an extension of an existing project? [If yes, please provide details]	YES / NO
<b>What activities are proposed to meet the priority and objective that is the subject of the application and how they will support the relevant priority?</b>	
<Provide your response here> <i>Note: A project plan must be attached to the application that details how the activities will meet the cited priority. The project plan must also include the outcomes to be achieved and how the outcomes will be measured (eg performance measures).</i>	
<b>Provide information to demonstrate how the project will strengthen primary health care in Australia.</b>	
<Insert a brief description (maximum 500 words)>	
<b>List other organisations and stakeholders providing support to your project, and indicate their role and your relationship with the organisation.</b>	
<Insert a brief description (maximum 500 words)>	
<b>What unmet need(s) will this project address?</b>	
<Insert a brief description (maximum 500 words)>	
<b>How have you assessed the need(s) and determined that the project will meet them?</b>	
<Insert a brief description (maximum 500 words)>	

## ASSESSMENT CRITERION 6 – CAPACITY TO DELIVER THE PROJECT

<b>What are the project’s objectives, key activities and timelines?</b>
<insert 1>  <insert 2>  [insert lines as required]
<b>What are the key activities your organisation will undertake to meet the proposed objectives?</b>
[insert key activities as required]
<b>What is your organisation’s ability to contribute to the development of a robust evidence base in the field of primary health care?</b>
<Insert a brief description (maximum 500 words)>
<b>What is the duration of the activities under the project?</b>
[insert duration times as required]
<b>When will your organisation complete the project?</b>
<b>How will you measure if your organisation has achieved the objective?</b>
<Insert a brief description (maximum 500 words)>
<b>Provide information on how the personnel undertaking the project have the qualifications, expertise, understanding of the project and access to the necessary resources and will be able to devote sufficient time to successfully undertake the project.</b>
<Insert a brief description (maximum 500 words)>

### Project Management

<b>Who will be directly responsible for the management of the project?</b>
<Insert response> (maximum 500 words)
<b>How will the project be managed?</b>
<Insert response> (maximum 500 words)

<b>Describe the relevant project management experience of the person managing the project.</b>
<Insert response> (maximum 500 words)

**Financial Management**

<b>How will your organisation manage the finances for the project?</b>
<Insert response> (maximum 500 words)
<b>Describe your organisation’s financial management experience.</b>
<Insert response> (maximum 500 words)

**Monitoring and Reporting**

<b>How will your organisation monitor and report on the progress of the project and its outcomes?</b>
<Insert response> (maximum 500 words)

**ASSESSMENT CRITERION 7 – SUSTAINABILITY**

<b>Is this project dependent on other funding submissions you have made? If yes, please provide details.</b>
<Insert response> (maximum 500 words)

**Governance, Accreditation and Quality Assurance**

**ASSESSMENT CRITERION 8 – Organisational Capacity**

<b>Describe the governance structure of your organisation. (NB: Flow charts will be accepted)</b>
<Insert response>
<b>Provide evidence that staff employed by your organisation are appropriately qualified to deliver the proposed project in line with any required National or State/Territory standards.</b>
<Insert response> (maximum 500 words)

**List the staffing requirements needed to meet the agreed work commitments.  
List the proposed staff recruitment needed to meet these commitments.  
What contingency plans does your organisation have to ensure staffing will be maintained during the term of the grant?**

<Insert response> (maximum 500 words)

**How will your organisation manage any risks during the project?**

Please provide a risk management assessment.

**PRIORITY AREA 3 – Supporting population health improvements through a focus on the social determinants of health, including through national activities in relation to key population groups such as men, women and children.**

**ASSESSMENT CRITERION 9 - NEED**

<b>Describe the project you wish to fund with this Grant</b>	
<b>DETAIL REQUIRED</b>	<b>APPLICANT'S RESPONSE</b>
<b>Project Name</b>	
<b>Physical address of the location of the project</b>	
<b>The relevance of the project to the priority area of the HSCDF.</b>	
<b>Amount of funding requested (GST exclusive)</b>	<b>\$</b>
<b>Is the proposed project an extension of an existing project?</b> [If yes, please provide details]	<b>YES / NO</b>
<b>What activities are proposed to meet the priority and objective that is the subject of the application and how they will support the relevant priority?</b>	
<Provide your response here> <i>Note: A project plan must be attached to the application that details how the activities will meet the cited priority. The project plan must also include the outcomes to be achieved and how the outcomes will be measured (eg performance measures).</i>	
<b>Provide information to demonstrate how the project will contribute to improvements in population health in Australia.</b>	
<Insert a brief description (maximum 500 words)>	
<b>How will the project complement or how is it consistent with Commonwealth policies focusing on key population groups such as men, women and children.</b>	
<Insert a brief description (maximum 500 words)>	
<b>List other organisations and stakeholders providing support to your project, and indicate their role and your relationship with the organisation.</b>	
<Insert a brief description (maximum 500 words)>	

<b>What unmet need(s) will this project address?</b>
<Insert a brief description (maximum 500 words)>
<b>How have you assessed the population need(s) and determined that the project will meet them?</b>
<Insert a brief description (maximum 500 words)>

**ASSESSMENT CRITERION 10 – CAPACITY TO DELIVER THE PROJECT**

<b>What are the project’s objectives, key activities and timelines?</b>
<insert 1>  <insert 2>  [insert lines as required]
<b>What are the key activities your organisation will undertake to meet the proposed objective(s)?</b>
[insert key activities as required]
<b>What is the duration of the activities under the project?</b>
[insert duration times as required]
<b>When will your organisation complete the project?</b>
<b>How will your organisation measure if it has achieved the objective?</b>
<Insert a brief description (maximum 500 words)>

**Project Management**

<b>Who will be directly responsible for the management of the project?</b>
<Insert response> (maximum 500 words)
<b>How will the project be managed?</b>
<Insert response> (maximum 500 words)
<b>Describe the relevant project management experience of the person managing the project.</b>
<Insert response> (maximum 500 words)

**Financial Management**

<b>How will your organisation manage the finances for the project?</b>
<Insert response> (maximum 500 words)
<b>Describe your organisation’s financial management experience.</b>
<Insert response> (maximum 500 words)

**Monitoring and Reporting**

<b>How will your organisation monitor and report on the progress of the project and its outcomes?</b>
<Insert response> (maximum 500 words)

**ASSESSMENT CRITERION 11 – SUSTAINABILITY**

<b>Is this project dependent on other funding submissions you have made? If yes, please provide details.</b>
<Insert response> (maximum 500 words)
<b>Explain how the proposed project outcomes will be sustainable and can be continued after the Health System Capacity Development Fund funding is expended?</b>
<Insert response> (maximum 500 words)

**Governance, Accreditation and Quality Assurance**

**ASSESSMENT CRITERION 12 – Organisational Capacity**

<b>Describe the governance structure of your organisation. (NB: Flow charts will be accepted)</b>
<Insert response>
<b>Provide evidence that staff employed by your organisation are appropriately qualified to deliver the proposed project in line with any required National or State/Territory standards.</b>
<Insert response> (maximum 500 words)

**List the staffing requirements needed to meet the agreed work commitments.  
List the proposed staff recruitment needed to meet these commitments.  
What contingency plans does your organisation have to ensure staffing will be maintained during the term of the grant?**

<Insert response> (maximum 500 words)

**How will your organisation manage any risks during the project?**

Please provide a risk management assessment.

## Budget

**All Applicants must complete the following Budget and Financial information:**

**Provide information on the relevant economic, social and environment costs, and relevant health, economic, social and environmental benefits of the project.**

<Insert response> (maximum 500 words)

**Detail how the project represents value for money, including likely benefits and costs.**

<Insert response> (maximum 500 words)

### Guidance for completing the Budget

*Staffing costs: Provide a separate line item for each person to be employed. Include their title, award rate (if applicable) and all on-costs (workers' compensation, superannuation, leave).*

*Administrative costs: Provide a separate line item for each of the following (if applicable) (a) insurance [see the Standard Funding Agreement]; (b) staff training; (c) additional costs for premises; (d) accounting and auditing; (e) stationery, printing; (f) postage; (g) telephone, internet; (h) travel; (i) vehicle running costs.*

*Asset costs: Provide a separate line item for small office assets (if any) such as mobile phones or laptop computers your organisation needs to undertake the project.*

*Total amount of Flexible Funds sought: Indicate the total funding sought by the Applicant in this Application.*

*Funding from other sources: Indicate any contribution to cost of the project which will be made by the Applicant (i.e. premises costs, staff time, telephone costs, postage etc). If your organisation has applied for (or been granted) other funding, indicate the source and the amount of the funding awarded or applied for.*

*Goods and Services Tax (GST): Identify the amount of GST relevant to the amount of funding your organisation is seeking.*

*Total Project Cost: Identify the total project cost (the sum of the Total Flexible Funds sought, the Funding from other sources (if any) and the GST).*

**Finance:**  
**PROJECT BUDGET (GST Exclusive)**

*(Add additional columns if required)*

	2012 – 13	2013 – 14	2014 – 15
	\$	\$	\$
<b>Salaries</b>  <i>Please indicate no. of staff</i>			
<b>Salary on-costs</b>			
<b>TOTAL SALARY COSTS</b>			
<b>Set-up costs – NEW SERVICES</b>			
<b>Project Administration</b> (including costs of reporting)  <i>All amounts &gt;\$10,000 must be listed separately</i>			
<b>Insurance</b>  <b>Public liability insurance</b> (min \$20m) <b>Professional indemnity insurance</b> (min \$10m) <b>Workers compensation insurance</b>			
<b>Project travel</b>			
<b>Resources</b> (Literature etc)			
<b>Accounting / Audit fees</b>			
<b>Other:</b> Please list each item separately. <i>All amounts &gt;\$10,000 must be listed separately</i>			
<b>CAPITAL EXPENDITURE</b>			
<b>TOTAL Health System Capacity Development Fund</b>			
<b>10% GST</b>			
<b>TOTAL PROJECT COST:</b>			

**Project funding from all sources**

If you will receive any other funding to support this project (State/local government, donations etc) please complete the table below.

	<b>2012 – 2013</b>	<b>2013 – 2014</b>	<b>2014 – 2015</b>
	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Health System Capacity Development Fund contribution</b>			
<b>Your organisation’s co-contribution</b>			
<b>State &amp; Territory Government funding</b>			
<b>Income from other sources:</b> Please identify sources			
<b>TOTAL:</b>			

**SECTION 4 - ACKNOWLEDGEMENTS**

If this Application for funding is successful, the Applicant acknowledges and agrees:

that a description of the project, the amount of the funding and name of the Applicant's organisation may be:

- included in the Department's reporting on the internet in line with the Commonwealth Grant Guidelines and Senate Orders;
- used by the Commonwealth in media releases and other publications (such as Annual Reports); and/or
- used to compile a consolidated report.

that it will be required to provide proof that it has sufficient insurance cover to conduct the proposed activities specified in this Application Form (see Part A, Clause 10); and

that the funding will be provided in accordance with the terms of the Department of Health and Ageing's Deed for Multi Project Funding and the Applicant agrees to abide by the terms of that Agreement.

[Indicate whether the Applicant makes the above acknowledgements] YES / NO

If NO, please explain why the Applicant has not made the above acknowledgements.

.....

.....

.....

.....

**SECTION 5 - DECLARATION**

Guidance for completing this Declaration

*This Declaration must be signed by an authorised representative of the Applicant (or, if this Application is a joint/consortia Application, an authorised representative of the Lead Entity). The authorised representative should be a person who is legally empowered to enter into contracts and commitments on behalf of the Applicant / Lead Entity.*

*An Application which does not provide all required information or which contains false or misleading information may be excluded from consideration.*

I hereby apply for a grant under the **Health System Capacity Development Fund** of

\$.....[insert GST exclusive amount]

for

.....[insert Project title].

I certify that the information given in this Application is complete and correct.

I declare that the Applicant is not listed as a terrorist under section 15 of the *Charter of the United Nations Act 1945*.<sup>1</sup>

Signature:

\_\_\_\_\_

Name (BLOCK LETTERS):

\_\_\_\_\_

Position in Applicant:

\_\_\_\_\_

Date:

\_\_\_\_\_

\_\_\_\_\_

<sup>1</sup> A consolidated list of such persons, entities and associated assets is maintained by the Department of Foreign Affairs and Trade under the *Charter of the United Nations (Dealing with Assets) Regulations 2008*.

## **PART E - FREQUENTLY ASKED QUESTIONS**

In this Part we have included some sample answers to frequently asked questions.

### **Will late Applications be accepted?**

The Department will only accept your Application if it is late as a direct result of mishandling by the Department.

In all other circumstances, in the interests of fairness, the Department reserves the right not to accept late Applications. In considering whether it would be fair to accept a late Application, the Department will take into account the degree of lateness, whether the cause of the lateness was beyond the Applicant's control and such other facts as it considers relevant. The Department may also ask the Applicant to provide evidence to support its claims regarding the reasons for late submittal.

### **When will my organisation find out if my Application has been successful?**

The selection process may take some time to complete, but it is anticipated that Applicants will be notified of the outcome by the end of March 2012.

### **Can a number of entities submit a joint/consortia Application?**

Yes. If the work or project benefits or involves more than one entity, you can submit a joint Application. However, in order to manage the funds appropriately, if a joint Application is successful, the Department will enter into a Deed for Multi Project Funding with the nominated lead entity. Additionally, the joint Application must include a letter of support in line with Part C, Clause 1.5.

### **What is a lead entity?**

If you submit a joint Application with one or more other entities, you must nominate a lead entity for the Application. The lead entity for the project will, if your Application is successful, sign the Deed for Multi Project Funding, receive the funding and assume legal responsibility for performing the activities described in the Project Agreement under the Deed.

A lead entity must be an incorporated body which is able to enter into the Deed or Project Agreement. The other partner entities do not have to be incorporated.

### **Are there any GST or income tax-related issues involved in receiving funding?**

Yes. Clause 5 of the Deed for Multi Project Funding outlines the taxes (including GST), duties and government charges for which successful funding Applicants will be responsible.

We recommend that you seek independent advice regarding the income tax implications of receiving funding.

### **When will my organisation receive the funding?**

If your Application for funding is successful, an initial payment may be made after the Project Agreement has been signed by your organisation and by the Department representing the Commonwealth. All other payments of the funding will be based on deliverables (i.e. progress reports) as set out in the Project Agreement.

### **Who should I contact if I need more information?**

If you have any other questions or you need more information, you can send your enquiry to the email address identified on the cover page of this Invitation to Apply for Funding. Please ensure that you allow sufficient time for a response to your query and for your organisation to complete its Application before the closing date.