

# Regional Health Infrastructure Fund 2022-23 Guidelines

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## Application link

The link to the Regional Health Infrastructure Fund application can be found on the department's [SmartyGrants page](https://dhhs.smartygrants.com.au/rhif-22-23) <https://dhhs.smartygrants.com.au/rhif-22-23>.

## Timeline

**Applications open:** 5.00 pm, Friday 17 June 2022

**Applications close:** 5.00 pm, Friday 22 July 2022

## Purpose

The purpose of this document is to provide guidelines for health services to complete applications for RHIF 2022-23.

## Background

The Victorian Government established the Regional Health Infrastructure Fund (RHIF) in 2016 to assist rural and regional health services and other eligible agencies to improve service capacity, service efficiency and the ability to deliver contemporary models of care within the regional health sector through minor capital grants. The investment will ensure continuity of services to the public and assist economic recovery.

The key objectives of RHIF 2022-23 are to assist regional and rural health services to:

- mitigate infrastructure risk and to maintain patient safety, healthcare worker safety, service availability and business continuity
- enhance service capacity, support contemporary models of care and improve patient and staff amenity
- sustain and improve infrastructure assets that provide essential capacity for delivering responsive and appropriate clinical services across rural and regional public health facilities
- provide a stronger role for outer regional services that will allow care to be safely provided closer to where people live
- further incentivise health services and agencies to implement effective asset management that aligns with existing government frameworks and policies.

The capital funding will result in delivery of renewal, reconfiguration and refurbishments across a range of projects and service delivery streams and deliver the key state government policy objective of ensuring all Victorians can access high quality health care, no matter where they live.

## Principles

Rural and regional agencies are often a driver for local economic development, being the largest employers in their respective areas.

The disparity in health outcomes between people in rural and regional areas is well documented. These reflect both higher exposure to risk factors and poorer access to healthcare. Capacity building and infrastructure investment ensures that everyone in Victoria has access to the care they need, when and where they need it, regardless of where they live.

The Fund will assist rural and regional health agencies to improve safety and quality of services, service capacity, models of service delivery, amenity and service efficiencies.

The Fund aligns with the Department of Treasury and Finance and the Victorian Health Building Authority (VHBA) asset management frameworks and asset management policies, principles, and practice, available at the following links:

- [Asset Management Accountability Framework](https://www.dtf.vic.gov.au/infrastructure-investment/asset-management-accountability-framework) <https://www.dtf.vic.gov.au/infrastructure-investment/asset-management-accountability-framework>
- [VHBA Asset Management Policy](https://www.vhba.vic.gov.au/news/asset-management-policy-released) <https://www.vhba.vic.gov.au/news/asset-management-policy-released>

The intent of the government's asset management policy is to achieve service delivery objectives and it creates an obligation for both the department (from a system perspective) and health services (from a local perspective).

Asset management is a whole-of-asset-lifecycle obligation requiring an understanding of need, capacity, condition, opportunity, and risk to drive value-for-money service outcomes.

Appropriate local and central governance arrangements oversee asset planning, investment prioritisation of in-scope items based on risk and, in the case of health services, oversee the replacement process.

Accurate and timely reporting of expenditure enables analysis of future investment needs, reporting to government on expenditure consistent with the defined purpose of the funding provision, and provides a robust information base for program audit.

Health services and agencies' asset replacement determination needs to be based on departmental frameworks and guidelines for prioritisation, risk management and service planning, as well as the service's role within the health system.

## Health portfolio allocation model

RHIF 2022-23 will be a submission-based process aiming to announce allocations by September 2022. VHBA encourages health services that have not previously accessed the RHIF program to engage with VHBA to discuss their requirements prior to grant submission deadlines. VHBA wishes to ensure that health services have confidence that annual grant funding rounds will be called.

## Stream funding

A major change in 2022 is that VHBA is prepared to consider funding for Ready for Implementation projects (Stream 1) as well as funding for projects still in Planning or Design Development (Stream 2). In submissions, health services will be asked to nominate which stream the project falls into according to readiness.

Each application is to be nominated as a Stream 1 or Stream 2 application. Confirmation of Department of Health representatives support for the project will be requested. VHBA will fully consider all submissions in each stream for potential funding.

### Stream 1 – Ready for Implementation

- Submission ready to be considered for full funding
- Designs and/or specifications substantially complete
- Detailed design accompanied by a detailed cost plan
- Regulatory approvals in place
- Ready to invite market tenders for construction/delivery quotations.

## Stream 2 projects – funding for ongoing Planning or Design Development

- Funding will be provided to advance projects to the next stage of readiness (seed funding).
- Projects can be funded for planning, design refinement or further technical work, to improve the site understanding and refine the accuracies of cost estimates before formal commitment to funding is provided.
- This Stream also allows for ongoing consultation with VHBA and Department of Health representatives to gain for full support for a refined proposal.

Any application successful for funding under Stream 2 is not automatically guaranteed to receive funding in subsequent rounds. Stream 2 projects will be required to demonstrate progress and will be eligible to be submitted for continuation of funding in successive annual funding applications.

## General eligibility criteria

Funding is available to Victorian regional and sub-regional health services, local and small rural health services, multipurpose services, public residential aged care services, registered community health services, bush nursing hospitals and centres, women's health services, Aboriginal community controlled health organisations and publicly funded community specialist palliative care services.

A list of eligible Health Services is attached at Appendix 1.

Applicants may be **ineligible** for consideration in this funding round where they have received funding under previous RHIF rounds and either:

- failed to substantially commence their project within two years of receipt of funds
- failed to fully comply with conditions of funding (for example, submission of progress reports, acquittals, unapproved change of scope)
- failed to complete their projects within approved timeframes.

## For eligible agencies

A maximum of two (2) applications per health service will be accepted for RHIF 2022-23. Where health services have been amalgamated, the amalgamated health service may seek VHBA approval to submit more applications. If more than one submission is made, the agency must indicate the priority order (Priority 1 or Priority 2) of each submission.

Funds are available for:

- construction: minor infrastructure including replacement, reconfiguration, remodelling and refurbishment projects to address aged building fabric, compliance and demand issues
- non construction: equipment (standalone medical equipment, engineering infrastructure and plant)
- information and communications technology
- new technologies including systems to reduce usage and increase efficiencies of power and/or water
- compliance related capital and /or upgrade works (e.g. AS4187 including pandemic improvement / readiness, fire and life safety works)
- motor vehicles – eligibility restricted to bush nursing centres only.

A series of support resources are identified in Appendix 2.

The following are examples of items which may be included in funding applications:

### **Construction works**

- Remodelling and refurbishment projects to address aged building fabric, compliance, demand issues meeting universal design standards (refer to Appendix 2 of *RHIF 2022-23 Guidelines*).
- Modifications to enable buildings to be fit for purpose, for example, moving from low care to high care residential aged services.
- Refurbishment/repairs/reconfiguration/replacement or expansion of ageing buildings and equipment to reflect infrastructure risk mitigation strategies:
  - security systems (access controls, CCTV, duress alarms, nurse call systems)
  - laundry and customer kitchen upgrades or equipment
  - improved capacity or replacement of dilapidated assets located underground and reticulation services
  - waiting room, reception, staff tearoom configurations (infection prevention)
  - accessible paths and ramps, Changing Places toilets
  - expansion of services including consulting rooms, wards, pathology, operating theatres.
- Address building defects such as leaking roofs, upgrade building services and worn carpets.
- Address increased demand through expansion and refurbishment of existing premises such as new reception and intake areas to bring facilities up to the appropriate standards for disability access and ensure the safety and security of public areas.

### **Fire safety**

- Fire safety compliance upgrades and the completion of outstanding fire safety works; items such as fire detection and suppression systems, fire storage tanks, fire pump sets, fire indication panels, requirement to have sprinkler heads over the doorways of each patient room etc.

### **Infection prevention and control**

- Compliance with *AS4187 Reprocessing of Reusable Medical Devices in Health Service Organisations* including cleaning, disinfecting, and sterilising reusable medical and surgical instruments and equipment, and maintenance of associated environments in health care facilities, upgrades to central sterile services department (CSSD).
- Improving infection prevention and control (IPC) flows and throughput (in context to recent Health COVID-19 IPC recommendations).

### **Minor medical equipment**

- Funding for minor medical equipment that is at end of life or new equipment needed to support contemporary models of care and improvement in patient outcomes including enabling capital works; items such as X-ray units, endoscopic/laparoscopic towers, and scopes and IV pumps (syringe drivers, volumetric pumps, patient care analgesia pumps), patient beds and trolleys.
- Statewide mobile services such as mobile stroke and renal treatment (lithotripsy) units that provide critical services outside an acute setting.
- Pathology equipment and medical fridges and freezers.
- Specialised furniture and fittings in operating rooms, intensive care units and emergency departments such as pendants, operating room lights and operating room tables).

- Equipment for dental health where auspiced by a health service such as dental chairs, exam lights and OPG equipment.

### Healthcare worker safety

Funding to prevent and control high priority hazards and risks in the workplace and remediate these risks with minor capital works such as egress doors, room configuration/equipment (CCTV, duress alarms), appropriate signage and wayfinding that enhance the security and welfare of people in workplaces.

## Ineligible and excluded items

- Operational funding and maintenance contributions (health services are to ensure that they have secured any necessary recurrent funding for operations, maintenance etc independent of capital works funding sought under this application).
- Fixtures, fittings and furniture which are not associated with a refurbishment project. Routine replacement of furniture and fittings that are worn is the responsibility of agencies to manage as part of their existing maintenance and replacement program.
- Motor vehicles (eligibility restricted to bush nursing centres only).

## Grant submission and evaluation process

The submission process is as follows:

1. Call for submissions
2. Eligibility assessment
3. Evaluation panel assessments
4. Buildability review
5. Executive panel endorsement
6. Ministerial approval
7. Agency notification
8. Project execution and delivery

The indicative timeframe for the RHIF 2022-23 Grant funding is as follows:

Milestone	Target date
Grant round opens	Friday 17 June 2022
<b>Briefing to health services (online)</b>	<b>Friday 1 July 2022</b>
<b>Deadline to upload applications</b>	<b>Friday 22 July 2022</b>
Announcement of successful funding (following Ministerial approval)	Late September 2022

# Submission requirements

The Victorian Health Building Authority (VHBA) is using a web-based online application process.

## Project categories

RHIF 2022-23 applications will be categorised into one of the following:

1. Regulatory and Compliance
2. Quality and Safety
3. Respond to Growing Demand/Capability.

## Supporting documentation

Each application should address the selection criteria and include a full description of the scope of the project, key deliverables, likely benefits, project readiness, funding sought (including contingency allowances), and how key risks would be mitigated.

The following supporting documentation is required:

- design drawings, master plans, functional plans, elevations
- photographs of existing conditions and computer drafted imagery or artists impressions of future state
- cost plan for capital projects (by appropriately qualified independent quantity surveyors - including associated decanting costs, infrastructure connection/upgrade costs, site/infrastructure costs, demolition, fees, contingency allocation (design, construction contingency allowances, escalation allowance)
- quotations from external suppliers for equipment purchases, supply/installation (including provision to 'make good' if appropriate)
- project management plan (PMP) for construction projects:
  - applications less than \$0.5 million should include information on scope, governance structure, timelines, deliverables, benefits
  - applications greater than \$0.5 million should include where appropriate links demonstrating alignment with regional and health service strategic plans, including health campus master plans. The PMP needs to clearly set out scope, deliverables, benefits, timelines, cost plans, procurement strategy, project governance structure (project organisation charts) and risk assessments
- procurement framework for non-construction projects
- independent reports (audits, non-compliance reports or improvement notices) highlighting risk and/or compliance issues including recommendations and proposed solutions
- risk registers.

## Online portal for applications

The online portal, SmartyGrants, will be the means of submission. The web address for general information about [SmartyGrants](http://www.smartygrants.com.au) is <www.smartygrants.com.au>.

To make an application, you will be required to create a password protected log-in to access the application form. The [portal access for applications](https://dhhs.smartygrants.com.au/rhif-22-23) is <https://dhhs.smartygrants.com.au/rhif-22-23>.

All applications must be:

- from an eligible agency
- endorsed by the chief executive officer
- submitted via the online portal SmartyGrants application form and include relevant supporting documentation (for example, project management plan (or business case), design drawings, photos, cost plans, quotations, letters of support and other supporting information)
- received no later than the closing date and time **5.00 pm, Friday 22 July 2022**
- unless exceptional circumstances apply, applications received after the specified time and date will be deemed ineligible for consideration.

## Consultation and advice

Technical queries or clarifications can be submitted through the [Regional Health Infrastructure Fund email](mailto:RHIF.Applications@health.vic.gov.au) address <RHIF.Applications@health.vic.gov.au>. VHBA will endeavour to respond to questions as quickly as possible.

Applicants are encouraged to seek assistance when preparing applications from the Regional [Health Infrastructure Fund email address](mailto:RHIF.Applications@health.vic.gov.au) <RHIF.Applications@health.vic.gov.au>, or via the [Regional Health Infrastructure Fund website](https://www.vhba.vic.gov.au/health/regional-facilities/regional-health-infrastructure-fund) <https://www.vhba.vic.gov.au/health/regional-facilities/regional-health-infrastructure-fund>.

SmartyGrants technical assistance regarding completion of the online form can be obtained through reviewing the [SmartyGrants help guide](https://applicanthelp.smartygrants.com.au/help-guide-for-applicants/) <https://applicanthelp.smartygrants.com.au/help-guide-for-applicants/> or contacting [SmartyGrants via email](mailto:service@smarty.grants.com.au) at <service@smarty.grants.com.au>, or calling (03) 9320 6888.

## Design guides and technical references

See *Appendix 2: Construction Projects in Victoria* for references and links to VHBA design and technical guidelines.

## Assessment criteria

Applications will be assessed by a VHBA evaluation panel using a defined set of assessment criteria. Submissions should reflect agreed policy objectives and how the proposed works will meet the objectives of better health for people in regional and rural Victoria.

Applications will be assessed within the project categories (Regulatory and Compliance, Quality and Safety, Respond to Growing Demand / Capability). The following criteria will be applied to assess each application and will be considered with the evidence provided. Applications should fully address all criteria.

**Table 1: Assessment criteria**

#	Criteria	Descriptor	Weighting
1	<b>Improved patient experience and quality of care</b>	<ul style="list-style-type: none"> <li>How will this proposal result in improved patient experience and quality of care? (e.g. improved access to care, reduced incidence of patient harm, increased patient satisfaction)</li> </ul>	40%
2	<b>Increased system efficiency</b>	<ul style="list-style-type: none"> <li>How will this proposal increase system efficiency? (e.g. increased system throughput, reduction in reactive maintenance expenditure).</li> <li>Include supporting data to summarise current problems and predicted improvements where possible.</li> </ul>	35%
3	<b>Improved workforce experience and safety</b>	<ul style="list-style-type: none"> <li>How will this proposal improve workforce experience and safety? (e.g. increased workforce satisfaction, reduction in health sector job vacancies)</li> <li>Provide evidence of safety, quality, regulatory issues or standards non-compliance. Provide copies of PIN notices or adverse audits to support the case for the proposal, if applicable.</li> </ul>	10%
4	<b>Stronger regional communities and economies</b>	<ul style="list-style-type: none"> <li>How will this proposal strengthen regional communities and economies? (e.g. decreased distance to treatment, Increased employment in health sector).</li> <li>Include supporting data to summarise current problems and predicted improvements where possible.</li> </ul>	15%
5	<b>Project risks, mitigation, and dependencies</b>	<ul style="list-style-type: none"> <li>Organisational readiness to implement the project, including key milestones and timeframe for completion.</li> <li>Describe key risks and mitigation activities to ensure you meet project milestones and delivery, e.g. technical difficulties, procurement, local supply issues, consultants, etc.</li> <li>Please describe any key dependencies that may impact upon the delivery of this project (including their potential impact on the project cost, schedule, scope and benefits). Attach additional documentation as required.</li> </ul>	Projects will be assessed as ready, partially ready, or not ready

#	Criteria	Descriptor	Weighting
6	<b>Governance and project oversight</b>	<ul style="list-style-type: none"> <li>The degree to which health service/agency governance structures and processes are in place to oversee the proposed project development, implementation, monitoring, and reporting.</li> <li>Please describe the governance framework, including oversight bodies and meeting regimes (Executive Steering Committee, Project Control Group, Working Team, etc.) to oversee proposed project development, implementation, monitoring and reporting.</li> <li>Confirm the availability and experience of the nominated project manager and other resources for this proposal.</li> </ul>	Project governance will be assessed as strong, good, or inadequate

While not weighted, the outcomes of assessment of Criteria 5 and 6 may influence the overall success of the application to receive funding.

## Buildability of capital/construction projects

Following submission in SmartyGrants, for applications involving a construction element greater than \$0.5 million, VHBA may undertake an evaluation of buildability and constructability be undertaken by an independent consultant to confirm viability.

VHBA may require the health service to meet or discuss the details of the proposal or respond to other Requests for Information during the evaluation period. The detail and responsiveness of the health service to respond to such queries will be important for VHBA assessment of each proposal.

## Sustainability

Climate change represents a fundamental threat to public health. Victoria is already experiencing significant impacts from events which are becoming more frequent and intense as a result of climate change. Therefore, it is critical that the health sector plays a central role in driving action on climate change, seeking solutions and supporting the community to adapt to its impacts.

Delivering sustainable and resilient buildings promotes better patient outcomes, higher employee satisfaction and productivity, lowers operating costs and emissions, and ensures the building is operational at all times to ensure fair and timely access to healthcare.

In line with VHBA's requirements for capital projects, minimum sustainability requirements and opportunities to support enhanced initiatives have been implemented in the 2022-2023 RHIF funding round. In summary this:

- requires health services to complete a sustainability business-as-usual checklist and include in their SmartyGrants applications to show compliance with minimum requirements
- requires construction projects over \$5m to include a budget of 2.5 per cent of total construction cost for enhanced sustainability initiatives in their cost plan
- allows health services to access up to 2.5 per cent of total construction cost for enhanced sustainability initiatives for projects up to \$5m, where the project demonstrates the benefit of additional investment.

Refer to the *Sustainability frequently asked questions* (FAQs) in Appendix 3 for more guidance regarding sustainability requirements and opportunities for your project.

## Conditions of funding

1. The funds that will be provided are based on approved project scope as identified within the funding approval letter.
2. Funds are provided only for the approved project and scope including generic type, functionality, and number of items in the approved allocation and must not be used for any other purpose.
3. Any changes to scope, cost or timeframes will require departmental approval. Any increased costs associated with the project will be the responsibility of the health service.
4. If only specific elements of an application have been approved (partial funding), the health service/health agency must ensure that funds are used only for the approved elements.
5. Where projects are funded from multiple sources, and the additional source of funding is no longer available, the Victorian Government is not obliged to provide any additional funding.
6. Funding provided for any nominated asset(s) must be expended by a health service/health agency in accordance with the notification letter.
7. Applicants should demonstrate that project viability is not dependent on continuing or recurrent Victorian Government funding.
8. Capital works and equipment acquisitions shall not require any growth in recurrent funding from the department.
9. Funding is not available for projects previously funded or already approved for funding from another source.
10. Final payment will be made in accordance with the Milestones and Payment criteria relevant to the approved scope identified in the funding approval letter. All non-construction projects must be completed within two (2) financial years. Construction projects must be completed with two years of contracts awarded and /or in accordance with the signed Funding Agreement.

## Asset management

11. On completion of the project, health services are required to update asset registers, maintenance and asset management plans, and provide details of the testing and commissioning plans (including for decommissioning and disposing of the item/infrastructure replaced). Similarly, 'new' acquisitions (outside the initiative and irrespective of the funding source) are to be included on the asset register and incorporated into future asset management planning.
12. Health services reporting on asset replacement under the initiative are required to demonstrate financial and asset accountability and reporting and investment against asset management plans for engineering infrastructure and medical equipment replacement under these programs.
13. Medical equipment items proposed must be approved by the Therapeutic Goods Administration (including any hybrid technologies) and replacement engineering infrastructure and medical equipment are to comply with Australian Standards, regulations and guidelines.

## Governance

14. Capital delivery under this initiative requires works program management, governance, and internal controls by health services to be consistent with capital project management policies and tailored to the scope and size of the capital expenditure program. Governance processes need to be in place to ensure procurement of the approved asset is consistent with the scope agreed and approved by the department and communicated during the procurement phase so that the purchase remains in-scope and procured within the financial year.

15. Applications put forward for funding must have satisfied health service/agency governance requirements including that:
  - projects have been appropriately scoped in accordance with the program requirements
  - projects have the required internal personnel available to deliver the approved asset
  - project governance and reporting is in place for these projects
16. The project(s) will be directly managed by the health service/agency/organisation in a manner that reflects departmental guidelines relating to probity, financial reporting and project completion information.

## **Assessment Outcome and Payment Milestones**

17. All agencies will initially be informed of the outcome of their submission by email. Successful applicants will receive a letter that confirms the scope of funded works, terms of payments and delivery timeframe. This letter will have an attachment that must be signed by the CEO and returned to the Executive Director, Asset Development and Infrastructure Advisory Services, VHBA, prior to any payments being made. The letter will outline a summary of payment milestones aligned to project phases and gateways.
18. Following receipt of the signed letter, VHBA will need to be kept apprised of the project status to approve the allocated payments in accordance with the agreed terms and milestones. Completed and signed claim forms submitted to VHBA must include supporting invoices (and purchase orders).
19. For construction projects greater than \$2 million, a Funding Agreement will be developed and documented in consultation between the Health Service and VHBA Asset Development and Infrastructure Advisory Services to outline the following requirements:
  - i) agreed project scope
  - ii) agreed project timeframe and payment milestones
  - iii) project governance framework and reporting requirements
  - iv) confirmation that project works will be undertaken by appropriately qualified contractors in accordance with all regulations and standards applicable to the works
20. Funding may be recalled by the department if projects do not proceed or are not completed in a timely manner.

## **Reporting**

21. A report on the status of the project will be provided to the department at agreed project milestones and at the completion of the project.
22. Health services will be required to provide funding acquittals and fortnightly status reporting against milestones and liaise with their Project Manager on tender specifications and project deliverables.
23. A completion report is required to be submitted. The template will be provided during the course of the project.
24. The department must be notified if there is to be a prolonged delay in the asset procurement, installation or minor capital works.

## **Procurement**

25. Any proposed changes in scope must be agreed in writing prior to purchase commitment.

26. Health services must comply with government policies and guidelines in their procurement activities including the [Social Procurement Framework](https://www.buyingfor.vic.gov.au/social-procurement-victorian-government-approach) <https://www.buyingfor.vic.gov.au/social-procurement-victorian-government-approach> (where applicable).
27. The department requires health services to work collaboratively with Health Share Victoria to maximise value-for-money procurement of medical equipment or plant items and deliver the most efficient purchasing arrangements, including bulk purchasing to achieve economies of scale. For further information refer to the procurement and purchasing requirements on the Health Share Victoria website at [Health Share Victoria](https://healthsharevic.org.au/) <https://healthsharevic.org.au/>.

Health services should include the use of Working for Victoria in any procurement tenders. More information is available at [Working for Victoria](https://www.vic.gov.au/working-victoria-information-jobseekers) <https://www.vic.gov.au/working-victoria-information-jobseekers>.

## Disposal

28. Medical equipment/plant/engineering infrastructure replaced must be decommissioned and disposed of in accordance with appropriate and required standards. For further details on decommissioning and disposal refer to the Medical equipment asset management framework at [Medical equipment and engineering infrastructure](https://www2.health.vic.gov.au/hospitals-and-health-services/planning-infrastructure/medical-equipment) <https://www2.health.vic.gov.au/hospitals-and-health-services/planning-infrastructure/medical-equipment>.
29. The finance register, asset register, equipment and engineering registers and asset management plans will be updated by the agency for both the disposal of the replaced asset and the acquisition of the replacement asset including the date of disposal.

## Appendix 1: Eligible health services

These public health services and agencies are eligible to apply to the 2022-23 Regional Health Infrastructure Fund:

### Regional (6)

Albury Wodonga Health

Barwon Health

Bendigo Health

Goulburn Valley Health

Grampians Health

Latrobe Regional Hospital

### Sub-regional (11)

Bairnsdale Regional Health Service

Bass Coast Health

Central Gippsland Health Service

Dhelkaya Health

Echuca Regional Health

Mildura Base Public Hospital

Northeast Health Wangaratta

South West Healthcare

Swan Hill District Health

West Gippsland Healthcare Group

Western District Health Service

### Local health services (7)

Benalla Health

Colac Area Health

East Grampians Health Service

Gippsland Southern Health Service

Kyabram and District Health Services

Maryborough District Health Service

Portland District Health

### Small rural health services (29)

Beaufort and Skipton Health Service

Beechworth Health Service

Boort District Health

Casterton Memorial Hospital  
Central Highlands Rural Health  
Cohuna District Hospital  
East Wimmera Health Service  
Great Ocean Road Health  
Heathcote Health  
Hesse Rural Health  
Heywood Rural Health  
Inglewood and Districts Health Service  
Kerang District Health  
Kilmore and District Hospital  
Kooweerup Regional Health Service  
Mansfield District Hospital  
Moyne Health Services  
NCN Health  
Omeo District Health  
Rochester and Elmore District Health Service  
Rural Northwest Health  
Seymour Health  
South Gippsland Hospital  
Tallangatta Health Service  
Terang and Mortlake Health Service  
West Wimmera Health Service  
Yarram and District Health Service  
Yarrawonga Health  
Yea and District Memorial Hospital

### **Multi-purpose services (6)**

Alpine Health  
Mallee Track Health and Community Service  
Orbost Regional Health  
Robinvale District Health Services  
Timboon and District Healthcare Service  
Corryong Health

## **Regional Aboriginal community controlled health organisations (17)**

Ballarat and District Aboriginal Co-operative Ltd  
Bendigo and District Aboriginal Co-operative Ltd  
Budja Budja Aboriginal Co-operative Ltd  
Dhauwurd Wurrung Elderly and Community Health Service  
Gippsland and East Gippsland Aboriginal Co-operative Ltd  
Goolum-Goolum Aboriginal Co-operative Ltd  
Gunditjmara Aboriginal Co-operative Ltd  
Lakes Entrance Aboriginal Health Association  
Mallee District Aboriginal Services  
Moogji Aboriginal Council East Gippsland Inc  
Mungabareena Aboriginal Corporation  
Murray Valley Aboriginal Co-operative Ltd  
Njernda Aboriginal Corporation  
Ramahyuck District Aboriginal Corporation – Sale  
Rumbalara Aboriginal Co-operative Ltd  
Wathaurong Aboriginal Co-operative Ltd  
Winda-Mara Aboriginal Corporation

## **Standalone public residential aged care services (4)**

Darlingford Upper Goulburn Nursing Home Inc  
Indigo North Health Inc  
Lyndoch Living  
Red Cliffs and Community Aged Care Service Inc

## **Bush nursing hospitals (5)**

Cobden District Health Services Inc  
Euroa Health Inc  
Heyfield Hospital Inc  
Nagambie HealthCare  
Neerim District Health Service

## **Registered community health services (13)**

Ballarat Community Health  
Bellarine Community Health Ltd  
Bendigo Community Health Services Ltd  
Dhelkaya Health  
Cobaw Community Health Services Ltd

Gateway Health  
Gippsland Lakes Community Health  
Grampians Community Health  
Latrobe Community Health Service  
Nexus Primary Health  
Northern District Community Health Service  
Primary Care Connect  
Sunraysia Community Health Services Ltd

### **Bush nursing centres (15)**

Balmoral Bush Nursing Centre  
Buchan Bush Nursing Centre  
Cann Valley Bush Nursing Centre  
Dargo Bush Nursing Centre  
Dartmoor & District Bush Nursing Centre  
Dingee Bush Nursing Centre  
Elmhurst Bush Nursing Centre  
Ensay Bush Nursing Centre  
Gelantipy District Bush Nursing Centre  
Harrow Bush Nursing Centre  
Lake Bolac Bush Nursing Centre  
Lockington & District Bush Nursing Centre  
Swifts Creek Bush Nursing Centre  
Walwa Bush Nursing Centre  
Woomelang & District Bush Nursing Centre

### **Women's health services (5)**

Gippsland Women's Health Service Inc  
Women's Health Goulburn North-East Inc  
Women's Health Grampians Inc  
Women's Health Loddon Mallee Inc  
Women's Health and Wellbeing Barwon South West Inc

### **Publicly-funded community specialist palliative care services (2)**

Ballarat Hospice Care Inc  
Goulburn Valley Hospice Care Service

## Appendix 2: Construction projects in Victoria - references and links

The following sites provide an overview of the requirements for government funded projects in Victoria.

### Department of Health website

[Australasian Health Facility Guidelines](https://healthfacilityguidelines.com.au/) <https://healthfacilityguidelines.com.au/>

[Fire risk management procedures and guidelines](https://providers.dffh.vic.gov.au/fire-risk-management-procedures-and-guidelines) < https://providers.dffh.vic.gov.au/fire-risk-management-procedures-and-guidelines>

### Victorian Health Building Authority website

[VHBA RHIF page](https://www.vhba.vic.gov.au/health/regional-facilities/regional-health-infrastructure-fund) <https://www.vhba.vic.gov.au/health/regional-facilities/regional-health-infrastructure-fund>

[Design guidelines](https://www.vhba.vic.gov.au/resources/design-guidelines) <https://www.vhba.vic.gov.au/resources/design-guidelines>

[Universal design guidelines](https://www.vhba.vic.gov.au/resources/universal-design) <https://www.vhba.vic.gov.au/resources/universal-design>

[Technical guidelines](https://www.vhba.vic.gov.au/resources/technical-guidelines) <https://www.vhba.vic.gov.au/resources/technical-guidelines>

[Masterplanning guidelines](https://www.vhba.vic.gov.au/masterplanning) <https://www.vhba.vic.gov.au/masterplanning>

[Changing Places design specifications 2020](https://www.vhba.vic.gov.au/resources/design-guidelines) <https://www.vhba.vic.gov.au/resources/design-guidelines>

[Public sector residential aged care services \[Interim\] Facility design guidelines](https://www.vhba.vic.gov.au/public-sector-residential-aged-care-services-interim-facility-design-guidelines) <https://www.vhba.vic.gov.au/public-sector-residential-aged-care-services-interim-facility-design-guidelines>

### Department of Treasury and Finance website

[Delivery of Government Funded projects in Victoria](https://www.dtf.vic.gov.au/infrastructure-investment/public-construction-policy-and-resources) <https://www.dtf.vic.gov.au/infrastructure-investment/public-construction-policy-and-resources>

[Ministerial Directions and Instructions – Public Construction Procurement](https://www.dtf.vic.gov.au/public-construction-policy-and-resources/ministerial-directions-and-instructions-public-construction-procurement) <https://www.dtf.vic.gov.au/public-construction-policy-and-resources/ministerial-directions-and-instructions-public-construction-procurement>

[Practitioners Toolkit](https://www.dtf.vic.gov.au/public-construction-policy-and-resources/practitioners-toolkit) <https://www.dtf.vic.gov.au/public-construction-policy-and-resources/practitioners-toolkit>

[Construction Supplier Register](https://www.dtf.vic.gov.au/infrastructure-investment/construction-supplier-register) <https://www.dtf.vic.gov.au/infrastructure-investment/construction-supplier-register>

[Full Business Case Template](https://www.dtf.vic.gov.au/investment-lifecycle-and-high-value-high-risk-guidelines/stage-1-business-case) <https://www.dtf.vic.gov.au/investment-lifecycle-and-high-value-high-risk-guidelines/stage-1-business-case>

### Local Jobs First website

[Victorian Industry Participation Policy](https://localjobsfirst.vic.gov.au/about/local-jobs-first) <https://localjobsfirst.vic.gov.au/about/local-jobs-first>

[Major Projects Skills Guarantee](https://localjobsfirst.vic.gov.au/agency-guidance/major-project-skills-guarantee) <https://localjobsfirst.vic.gov.au/agency-guidance/major-project-skills-guarantee>

## Jobs Victoria website

[Working for Victoria](https://www.coronavirus.vic.gov.au/find-work-or-employees-fast-working-victoria) <https://www.coronavirus.vic.gov.au/find-work-or-employees-fast-working-victoria>

## Commonwealth policies and procedures

[Building and Construction Industry \(Improving Productivity\) Act 2016](https://www.legislation.gov.au/Details/C2017C00042)  
<https://www.legislation.gov.au/Details/C2017C00042>

[Code for the Tendering and Performance of Building Work 2016](https://www.legislation.gov.au/Details/F2017C00125)  
<https://www.legislation.gov.au/Details/F2017C00125>

[Australian Government Building and Construction Workplace Health and Safety Accreditation Scheme](https://ablis.business.gov.au/service/ag/australian-government-building-and-construction-workplace-health-and-safety-accreditation-scheme/301)  
<https://ablis.business.gov.au/service/ag/australian-government-building-and-construction-workplace-health-and-safety-accreditation-scheme/301>

[National Construction Code](https://ncc.abcb.gov.au/) <https://ncc.abcb.gov.au/>

## Appendix 3: Sustainability FAQs

### What are the benefits of embedding sustainability in my project?

Delivering sustainable and resilient buildings promotes better patient outcomes, higher employee satisfaction and productivity, lowers operating costs and emissions, and ensures the building is operational at all times to ensure fair and timely access to healthcare.

### What sustainability requirements must I include on my project?

All eligible projects approved under grant funding for VHBA need to apply the minimum sustainability requirements as outlined in the [Sustainability Checklist for Grants Programs](https://www.vhba.vic.gov.au/sites/default/files/2022-06/RHIF-2022-23-Sustainability-Checklist-for-Grants-Programs.pdf) <<https://www.vhba.vic.gov.au/sites/default/files/2022-06/RHIF-2022-23-Sustainability-Checklist-for-Grants-Programs.pdf>>. Eligible projects over \$5million must also apply a sustainability budget of 2.5 per cent of the total construction cost for enhanced sustainability initiatives.

### What if the minimum requirements cannot be included in my project?

The grant application is required to identify which of the minimum sustainability requirements are being included in the project based on the project scope, under the relevant project type using the **Sustainability Checklist for Grants Programs**. Reasons for not including minimum requirements into your project would be:

- it is not applicable, such as the requirements for below ground carparks where below ground carparks are not part of the project
- it is not technically or economically viable to retrofit the initiative into an existing building
- the level of investment or effort required outweighs the potential benefit of inclusion.

### How can I fund enhanced sustainability initiatives?

A budget allocation of up to 2.5 per cent of the total construction cost is available to support enhanced sustainability initiatives, where the application demonstrates the benefit of the additional investment.

For construction projects above \$5 million, the allocation of up to 2.5 per cent sustainability budget is mandatory. The application must identify the sustainability focus areas that can be further refined in design development.

### What are some examples of enhanced sustainability initiatives for my project?

Examples of enhanced sustainability initiatives for the project types within the RHIF application are outlined in the below table. Applicants are encouraged to refer to *Appendix 3: Guidance for using the sustainability budget*, contained within the [Guidelines for sustainability in health care capital works](#) <[Sustainability-guidelines-for-capital-works-VHBA-Revised-October-2021.pdf](#)>, for further information regarding improvements to minimum sustainability requirements.

**Table 2: Examples of enhanced sustainability initiatives for different project types**

Category	Project type	Enhanced sustainability initiatives
New construction	<ul style="list-style-type: none"> <li>New construction</li> </ul>	<ul style="list-style-type: none"> <li>Provide a 10 or 20 per cent improvement on minimum insulation, glazing, building sealing, HVAC, lighting, domestic hot water, and monitoring requirements under Section J of the NCC 2019.</li> <li>At least 10 per cent of the building, by floor area, is to undergo JV4 air tightness testing and the builder is not to be informed which areas are to undergo testing.</li> <li>Install embedded generation solar panel that is sized to the base load of the building.</li> <li>Install reed switches on openable windows in rooms with individual thermal controls to manage heating and cooling.</li> <li>Providing advanced air purification through carbon filtration, air sanitisation and air quality maintenance.</li> <li>Incorporating biophilic design elements.</li> </ul>
Refurbishment and infrastructure upgrade works	<ul style="list-style-type: none"> <li>Refurbishment</li> <li>Engineering infrastructure works (e.g. engineering plant and equipment, electrical work, generators, heating ventilation and air conditioning)</li> <li>DDA and universal access works</li> <li>Client meal preparation</li> </ul>	<ul style="list-style-type: none"> <li>Kitchen conversion to all-electric.</li> <li>Converting HVAC equipment such as boilers to all-electric.</li> <li>Incorporate extended external building design to extend and improve building summer shading.</li> <li>Improving on minimum requirements for total volatile organic compounds (TVOC) limits for paints, adhesives, sealants, and carpets.</li> <li>Provide access to healthy food and drink options in meal preparation areas.</li> <li>Provide external shading and low-conductive materials for handrails to enable safe use in extreme heat days.</li> </ul>
Planning and Design Development	<ul style="list-style-type: none"> <li>Planning</li> <li>Design Development</li> <li>Feasibility</li> <li>Schematic design</li> </ul>	<ul style="list-style-type: none"> <li>Planning for an all-electric site.</li> <li>Maximising initiatives to reduce the urban heat island effect such as increased greenery and shading.</li> <li>Engaging an ESD consultant for a dedicated ESD strategy to enhance sustainability initiatives for the development.</li> <li>Developing a climate adaptation plan.</li> </ul>

Category	Project type	Enhanced sustainability initiatives
Motor vehicle (bush nursing centres only)	<ul style="list-style-type: none"> <li>Motor vehicle (bush nursing centres only)</li> </ul>	<ul style="list-style-type: none"> <li>Electric vehicle procurement with solar powered charging stations.</li> </ul>
Categories with limited opportunity for sustainability outcomes	<ul style="list-style-type: none"> <li>Equipment (medical)</li> <li>Fire safety</li> <li>Nurse call</li> <li>Security</li> <li>Information and communication technology</li> <li>Wi-Fi upgrade</li> <li>Software/hardware</li> <li>Duress alarms</li> <li>Infection prevention and control</li> <li>Healthcare worker safety</li> <li>Other</li> </ul>	<ul style="list-style-type: none"> <li>Upload of minimum sustainability checklist is not required for these project types.</li> <li>These projects have limited enhanced sustainability initiatives.</li> </ul>

## Application process

### How do I show evidence of compliance of sustainability initiatives?

All applicants are required to upload the *Sustainability Checklist for Grants Programs* as part of the Smartygrants application. For projects with limited opportunity for sustainability outcomes, completion of the *Sustainability Checklist for Grants Programs* is not required.

### What are the implications for not including sustainability initiatives in my application?

Sustainability initiatives contribute to better patient and staff outcomes, lower operating costs and carbon emissions, and support government policy on climate change. Therefore, not embedding sustainability in projects will result in higher carbon emissions, higher operating costs, and the project not potentially complying with government policy.

Projects that do not have provision for minimum sustainability requirements in their application will be subject to additional design, cost, and scope clarification meetings, for resolution in the application review phase, and may be viewed less positively as applications which have embedded sustainability.

An energy and water inefficient building can also negatively impact the NABERS<sup>1</sup> energy and water ratings that some health facilities are required to publish from 2022-23 as part of the operational management of health facilities.

## Project delivery

### Who is responsible for implementing sustainability requirements on my project?

Like all project requirements, health services are responsible for ensuring sustainability requirements are implemented as part of the project. It is recommended that a dedicated ESD workshop is held early in the project to ensure all stakeholders are aware of the sustainability objectives, key opportunities are identified and there is role clarity for implementing the sustainability requirements.

Options for ensuring the full sustainability potential for the project is achieved include:

- engaging a dedicated ESD consultant (recommended for construction projects over \$5million),
- building requirements into the role of the architect, services engineer or project manager,
- specifying sustainability objectives and requirements in the tender package for the contractor.

### What sustainability data must I provide to VHBA upon project completion?

For all construction and refurbishment projects that:

- changes an existing assets floor area
- changes the type of service provided in an asset
- builds a new asset
- changes the electricity or gas retailer
- installs or removes a new 'gate' meter for electricity, water or gas

the health service must complete and send to VHBA the environmental data management system template as shown in *Appendix 4: Environmental data management system requirements* contained in the [Guidelines for sustainability in health care capital works](#)

<<https://www.vhba.vic.gov.au/sites/default/files/2020-05/VHHSBA-Guidelines-for-sustainability-healthcare-capital-works-20200528.pdf>>.

Projects that install a solar array must meet the requirements of VHBA's [reporting of solar photovoltaic data](#) <<https://www.vhba.vic.gov.au/reporting-solar-photovoltaic-data>>.

For construction projects over \$5million, post occupancy evaluations of energy, water, and waste targets require completion against actual building performance within six months of project completion.

## Resources

### Where can I access more information on sustainability guidelines and initiatives for my project?

Applicants should refer to the following resources in the preparation of grant applications and delivery of grants projects, referred to throughout this document:

- [Sustainability Checklist for Grants Programs](#) <<https://www.vhba.vic.gov.au/sites/default/files/2022-06/RHIF-2022-23-Sustainability-Checklist-for-Grants-Programs.pdf>>, to be included in your grant application.

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<sup>1</sup> The National Australian Built Environment Rating System (NABERS) is a Commonwealth initiative that measures the environmental performance of Australian buildings. It provides a rating from 1 Star (making a start) to 6 Stars (market leading). More information on NABERS is available at [www.nabers.gov.au](http://www.nabers.gov.au).

- [Guidelines for sustainability in health care capital works](https://www.vhba.vic.gov.au/sites/default/files/2022-06/RHIF-2022-23-Sustainability-Checklist-for-Grants-Programs-endorsed.pdf)  
<<https://www.vhba.vic.gov.au/sites/default/files/2022-06/RHIF-2022-23-Sustainability-Checklist-for-Grants-Programs-endorsed.pdf>> (including in that document Appendix 2: Business as usual requirements and Appendix 4: Environmental data management system requirements).

**Who can I contact if I have any questions regarding sustainability on my application?**

Please email the [RHIF Applications team](mailto:RHIF.Applications@health.vic.gov.au) <[RHIF.Applications@health.vic.gov.au](mailto:RHIF.Applications@health.vic.gov.au)> for any questions relating to sustainability on your project.

To receive this publication in an accessible format email [Regional Health Infrastructure Fund](mailto:RHIF.Applications@health.vic.gov.au) <[RHIF.Applications@health.vic.gov.au](mailto:RHIF.Applications@health.vic.gov.au)>

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