



**Australian Government**

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**Department of Health and Ageing**

**GP superclinics**

**Primary Care Infrastructure Grants**

**Guidelines 2010**

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# Introduction

## Purpose of this document

Welcome to the Primary Care Infrastructure Grants Guidelines 2010 (the Guidelines).

These Guidelines provide details of the arrangements for Primary Care Infrastructure Grants which are being made available under the GP Super Clinics Program, including information on how to apply and a sample application form.

Please note that the Department of Health and Ageing (the Department) is not seeking responses to this document.

## 1 Overview

### 1.1. Policy context

Australia needs a health care system that keeps people well, not just one that looks after them when they are sick. The Australian Government is committed to building a stronger primary health care system that is more efficient, lowers rates of avoidable hospital admissions, reduces health inequalities and improves health outcomes.

The Australian Government is taking action through its National Health and Hospitals Network.

The National Health and Hospitals Network will ensure that services are designed around the needs of patients, with a strong orientation towards prevention, early intervention and high quality integrated care. This will also take pressure off our public hospitals and improve the financial sustainability of our health and hospital system.

A strong primary health care sector is critical to the future success of our health care system. It focuses on keeping people well and able to participate in life and work, rather than just looking after them when they are sick.

Building on its commitment to taking funding and policy responsibility for GP and primary health care, the Australian Government will also strengthen these services to ensure patients receive better care in the community, and ensure Australians have better and more convenient access to these services close to home.

The National Health and Hospital Reform Commission Report June 2009 and the National Primary Health Care Strategy identified infrastructure as a key building block for primary health care reform in Australia. It is an important catalyst for new models of primary health care delivery that provide a more extensive array of services in a single location. Appropriate infrastructure enables and supports integrated services delivered by teams of health professionals and improved training opportunities for GPs, nurses and allied health care professionals.

The Australian Government has recognised the importance of supporting the infrastructure needs in primary health care by already committing to 36 GP Super Clinics around Australia, enhancing the National Rural and Remote Health Infrastructure Program and investing significantly in teaching and training facilities around the country.

As part of its commitment to improved primary health care infrastructure, the Australian Government will build on its initial investment by providing further funding of \$355.2 million over four years. This funding will provide for the construction of 23 new GP Super Clinics and assist general practices, primary health care and community health services, and Aboriginal Medical Services across the country to enhance the capacity of their facilities to deliver GP Super Clinic-style services.

The funding for enhancements to these existing facilities is being provided through the new Primary Care Infrastructure Grants initiative.

## **1.2. How will the Primary Care Infrastructure Grants initiative work?**

The infrastructure needs of existing general practices, primary health care and community health services, and Aboriginal Medical Services vary. Three streams of grants funding are available under the Primary Care Infrastructure Grants initiative, which provide flexibility in addressing these differing needs.

Funding will be made available through an annual competitive application round for each grant stream in each of 2010 and 2011. The funds will be managed flexibly across the three grant streams but will not exceed in total \$64.5 million in 2010-11 and \$52.5 million in 2011-12.

It is anticipated that the grants in 2010-11 could potentially comprise:

- Stream A - \$16.5 million for grants of up to \$150,000 each;
- Stream B - \$18 million for grants of up to \$300,000 each; and
- Stream C - \$30 million for grants of up to \$500,000 each.

It is anticipated that the grants 2011-12 could potentially comprise:

- Stream A - \$15 million for grants of up to \$150,000 each;
- Stream B - \$15 million for grants of up to \$300,000 each; and
- Stream C - \$22.5 million for grants of up to \$500,000 each.

## **1.3. The Program Objectives**

The Primary Care Infrastructure Grant initiative has five Objectives across the three grant streams. These Objectives are to:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;
2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management;
3. Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional;
4. Provide extended hours of service where these do not exist, for example additional services in the early morning, later in the evening or on weekends; and
5. Develop new, or enhance existing, clinical training facilities.

The specific Objectives relating to each grant stream are identified at pages 6-9.

## **1.4. Selection Criteria**

The selection criteria for the Primary Care Infrastructure Grants are as follows:

1. The potential for the proposal to achieve the Objectives as specified for each grant stream, as indicated at pages 6-9; and
2. The efficient and effective use of the funds.

Applicants should note that, in considering the extent to which the application meets selection criterion 2, the Application Assessment Panel will have regard to the following:

- The relative merit of each application;
- The geographic location of the applicant's existing facility and the existence of similar organisations in the area capable of achieving the same outcomes;
- The existence or otherwise of other funding sources available to the applicant for a capital works project;
- Whether the facility is accredited against relevant industry and/or training standards or is progressing towards this; and
- Contributions by other funding sources to the project which either increase the overall value of the project without increasing the value of the funds provided by the Commonwealth under this Program; or reduce the Commonwealth's financial contribution but still achieve the same objectives.

### *Ranking applications of equal merit*

Where one or more applications is found to be of equal merit, the relative merit of the applications will be determined by the Application Assessment Panel having regard to the extent to which the evidence in the application demonstrates that the existing facility is located in an area with one or more of the following features:

- Poor access to health services;
- Poor health infrastructure and or coordination;
- Where a Primary Care Infrastructure Grant could help take pressure off the emergency department of a local hospital;
- High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
- High population growth or anticipated high population growth.

In establishing the ranking, applications which demonstrate two of these features will rank higher than applications which demonstrate one of these features, and so on.

## **Selection Criteria Stream A – Grants of up to \$150,000**

Selection criterion 1:

The potential for the proposal to achieve Objectives 1 and 2, namely:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management.

Selection criterion 2:

The efficient and effective use of the funds.

Applicants should note that, in considering the extent to which the application meets selection criterion 2, the Application Assessment Panel will have regard to the following:

- The relative merit of each application;
- The geographic location of the applicant's existing facility and the existence of similar organisations in the area capable of achieving the same outcomes;
- The existence or otherwise of other funding sources available to the applicant for a capital works project;
- Whether the facility is accredited against relevant industry and/or training standards or is progressing towards this; and
- Contributions by other funding sources to the project which either increase the overall value of the project without increasing the value of the funds provided by the Commonwealth under this Program; or reduce the Commonwealth's financial contribution but still achieve the same objectives.

### *Ranking applications of equal merit*

Where one or more applications is found to be of equal merit, the relative merit of the applications will be determined by the Application Assessment Panel having regard to the extent to which the evidence in the application demonstrates that the existing facility is located in an area with one or more of the following features:

- Poor access to health services;
- Poor health infrastructure and or coordination;
- Where a Primary Care Infrastructure Grant could help take pressure off the emergency department of a local hospital;
- High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
- High population growth or anticipated high population growth.

In establishing the ranking, applications which demonstrate two of these features will rank higher than applications which demonstrate one of these features, and so on.

## **Selection Criteria Stream B – Grants of up to \$300,000**

Selection criterion 1:

The potential for the proposal to achieve Objectives 1, 2, 3 and 4 namely:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management;

AND

3. Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional;

AND

4. Provide extended hours of service where these do not exist, for example additional services in the early morning, later in the evening or on weekends.

Selection criterion 2:

The efficient and effective use of the funds.

Applicants should note that, in considering the extent to which the application meets selection criterion 2, the Application Assessment Panel will have regard to the following:

- o The relative merit of each application;
- o The geographic location of the applicant's existing facility and the existence of similar organisations in the area capable of achieving the same outcomes;
- o The existence or otherwise of other funding sources available to the applicant for a capital works project;
- o Whether the facility is accredited against relevant industry and/or training standards or is progressing towards this; and
- o Contributions by other funding sources to the project which either increase the overall value of the project without increasing the value of the funds provided by the Commonwealth under this Program; or reduce the Commonwealth's financial contribution but still achieve the same objectives.

### *Ranking applications of equal merit*

Where one or more applications is found to be of equal merit, the relative merit of the applications will be determined by the Application Assessment Panel having regard to the extent to which the evidence in the application demonstrates that the existing facility is located in an area with one or more of the following features:

- o Poor access to health services;
- o Poor health infrastructure and or coordination;
- o Where a Primary Care Infrastructure Grant could help take pressure off the emergency department of a local hospital;
- o High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
- o High population growth or anticipated high population growth.

In establishing the ranking, applications which demonstrate two of these features will rank higher than applications which demonstrate one of these features, and so on.

## **Selection Criteria Stream C – Grants of up to \$500,000**

Selection criterion 1:

The potential for the proposal to achieve Objectives 1, 2, 3, 4 and 5 namely:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management;

AND

3. Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional;

AND

4. Provide extended hours of service where these do not exist, for example additional services in the early morning, later in the evening or on weekends;

AND

5. Develop new, or enhance existing, clinical training facilities.

Selection criterion 2:

The efficient and effective use of the funds.

Applicants should note that, in considering the extent to which the application meets selection criterion 2, the Application Assessment Panel will have regard to the following:

- The relative merit of each application;
- The geographic location of the applicant's existing facility and the existence of similar organisations in the area capable of achieving the same outcomes;
- The existence or otherwise of other funding sources available to the applicant for a capital works project;
- Whether the facility is accredited against relevant industry and/or training standards or is progressing towards this; and
- Contributions by other funding sources to the project which either increase the overall value of the project without increasing the value of the funds provided by the Commonwealth under this Program; or reduce the Commonwealth's financial contribution but still achieve the same objectives.

### *Ranking applications of equal merit*

Where one or more applications is found to be of equal merit, the relative merit of the applications will be determined by the Application Assessment Panel having regard to the extent to which the evidence in the application demonstrates that the existing facility is located in an area with one or more of the following features:

- Poor access to health services;
- Poor health infrastructure and or coordination;
- Where a Primary Care Infrastructure Grant could help take pressure off the emergency department of a local hospital;
- High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
- High population growth or anticipated high population growth.

In establishing the ranking, applications which demonstrate two of these features will rank higher than applications which demonstrate one of these features, and so on.

## 2 Funding Arrangements

### 2.1. About the funding process

A competitive Invitation to Apply (ITA) for all three grant streams will be advertised in the national and regional press and on the Tenders and Grants page of the Department's website at <http://www.health.gov.au/tenders>

The assessment process will be conducted using the published selection criteria for each grant stream. Once applications are assessed, a recommendation will be made to the Minister for Health and Ageing, proposing a merit-based list of preferred applicants. Once approved, a letter will be sent to each preferred applicant inviting them to enter into negotiations with the Department.

For each grant, once a successful outcome to negotiations has been reached, the preferred applicant will be formally offered funding on the basis of the terms and conditions included in the template funding agreements forming part of the ITA document package.

Upon execution of each funding agreement, details of each grant will be published on the Department's website.

Unsuccessful applicants will be notified in writing that their application has been unsuccessful and offered feedback as set out below at 3.4.

### 2.2. What can the funding be used for?

Primary Care Infrastructure Grant funding can be used for:

- Professional fees for the design of the capital works project;
- Professional fees for legal and accountancy advice relating directly to the capital works project;
- Application fees for Development Approval, Building Permits and the like;
- Direct construction, including fit-out, costs for labour and materials for builders, plumbers, electricians etc;
- Supply and installation of information and communication technology equipment including both hardware and software; or
- Supply and installation (as appropriate) of essential medical equipment.

Funding cannot be applied towards the cost of:

- Ongoing operating (recurrent) costs (e.g. rent, utilities, salaries, maintenance);
- Professional health service delivery;
- The purchase of consumables (other than a consumables pack that may be supplied with equipment on delivery);
- The purchase of existing facilities, businesses or land;
- Travel and accommodation; or
- Student or staff overnight/residential accommodation.

### **2.3. Who can apply?**

Applications for funding are open to organisations or individuals operating existing facilities which are providing general practice (GP) services e.g. general practices, primary care and community health services and Aboriginal Medical Services.

All applicants are advised to seek both legal and taxation advice as part of preparing their application. Refer to the Important Notice to Applicants at Section 2.6.

### **2.4. Conditions of Funding**

Commonwealth funding will be provided through a funding agreement, based on the terms and conditions of the templates available for download as part of the Invitation to Apply document package. Applicants should ensure they are familiar with, and seek legal advice on, the terms and conditions of the proposed funding agreement for the grant stream for which they intend to apply.

Each funding agreement will be based upon the proposal that was approved for funding and will include the following Milestone Schedule, incorporating deliverables and associated payments:

- Demonstration of tenure within 14 days of execution of the funding agreement;
- Engagement of professional support (one or more of architect, qualified project manager, draftsman, civil engineer) - 40%\*;
- Submission to the Commonwealth of final drawings and project construction timeline. These Project Documents should include floor-plans, elevations, carparking arrangements sufficient to meet anticipated local government approval requirements;
- Submission to the Commonwealth of a copy of local government development approval - 40%\*;
- Submission to the Commonwealth of a copy of the executed building contract that includes a time is of the essence provision (the preference being is AS2124);
- Certification of midpoint of construction; and
- Submission of certificate of occupancy to the Commonwealth - 20%\*.

\*or as negotiated with the preferred applicant. Scheduled payments can only be made on satisfactory receipt of the deliverables in the Milestone Schedule and paid to a nominated bank account.

Funds unused and identified through audit processes at the end of an agreement must be returned to the Commonwealth.

Upon completion of the capital works project, the funding agreement will require the delivery of the new expanded arrangements, consistent with the Objectives, for the following periods of time:

- Stream A (up to \$150,000) - 2 years
- Stream B (up to \$300,000) - 3 years
- Stream C (up to \$500,000) - 5 years

While the use of the premises must continue, the ownership of the facility may change during these periods (subject to the Commonwealth's consent).

## **2.5. Performance and reporting procedures**

### *Key Performance Indicators:*

#### Objective 1:

- Achieve the identified capital works project in line with prescribed Milestones;
- Describe the upgraded or extended facilities supported by the grant funding;

#### Objective 2:

- The number of additional general practitioners, nurses and allied health professionals and/or students on clinical placements;
- Identify the local community health needs;
- Identify the new or additional services provided to meet these health needs including preventative activities and chronic disease management services;

#### Objective 3:

- Detail the processes introduced to support team based approaches to the delivery of care;

#### Objective 4:

- Detail the extended hours of service introduced following completion of the capital works project;

#### Objective 5:

- Describe the new, enhanced existing, clinical training facilities.

### *Reporting Requirements:*

#### During the construction period:

- Against the Milestones in the Milestone Schedule to the Funding Agreement; and
- Other reports as specified in the Funding Agreement for financial acquittal purposes such as bank account statements, audited reports.

#### Once operational:

- Six-monthly reports against the Key Performance Indicators as appropriate for the preceding six month period;
- Other reports as specified in the Funding Agreement for financial acquittal purposes such as construction completion report, bank account statements, audited reports.

### *Outcomes:*

Expected outcomes for the Primary Care Infrastructure Grants initiative, (subject to receipt of applications suitable for funding) include:

- Additional primary care infrastructure in existing general practices, primary health and community care services, and Aboriginal Medical Services.
- A broader range of primary health care services for communities and increased access to services for individuals.
- Increased support for the future primary care workforce through:
  - The provision of additional clinical training placements; and
  - New or enhanced clinical training facilities.

## **2.6. Important Notice to Applicants**

### **Taxation**

Applicants are advised to carefully consider the likely taxation treatment of any funding provided by the Commonwealth as part of this Program. As a general principle, grants such as that available under this Program will be assessable as income in the hands of a funding recipient where they are received in relation to the carrying on of a business.

This may mean that unless you (or the entity that you propose to use to receive funding) have tax exempt status (such as a not for profit organisation) or are not currently carrying on a business, tax may be payable on the full amount of funding provided. 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, you are advised to seek your own independent advice on this issue 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.

### **Goods and Services Tax (GST)**

The total funding payable to the funding recipient by the Commonwealth does not include an amount to cover GST. Applicants are advised to consider the likely implications of the A New Tax System (Goods and Services Tax) Act 1999 (GST Act) on the funding provided by the Commonwealth.

Where GST is payable, the Commonwealth will increase the funds payable to the funding recipient by the amount of GST that is payable for the purposes of the GST Act. For example, if the payment due at a particular milestone is \$50,000 and GST is payable on that amount, then the Commonwealth will increase the payment provided to the funding recipient to \$55,000.

### **Commencement, Tender and Completion**

Primary Care Infrastructure Grants will not be awarded in respect of a capital works project that has been contracted, commenced or completed prior to the execution of any funding agreement.

Funding recipients will assume responsibility for the proper and professional completion of the capital works project to meet local government, State and/or Territory and Commonwealth regulatory requirements.

Where the applicant is not the owner of the existing premises, the written consent of the owner to the proposed capital works project must be provided as part of the application for funding.

## **3 The Application Process**

### **3.1. Invitation to Apply (ITA)**

The ITA document package will include these Primary Care Infrastructure Grants guidelines, an application form in Word format and template funding agreements relevant for each stream of grants. The ITA document package will be available for download from the Department's website.

While each stream of funding has a maximum amount, applications will be accepted for lesser amounts.

The period in which applications will be received at the Department's Tender Box is eight (8) weeks from the date of advertisement on the Department's website at the Tenders and Grants page.

The Department will carry out a compliance check against each application. Only compliant applications will be assessed by the Application Assessment Panel.

### **3.2. Mandatory requirements**

Please note these important points:

- Applicants who wish to apply for more than one grant stream must complete a separate application for each stream i.e. generic applications across more than one funding stream will not be accepted;
- Applicants can apply for funding under more than one grant stream where each application is for a different facility, located at a different site. Where an existing facility consists of a number of buildings at the one site, only one grant can be applied for at that facility;
- Applicants for each grant stream **must** complete those parts of the application form relevant to that grant stream. The Department reserves the right to decline to assess applications which do not meet this requirement; and
- All applications will be checked for compliance with the mandatory requirements. Any application that does not comply with any or all of the mandatory requirements will not be further assessed for funding. It is the responsibility of each applicant to check that the mandatory requirements have been met.

### **3.3. Assessment Process**

Upon closure of the application period (eight weeks after the date of advertisement of the Invitation to Apply), the Department will carry out a compliance check against each application for completeness and to ensure that the mandatory requirements set out in these guidelines have been met.

Applications will be assessed by Department of Health and Ageing Application Assessment Panels. The Panels will comprise of officers of the Department of Health and Ageing.

The Application Assessment Panels may be supported by external specialist advice, for example by an independent construction adviser (to advise, among other things, on the cost effectiveness of the capital works project).

Applications will be considered and assessed in accordance with the selection criteria set out in these Guidelines and contained in the Invitation to Apply documentation.

The Application Assessment Panels will develop a relative merit list for each grant stream and provide a recommendation to the Minister for Health and Ageing.

### **3.4. Feedback**

The Department of Health and Ageing will notify unsuccessful applicants in writing (to the address nominated in the application) that their application was unsuccessful.

Unsuccessful applicants will be able to obtain feedback from the Department once all the funding agreements for all grant streams have been finalised with the successful applicants.

### **3.5. Funding Complaints Procedures**

The Department of Health and Ageing operates a Complaints Handling Process, published at:

<http://www.health.gov.au/internet/main/publishing.nsf/Content/pfps-complaintsproceduresTenders and Grants Complaints Procedures>

The Department of Health and Ageing's (DoHA) role is to achieve the Australian Government's priorities for health and ageing. In order to achieve these priorities DoHA invests a substantial amount of Commonwealth monies in programs via a range of procurement and funding activities.

In order to ensure administrative transparency the Department has a fair, equitable and non-discriminatory complaints handling procedure.

This document provides guidance to participants in a procurement or funding process as to the procedure for lodging a complaint about either of those processes.

Process for lodgement

Should an organisation or individual wish to lodge a dispute or complaint about a procurement or funding process they should do so by advising in writing the Departmental Contact Officer for that process. The complainant should provide details of the basis upon which the dispute or complaint is being lodged, including:

- a clear statement as to what the complainant considers was defective in the tendering/funding process;
- copies of, or references to, evidence of information to support the complaint; and
- a statement as to what the complainant wishes to achieve from the complaint process.

The Contact Officer or his/her manager will acknowledge receipt of the complaint in writing within 10 working days of receiving the complaint. If further correspondence or information is required, the complainant will be given no less than 15 working days to respond to any communication from DoHA unless the matter is urgent.

The Departmental Contact Officer and his or her manager will attempt to resolve the matter. The Department will advise the complainant of the decision in writing within a reasonable timeframe, which will usually be within 15 working days of receiving all written correspondence relating to a complaint.

If the complainant is not satisfied with the Department's response then the complainant may seek an independent internal Department review of the complaint.

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 also include any request for further information that may be required to conduct the review. The complainant will be given no less than 15 working days to provide any further information unless the matter is urgent.

The internal review officer will notify the complainant in writing of the decision within the timeframe specified in the original notice.

Where the complainant is not satisfied with the Department's response, they may lodge a complaint with the Commonwealth Ombudsman.



**Australian Government**

**Department of Health and Ageing**

**GP superclinics**

## **Primary Care Infrastructure Grants**

**ITA /**

### **Sample Application Form**

**[Name of Applicant]**

**[Suburb, State/Territory]**

**Closing Date: 2pm (local Canberra time)  
..... 2010**

- One single-sided original hard copy, two double-sided hard copies and one electronic version (on a CD) of the application must be lodged by hand, including by courier, to meet the Closing Date.
- The application should be addressed as follows:

**ITA /  
Tender Box  
Department of Health and Ageing  
Ground Floor, Sirius Building  
23 Furzer Street  
WODEN ACT 2606**

**Faxed and emailed applications will not be accepted.**

## Information for applicants

- 1) Before completing this Application Form, it is recommended that you read the *Primary Care Infrastructure Grants Guidelines 2010* and the Invitation to Apply (ITA) for these Grants.
- 2) The information in this document is provided as guidance only.
- 3) Applications can be made by individuals or organisations. There is no requirement to establish a new legal entity to apply for or receive Primary Care Infrastructure Grant funding. However, for the purpose of receiving and acquitting funding, where a consortium is involved, a lead organisation must be nominated as the applicant.
- 4) There are three grant streams available to existing primary care facilities providing general practice services: general practices, primary care and community health services, and Aboriginal Medical Services.

### **Stream A – Grants of up to \$150,000**

The Objectives of these grants are to:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management.

### **Stream B – Grants of up to \$300,000**

The Objectives of these grants are to:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management;

AND

3. Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional;

AND

4. Provide extended hours of service where these do not exist, for example additional services in the early morning, later in the evening or on weekends.

### **Stream C – Grants of up to \$500,000**

The Objectives of these grants are to:

1. Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements;

AND

2. Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management;

AND

3. Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional;

AND

4. Provide extended hours of service where these do not exist, for example additional services in the early morning, later in the evening or on weekends;

AND

5. Develop new, or enhance existing, clinical training facilities.

- 5) Applicants can only apply for one funding stream for each location.
- 6) Generic applications for more than one stream of grants will not be accepted.
- 7) All applicants will use this application form. The extent of additional information to be supplied by applicants for Stream B and Stream C grants is indicated in this application form.
- 8) Applicants should note that applications are made subject to the Conditions of Application as detailed at Item 7 of the ITA Statement of Requirements.
  - a. Application Assessment Panels will use the following selection criteria to assess applications:
    - o The potential of the proposal to achieve the Objectives as specified for each grant stream; and
    - o the efficient and effective use of the funds.

The factors considered by Application Assessment Panels in considering the efficient and effective use of the funds are as follows:

- o The relative merit of each application;
- o The geographic location of the applicant's existing facility and the existence of similar organisations in the area capable of achieving the same outcomes;
- o The existence or otherwise of other funding sources available to the applicant;
- o Whether the facility is accredited against relevant industry and/or training standards or is progressing towards this; and
- o Contributions by other funding sources to the project which either increase the overall value of the project without increasing the value of the funds provided by the Department under this Program; or reduce the Department's financial contribution but still achieve the same objectives.

*Ranking applications of equal merit*

Where one or more applications is found to be of equal merit, the relative merit of the applications will be determined by the Application Assessment Panel having regard to the extent to which the evidence in the application demonstrates that the existing clinic is located in an area with one or more of the following features:

- Poor access to health services;
- Poor health infrastructure and or coordination;
- Where a Primary Care Infrastructure Grant could help take pressure off the emergency department of a local hospital;
- High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
- High population growth or anticipated high population growth.

In establishing the ranking, applications which demonstrate two of these features will rank higher than applications which demonstrate one of these features, and so on.

- 10) *Insurance:* As part of the requirements of the funding agreement, all organisations and health professionals will be required to have, or be willing to obtain if successful, appropriate levels of insurance and indemnity cover for: Workers Compensation; Public Liability and Professional Indemnity. The minimum levels of insurance cover will be negotiated with the successful applicant. Certificates of currency for Workers Compensation, Public Liability and Professional Indemnity insurance currently held by applicants should be submitted with the application.
- 11) *Compliance with the terms and conditions of the Funding Agreement:* Please carefully review the terms and conditions in the sample funding agreement (provided in the Invitation to Apply) and confirm on Page 8 of this form whether or not you/your organisation can comply with those requirements and if not, why not. You are advised to seek legal advice to confirm your ability to comply with the terms and conditions of the funding agreement.
- 12) *Confidentiality provisions:* Please attach a statement to indicate whether any elements of your proposal, which may become part of any subsequent funding agreement, would be regarded as confidential, e.g. commercial in confidence. Please also provide justification for this confidentiality requirement.
- 13) *Declaration of any conflict of interest:* Please indicate on Page 8 of this form whether you/your organisation has a conflict of interest or potential conflict of interest that would exist if you/your organisation received funding under this Program. If a conflict of interest or potential conflict of interest exists, please attach a statement declaring the conflict.
- 14) Applications must be typed using 11+ font size. Box sizes in this application form are indicative only, i.e. the information provided by an applicant may take up more/less space.
- 15) Applicants are required to submit one unbound signed original, two double-sided copies and one electronic version on a CD of the application (noting that the CD ROM should not contain any additional information not already provided in hard copy).

**Mandatory requirements:**

- 16) Applicants who wish to apply for more than one grant stream must complete a separate application for each stream i.e. generic applications across more than one funding stream will not be accepted;
- 17) Applicants can apply for funding under more than one grant stream where each application is for a different facility, located at a different site. Where an existing facility consists of a number of buildings at the one site, only one grant can be applied for at that facility; and
- 18) Applicants for each grant stream **must** complete those parts of the application form relevant to that grant stream. The Department reserves the right to decline to assess applications which do not meet this requirement.

**VERIFICATION**

I verify that I have checked this application and that, to the best of my knowledge, all relevant details are correct at the time of lodgement.

..... / /2010  
(Signature of the principal officer submitting this application)

Name:

Position:

**(and, if applicable)**

I verify that I have obtained the agreement of the partners and/or co-applicants to this application and have the authority to submit this proposal on their behalf.

..... / /2010  
(Signature of the principal officer submitting this application)

Name:

Position:

**Name of applicant:**

**Registered name (if applicable):**

**Trading name (if applicable):**

**ABN:**

**Organisation Structure (e.g. individual/sole trader, partnership, not-for-profit entity, company limited by guarantee):**

**Applicant street address:**

**Applicant mailing address (if the same as street address, please indicate 'As above'):**

**Contact person for this application:**

Name:

Position:

Tel: ( )

Fax: ( )

Email address:



## Summary of Proposal

Taking into account the information provided in the Primary Care Infrastructure Grants Guidelines, provide a summary of your proposal e.g.:

- The address of the facility to be upgraded or extended;
- The proposed construction/refurbishment activities (e.g. add a room at rear of the existing facility, or connect two existing consulting rooms to make physiotherapy treatment room, or provide additional space for a student etc.);
- The estimated cost and likely timeframe for completion of the capital works project;
- The additional health professionals and/or students who will be supported by the upgrade or extension;
- The new services to be delivered and how they will meet local community health needs including extended hours of service; and
- The new or enhanced clinical training facilities to be provided.

(Limit to 1 page)

## All applicants:

Objective 1: *Upgrade or extend existing facilities to provide space for additional general practitioners, nurses and allied health professionals and/or students on clinical placements*

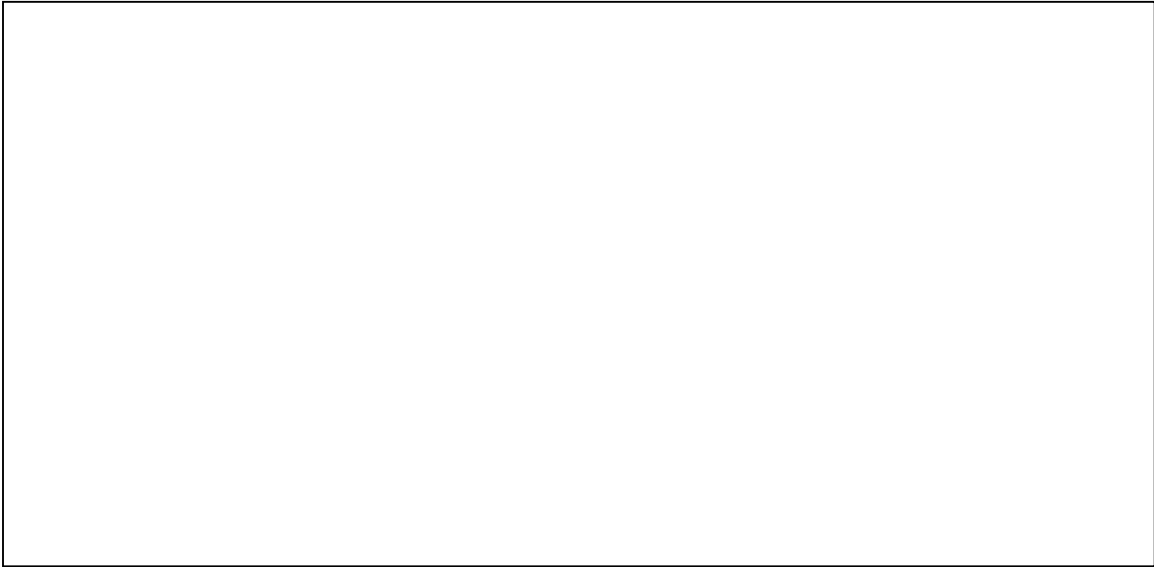
- Provide details of the capital works project including the physical location of the project; project timeframe from commencement to completion; existing and anticipated changes to local government zoning of the site; traffic flow and parking arrangements etc.

Attach:

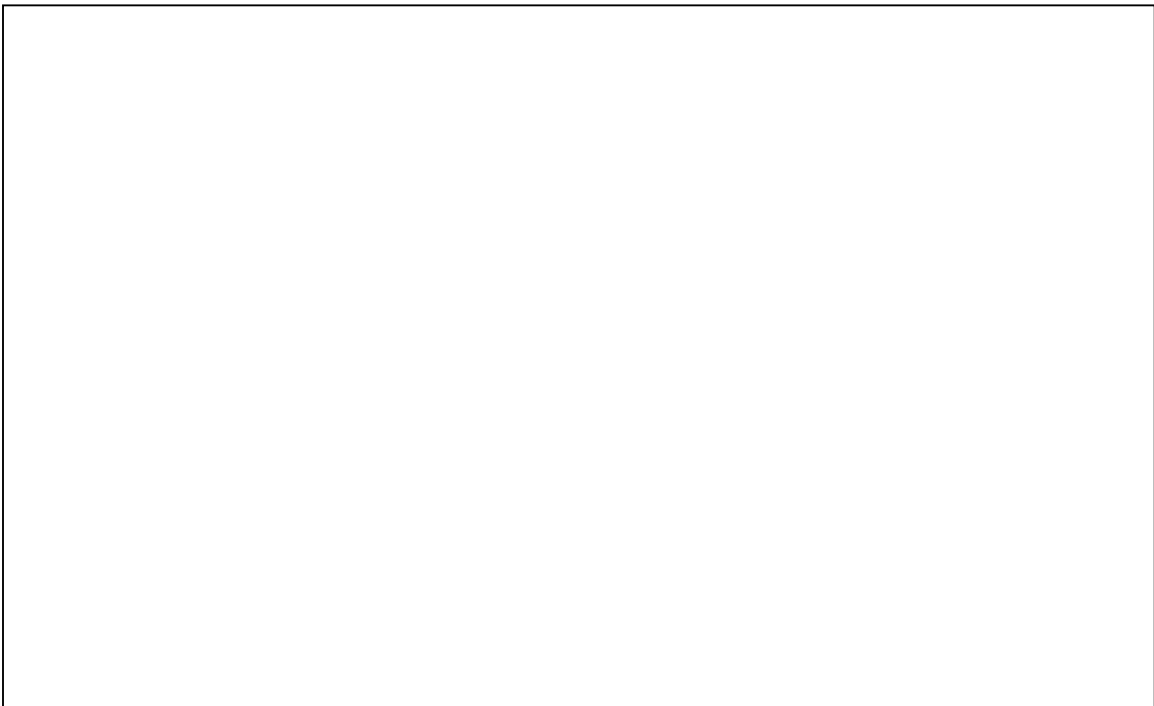
- (a) a detailed capital works budget;
- (b) basic site and floor plans of the existing and proposed premises that identify the planned use of each area; and
- (c) photographs of the existing premises.



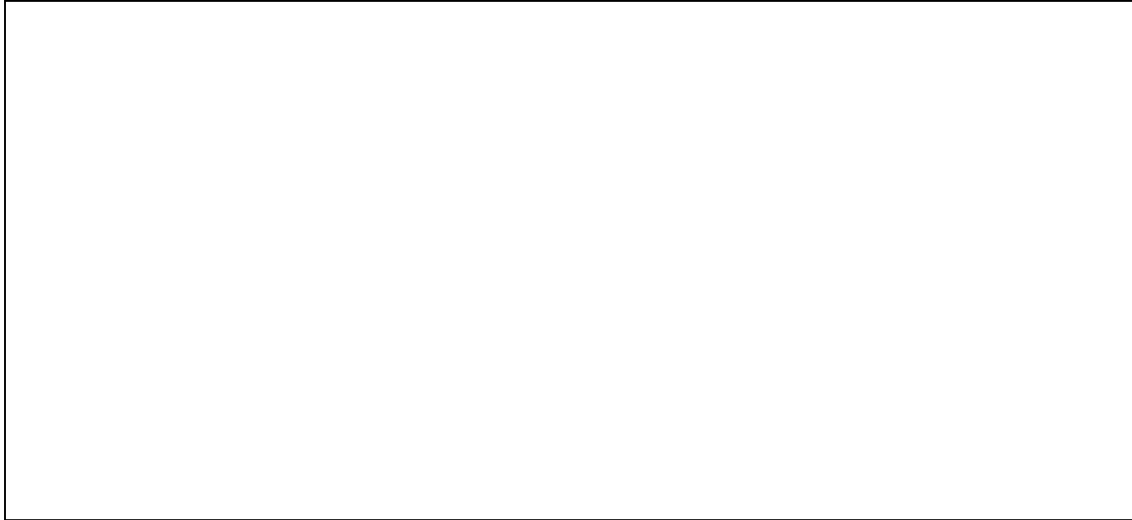
Provide details of land/building ownership and, if applicable, tenancy details (e.g. building owned by Smith White & Associates with five year lease and five year option to extend). If the premises are not owned by the applicant, attach a letter of consent from the owner to the proposed capital works project.




Provide details of any other organisation/s that has agreed in-principle to contribute either financially or in-kind to the project and any obligations attached to the contribution, e.g. commercial loan of \$120,000 from XYZ lending institution, donation of \$50,000 from XYZ community organisation, contribution of \$150,000 from XYZ university as partner.



Provide information about other previously submitted/pending and/or potential applications made for Commonwealth grants or incentives, e.g. Practice Nurse Incentives, Access to After-hours Primary Care, Innovative Clinical Teaching and Training Grants, National Rural and Remote Health Infrastructure Grants.



Provide information about any overlap that exists, or may exist, with other previous or current State/Territory or Commonwealth funded projects at your facility.



Identify key risks to the project e.g. delays in obtaining development approval; issues relating to land transfer, traffic flow, or site contamination; reliance on personal funds or bank loan to make up project budget shortfall etc. Provide advice on what activities will be undertaken to reduce or remove the identified risks.



## All applicants:

Objective 2: *Provide access to new services that meet local community health needs with a focus on preventative activities and better chronic disease management.*

Describe the primary care services and/or clinical training activities your facility currently delivers. This should include details of any industry accreditation standard(s) your facility has attained or is working towards.

Provide information about the new/expanded primary care services and/or clinical training opportunities that you propose to provide from the facility on completion of the capital works project.

- Describe the new/expanded services (eg. more of an existing service/clinic, or new services enabled by additional workforce) and how these new/expanded services respond to local health needs and priorities and/or address identified service gaps. This should include:
  - the proposed recruitment strategy;
  - such demographic and/or population health data as is available to support your service needs analysis. This could be derived from the Community Atlas available from your local government authority, primary care service data available from your local Division of General Practice, or similar sources.
  - a consideration of whether the community in which the existing facility operates has:
    - Poor access to health services;
    - Poor health infrastructure and/or coordination;
    - Is one where a Primary Care Infrastructure Grant could help take pressure off a local emergency department;
    - High levels of chronic disease and/or populations with high health needs, such as large numbers of children or the elderly; or
    - High population growth or anticipated high population growth.

- Describe the new or enhanced clinical training opportunities that you propose to provide from the facility.
  - Provide information about any discussions with Regional Training Providers, universities and/or other clinical training organisations.
  - Provide information on any relevant training accreditation your facility has attained or is working towards.

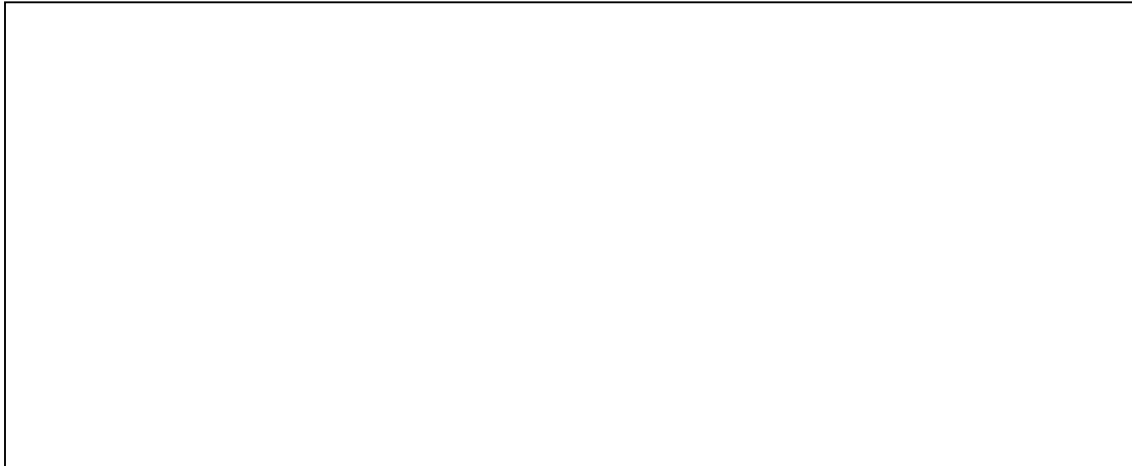
**Grant stream B and C applicants only:**

Objective 3: *Strengthen team-based approaches to the delivery of care by providing, for example, additional space for case conferencing and/or group activities such as lifestyle modification clinics and/or shared service delivery by more than one health professional.*

Describe the arrangements which will strengthen team-based approaches to the delivery of the services identified at Objective 2, above.

Objective 4: Provide extended hours of service where these do not exist, for example, additional services in the early morning, later in the evening or on weekends.

Provide information about both the current and proposed operating hours, including details of existing and/or new extended hours activities.



**Grant stream C applicants only:**

Objective 5: Develop new, or enhance existing, clinical training facilities.

- If applicable, describe existing clinical training facilities (e.g. group training room with computer terminals); and/or
- Describe the proposed new or enhanced clinical training facilities (e.g. room equipped with simulation model, space for additional students, mini-auditorium, increased consulting room space to support allied health observational learning etc).



## FINAL APPLICATION CHECKLIST

Before submitting your application, please ensure that you have:

- read and considered the Primary Care Infrastructure Grants Guidelines; and
- considered the Invitation to Apply for Primary Care Infrastructure Grants.

Please check that the following information is included in your application:

- Signed verification page
- Applicant organisation details pages
- Confirmation of compliance with requirement for GP services in the existing facility
- Confirmation on conflict of interest issues
- Level and Stream of funding
- Summary of proposal page
- You have provided details against each of the Objectives required for the grant stream for which you are applying

You have attached:

- Certificates of Currency for insurances
- Confidentiality provisions (if applicable)
- Declaration of any conflict of interest
- Capital works budget
- Site and floor plans
- Photographs of existing premises
- Land/property owner's letter of consent (if applicable)

You have provided in the application lodgement package:

- One unbound signed original
- Two double-sided copies of the application
- One electronic version of the application on a CD (noting that the CD ROM should not contain any additional information not already provided in hard copy)

**You have checked the closing time (local Canberra time) for the application.**

Applications must be delivered by hand including by courier to:

ITA No. /  
Tender Box  
Department of Health and Ageing  
Ground Floor, Sirius Building  
23 Furzer Street  
WODEN ACT 2606