



Australian Government
Department of Health and Ageing

COAG HEALTHY COMMUNITIES INITIATIVE

Local Government Area Grants Phase 1 Pilot (April 2010 – June 2011)

APPLICATION GUIDELINES

Application Submission Instructions

- Applications close at **2.00pm Eastern Standard Time on Friday 22 January 2010.**
- You must forward 4 copies (1 marked Original) **unbound** (i.e. not stapled, ring-bound, placed in folders/sleeves), including supporting documents (word format, single sided), plus an electronic copy (Microsoft word 2003 format)

By courier / hand delivery:

COAG Healthy Communities Initiative – Local Government Area Grants – Phase 1
Tender Box
No. ITA – 167/0910
Department of Health and Ageing
Ground Floor, C Block, Penrhyn House,
Bowes Street
WODEN ACT 2606

Table of Contents

SECTION A: GENERAL INFORMATION	3
Policy Context.....	3
Background	3
Council of Australian Governments (COAG) – Healthy Communities Initiative.....	3
Healthy Communities Initiative Grants	4
Who can apply?.....	4
Amount of Funding	4
Reporting and Payments	5
What will be funded?	6
What will not be funded?	7
Assessment Criteria.....	7
How will the applications be assessed?	8
Agreement.....	9
Payment Methods.....	9
How to apply	9
SECTION B: APPLICATION GUIDELINES	10
PART A: APPLICANT DETAILS	11
1. Applicant Details.....	11
2. Contact Officer Details	13
PART B: ELIGIBILITY CRITERIA.....	15
3. Population Profile	15
PART C: PROJECT OVERVIEW	17
4. Project Description.....	17
PART D: SELECTION CRITERIA	21
5. Capacity	21
6. Community Involvement	21
7. Innovation	22
8. Project Budget.....	23
9. Project Endorsement	25
10. Agreements	26
PART F: DECLARATION.....	26
11. Declaration	26
PART G: ATTACHMENTS.....	26
12. Attachment A – Details of Partnering LGAs or Organisations	26
APPLICANT CHECKLIST	27

SECTION A: GENERAL INFORMATION

The Healthy Communities Initiative (HCI) - Application Guidelines are designed to assist in completing the Healthy Communities Initiative – Application Form, and should be read in conjunction with the Healthy Communities Initiative – Program Guidelines.

Policy Context

The Council of Australian Governments (COAG) agreed to a package of reforms aimed at improving the quality and effectiveness of government services across Australia. The National Partnership Agreement on Preventive Health (the National Partnership) was funded to facilitate the reform process. The measures funded through this Agreement included provisions for the particular needs of socio-economically disadvantaged Australians. More information on the COAG National Partnerships can be found on the COAG website at http://www.coag.gov.au/intergov_agreements/federal_financial_relations/index.cfm.

The World Health Organization (WHO) has identified chronic disease as the major cause of death and disability worldwide, with the majority of the disease burden associated with largely preventable risk factors, including overweight and obesity.¹ The 2007-08 National Health Survey (NHS) conducted by the Australian Bureau of Statistics reveals that more Australian adults are overweight or obese than has been previously observed². The NHS data indicates that 61.4% of Australian adults are either overweight or obese, with 36.6% classified as being overweight, and 24.8% as obese². Modifications to dietary habits and physical activity behaviours are considered to have a significant impact in addressing overweight and obesity, and reducing chronic disease rates.

Background

Council of Australian Governments (COAG) – Healthy Communities Initiative

The Australian Government, through the National Partnership, provides funding of \$72 million over the next four years (2009-10 to 2012-13) to address the rising prevalence of lifestyle related chronic disease. This funding will support Local Government Areas (LGAs) in delivering effective community based physical activity and dietary education programs as well as developing a range of policy environments to support healthy lifestyle behaviours.

The HCI aims to help reduce the prevalence of overweight and obesity within the target populations of participating communities by maximising the number of at-risk individuals engaged in accredited physical activity and dietary education programs.

To achieve these objectives, recipients of funding through the HCI will be required to:

- increase people's awareness of the importance of physical activity and healthy eating;
- increase the availability of accredited and appropriate physical activity, dietary education and healthy lifestyle programs;
- increase participation in these community based programs for those predominately not in the paid workforce; and

¹ World Health Organisation (WHO) 'Facts related to chronic disease.'

² Australian Bureau of Statistics (ABS) 2009, 'National Health Survey: Summary of Results, 2007-2008 (Reissue)' in Australian Bureau of Statistics.

- utilise resources currently available through local government, the community and the commercial fitness, wellness and weight management sectors to facilitate the expansion of programs.

Healthy Communities Initiative Grants

Who can apply?

HCI grant funding will be available to LGAs. LGAs may apply for funding as a single LGA; as a lead LGA in a small group of LGAs with neighbouring target cohorts; or as a lead LGA partnering with a not-for-profit organisation where a pre-established arrangement exists. The lead LGA, in all instances, will be responsible for the HCI grant.

Applicants are limited to ONE application only per grant funding round. In the situation where an applicant is unsuccessful in obtaining a grant, feedback will be available upon request to assist the applicant to improve their application for resubmission during subsequent phases of the HCI.

The Commonwealth will work with each State and Territory government, and with the Australian Local Government Association (ALGA) to select LGAs to submit an application for funding in Phase 1 of the HCI. The final decision regarding the allocation of funding to successful LGAs will be made by the Australian Government, in consultation with the Project Steering Committee.

The Program Guidelines for Phase 2 and Phase 3 of the HCI will be available following an internal evaluation of Phase 1. Grant funding in Phase 2 and Phase 3 of the HCI will be awarded on a competitive basis.

Amount of Funding

The HCI will provide funding of \$270,000 GST exclusive per annum, indexed at 1.019% p.a. over the life of the HCI.

HCI grants will be awarded in three phases as follows:

Phase	Commencing	Concluding	Duration
Phase 1 - 'Pilot Phase'	April 2010	June 2011	15 months*
Phase 2	January 2011	June 2013	30 months
Phase 3	July 2011	June 2013	24 months

* Following Phase 1 of the HCI, pilot sites successfully meeting the aims and objectives of the HCI will be encouraged to apply for funding in Phase 2 of the grants process.

Phase 1 - 'Pilot Phase'

The 'Pilot Phase' (Phase 1) of the HCI will provide grant funding of \$410,130 excluding GST (\$270,000 GST exclusive p.a. indexed at 1.019% p.a.) to 12 successful LGA applicants over the 15 month period from April 2010 to June 2011.

Reporting and Payments

Payments will be made to successful applicants in line with identified milestones as follows:

Payments	Financial Year	Milestone	Payment Date	Amount (\$) (excl GST)
Payment 1	2009-2010	Execution of Funding Agreement	One month following execution of Funding Agreement	\$67,500
Payment 2	2009-2010	Project Workplan	June 2010	\$67,500
2009-10 Total				\$135,000
Payment 3	2010-2011	Status Report 1	1 Oct 2010	\$80,000
Payment 4	2010-2011	Status Report 2	17 Dec 2010	\$75,000
Payment 5	2010-2011	Status Report 3	25 Mar 2011	\$75,000
Payment 6	2010-2011	Final Report	30 June 2011	\$45,130
2010-11 Total				\$275,130
PROJECT TOTAL (excl GST):				\$410,130

LGAs will be required to provide the following documentation in line with the milestone payments identified:

- Execution of Funding Agreement
 - Two copies of the funding agreement to be signed by both the participant and the Australian Government.
- Project Workplan – to be provided in early June 2010.
 - Outline the details relating to recruitment, the consultation or planning process, the proposed activities / strategies, target audience and anticipated participation rates, delivery and support responsibilities, timelines, evaluation tools and any other relevant issues.
- Status Report 1 – to be provided by 15 September 2010.
 - Provide an update relating to the implementation of the HCI grant, highlighting any issues or challenges experienced.
- Status Report 2 – to be provided by 1 December 2010.
 - Provide an update relating to the implementation of the HCI grant, highlighting any issues or challenges experienced.
 - Outline plans for the evaluation of the project.
 - Outline the plans for continuation of the project beyond 30 June 2011 if applicable.

- Status Report 3 – to be provided by 11 March 2011
 - Provide an update relating to the implementation of the HCI grant, highlighting any issues or challenges experienced.
 - Provide an evaluation of the first year of the project.
- Final Report – to be provided by 15 June 2011.
 - Evaluation of the project against the HCI aims and objectives, including an assessment of the participant demographic, numbers and participation rates; the changes in overweight and obesity profile; and the evidence of ongoing community support and benefits.
 - A summary of the activities undertaken during the life of the grant, highlighting any issues or challenges that relate to the implementation of the HCI grant.

What will be funded?

The Australian Government **will** require participating LGAs to use funding from this grant to:

- fund a Healthy Communities Co-ordinator position / function within local government to oversee and coordinate the implementation of the HCI within the LGAs target population;

AND any combination of:

- subsidise the costs to individuals of dietary education, physical activity or healthy lifestyle programs;

AND/OR

- run or purchase community based healthy lifestyle programs;

AND/OR

- purchase or subsidise training for community members to run community based healthy lifestyle programs where this does not contradict professional or accreditation requirement of specific programs.

A smaller component of funding from this grant **may** also be used to support the following activities:

- run community events that support the aims of the HCI (for example Measure Up themed showcase of community dietary education and physical activity service providers);
- undertake community consultations with direct relevance to the HCI;
- promote the local activities being undertaken as part of the Initiative;
- support the development of local policies that encourage, promote and facilitate healthy lifestyle behaviours;
- adapt or design programs that specifically address the needs of the target population;
- undertake strategic planning for healthy lifestyles, and creating environments conducive to making healthy lifestyle choices;
- travel expenses directly associated to the delivery of the HCI;
- fund minor infrastructure investments (of up to 10% of the grant funding amount) to promote, encourage or facilitate healthy eating, physical activity or healthy lifestyle behaviours consistent with the aims of the HCI;
- fund the development and maintenance of sustainable community gardens where this is linked to initiatives to educate the community about the benefits of healthy eating; and

- purchase or subsidise equipment (not including IT) to support the roll out of the initiative.

Applicants may also apply for the alternative use of funds for innovative approaches for reducing overweight and obesity in the target cohort, but will need to demonstrate how the proposed use of funds would meet the objectives of the program in their community. Building or purchase of capital infrastructure (facilities) would not be eligible for such alternative funding.

What will not be funded?

The grant **does not** provide funding for the following activities:

- activities that have no link to the Healthy Communities Initiative;
- programs or activities currently funded through existing resources or external funding sources that have not been redesigned or expanded to meet the objectives of the HCI;
- projects already receiving funding from the Community Infrastructure Grants program;
- clinical services such as GP visits or referral visits to allied health professionals and individual diagnostic testing (blood tests and diagnostic imaging);
- on-going individualised case management;
- individuals to participate in commercial weight loss programs where the primary focus is on profitability which is not part of a broader healthy lifestyle program in the community;
- infrastructure projects greater than 10% of the grant (generally);
- the purchase or lease of land, facilities or vehicles;
- initiatives that only address food security such as the on-going provision of food that are not linked to initiatives that aim to educate the community about healthy eating;
- subsidise profits of a commercial entity;
- core organisational operating costs; and
- organisations that utilise sponsorship or support to promote food or beverage products considered to be high in sugar, salt and saturated fat, tobacco or alcohol.

This list is not exhaustive and the Department of Health and Ageing reserves the right to exclude programs, activities or services deemed to be inappropriate or counter to the aims and objectives of the HCI.

Assessment Criteria

It is the responsibility of the applicant to ensure that the application provided meets the requirements outlined for each question and section of the Application Form. Applications that do not meet the application content and format requirements; or do not satisfy a condition of participation; or do not adhere to the mandatory criteria will be automatically excluded from consideration.

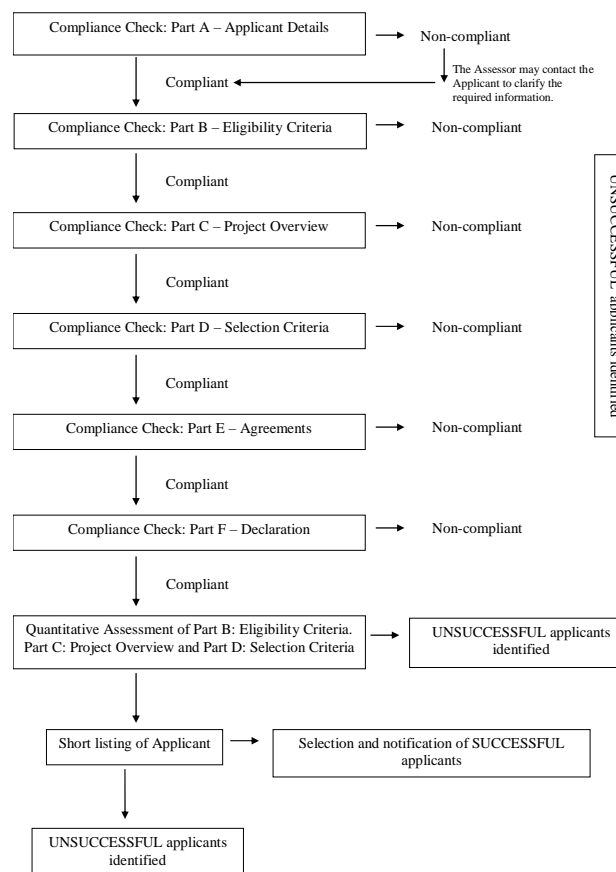
When assessing applications, the Department of Health and Ageing reserves the right to draw on information about the applicant that exists in the public domain or that has been acquired in the Department of Health and Ageing's course of business, to ascertain the capacity of the applicant to perform a contract from a commercial, financial or technical perspective. In doing so, applicants will be provided an opportunity to comment on any discoveries which may be detrimental to their application.

Assessment of HCI applications will consider equally the following criterion when assessing each section of the application:

- **Claims and Details:**
Does the applicant provide adequate accurate and reliable information to support their proposed project and its delivery.
- **Effectiveness and Efficiency:**
Does the proposed project meet the HCI grant requirements in an efficient and effective manner?
- **Capability, Capacity and Experience:**
Does the applicant demonstrate the appropriate skills, expertise and experience to deliver and/or manage each stage of the project?
- **Risk Management:**
What is the level of risk associated with each stage of the proposed project, and has an appropriate risk management plan been identified?
- **Credibility:**
Is each stage of the proposed project credible and convincing both in what it aims to achieve and how it is to be implemented?

How will the applications be assessed?

An assessment panel will be established by the Department of Health and Ageing to assess applications against the above assessment criterion and to decide on the successful applicants. The panel will consist of officers from the Department of Health and Ageing. Advice from the Project Steering Committee may be sought in the assessment process.



Agreement

Successful applicants will be required to enter into a funding agreement with the Australian Government managed through the Department of Health and Ageing. Applicants must agree to the conditions set out in the funding agreement. The draft funding agreement is available in the HCI Application Pack.

Payment Methods

Successful applicants will be required to submit an acceptable report in line with the appropriate payment milestone, in conjunction with an invoice, exclusive of GST, before funds can be forwarded.

How to apply

Applicants must complete a Healthy Communities Initiative - Application Form to be eligible to receive funding. Prior to submitting the application, applicants should ensure all necessary information has been provided by completing the Application Checklist at the end of these Guidelines.

Further assistance on the application process can be obtained by contacting COAG Healthy Communities Initiative by email at COAGHealthyCommunities@health.gov.au.

SECTION B: APPLICATION GUIDELINES

- An Application Checklist is provided at the end of this section for your convenience.
 - Your application must be completed and signed as appropriate – at Part F – Declaration, of the Application Form.
 - Complete your application by typing single-spaced in 12 point Times New Roman font in English.
 - Retain a copy of the completed application for your records.
-

LATE, INCOMPLETE or FAXED applications will NOT be accepted

If you require further assistance with your application please contact the Department of Health and Ageing by email at COAGHealthyCommunities@health.gov.au.

The following information relates to the specific sections of the Application Form, and is numbered to correspond with each section of the Application Form.

Applicants may find it useful to seek assistance from the Divisions of General Practice, your Area Health Service, or your state or territory health department in developing your responses to some sections of your application.

ALL fields in the HCI Grant Application Form are mandatory, unless otherwise stated.

PART A: APPLICANT DETAILS

1. Applicant Details

1.1. Details of the LGA signing the contract

1.1.1. Legal name

This is the name that appears on all official documents or legal papers. It may be different to your trading name.

1.1.2. Short name or trading name

Provide the short name or trading name of the LGA. This may be different to the legal name of the LGA.

1.1.3. Australian Business Number (ABN) and Incorporation Number

This is the 11-digit number assigned by the Australian Taxation Office to the LGA. If applicable include your Incorporation Number.

1.1.4. Goods and Services Tax (GST)

Indicate if the LGA is registered for Goods and Services Tax (GST).

1.1.5. LGA telephone number

Provide a general contact telephone number for the LGA.

1.1.6. LGA email address

Provide a general email address for the LGA.

1.1.7. LGA website address

Provide the website address for the LGA.

1.1.8. LGA address details

Provide the address details, including the registered office address, physical address and the mailing address for the LGA (or lead LGA).

1.1.9. Insurance

Indicate whether the LGA has the minimum level of worker's compensation and public liability insurance required. If the minimum insurance requirements have not been met, agreement to take out appropriate insurance if the funding application is successful must be recorded.

If you have answered yes to any of the questions in section 1.1.9. (a) or (b), you must provide evidence of insurance.

1.2. Location of Local Government Area (LGA)

1.2.1 Location of the applicant that is applying for the Healthy Communities Initiative grant.

Identify the location of the Local Government Area (LGA) applying for the grant by ticking the appropriate box. Please indicate the option that represents the majority of your LGA.

If you are a group of LGAs applying for the grant, then tick the type of LGA that best represents the Lead LGA of the group.

1.2.2. State or Territory

Identify the state or territory in which the LGA is located by ticking the appropriate box.

1.3. Details of partnering LGAs or Organisations (if applicable)

Only complete Section 1.3 if you intend delivering the proposed project as a group or cluster of LGAs, or in conjunction with another Organisation.

Please note that the Australian Government (Commonwealth) will only sign an agreement for this funding with the LGA nominated as the lead LGA (at Question 1.2). The 'Lead LGA' will receive the funding, and assume legal responsibility for delivering the services outlined in the Funding Agreement.

1.3.1. Number of LGAs / Organisations involved in the delivery of the grant.

If you are delivering the grant as a group of LGAs or in conjunction with an organisation, please identify how many LGAs / organisations will make up the group. The total number must include the lead LGA.

1.3.2. Provide details of partnering LGAs/Organisations.

Please complete **Attachment A – Details of partnering LGA(s)/Organisations** for each supporting LGA / Organisation, if applicable.

1.3.3. Attach letters of commitment from each of the LGAs/Organisations involved in the delivery of the grant (if applicable).

A letter of commitment must be provided for each LGA/Organisation involved in the proposed project and must include the following information:

- An overview of how the LGA/Organisation will work with the lead LGA to achieve the aims and objectives of the project.
- An outline of the relevant experience and expertise the LGA/Organisation will provide to the project.
- The roles and responsibilities the LGA/Organisation will undertake as part of the project.
- The resources the LGA/Organisation will provide to the project.

Please note a **2 page** limit applies to this letter.

2. Contact Officer Details

If the project contact details change at any stage during the project, please contact the Department of Health and Ageing by email at: COAGHealthyCommunities@health.gov.au.

2.1. Details of the Primary Contact for the project (sole LGA or lead LGA in a group)

Provide the title, name, position and contact details of the primary contact person who is responsible for the project. The Primary Contact for the project should be a member of the lead LGA if providing a joint application.

The Commonwealth may contact this person during the assessment process to seek further information or clarification regarding some aspects of the project. Thus, the nominated person should be familiar with the project proposal.

2.1.1. Title

Identify the title of the Primary Contact person for the project by ticking the appropriate box.

2.1.2. Full Name

Provide the full name of the Primary Contact person for the project.

2.1.3. Position held in LGA

Provide the official position in the LGA held by the Primary Contact person for the project.

2.1.4. Primary Contact person telephone number

Provide the telephone number for the Primary Contact person for the project (include area code).

2.1.5. Primary Contact person facsimile number

Provide the facsimile number for the Primary Contact person for the project (include area code).

2.1.6. Primary Contact person email address

Provide the email address for the Primary Contact person for the project.

2.2. Details of the Alternate Contact for the project (sole LGA or lead LGA in a group)

Provide the title, full name, position and contact details of an Alternate Contact for the project. The Alternate Contact for the project should be a member of the lead LGA if providing a joint application.

The Commonwealth may contact this person during the assessment process to seek further information or clarification regarding some aspects of the project should the Primary Contact be unavailable. Thus, the nominated person should be familiar with the project proposal.

2.2.1. Title

Identify the title of the Alternate Contact person for the project by ticking the appropriate box.

2.2.2. Full Name

Provide the full name of the Alternate Contact person for the project.

2.2.3. Position held in LGA

Provide the official position in the LGA held by the Alternate Contact person for the project.

2.2.4. Alternate Contact person telephone number

Provide the telephone number for the Alternate Contact person for the project (include area code).

2.2.5. Alternate Contact person facsimile number

Provide the facsimile number for the Alternate Contact person for the project (include area code).

2.2.6. Alternate Contact person email address

Provide the email address for the Alternate Contact person for the project.

PART B: ELIGIBILITY CRITERIA

3. Population Profile

The Australia Government's social inclusion agenda is focused toward providing opportunities for population groups experiencing multiple and concentrated disadvantage. With this in mind, the Healthy Communities Initiative will provide the opportunity to address the healthy lifestyle behaviours of disadvantaged individuals who are not currently engaged in the workforce environment and are at risk of developing chronic disease, through the development and implementation of policies, infrastructure and programs that facilitate and promote physical activity participation and healthy eating.

The targeted population may not encompass all of the individuals located within a specific region. It is possible that your project will focus on a specific group of disadvantaged individuals within the community.

3.1. Epidemiological Profile

The National Partnership Agreement on Preventive Health aims to address the rising prevalence of lifestyle related chronic disease. In particular, projects funded through the Healthy Communities Initiative will facilitate physical activity participation and the adoption of healthy eating habits to address rates of overweight and obesity and to support the establishment of healthy behaviours and lifestyles.

Information regarding the epidemiological profile of your LGA **will be provided by** either your contact within the State Health Department or your local Division(s) of General Practice*.

3.1.1. Community chronic disease rates

The information supplied by your State Health Department and/or Division(s) of General Practice will provide an indication of the incidence (the number of new cases within a given period) and/or prevalence (the number of existing cases at a given period) of chronic disease and/or chronic disease risk factors in your community.

In developing your project, you should primarily target individuals or groups displaying high rates of chronic disease associated with overweight and obesity, including Type 2 diabetes, musculo-skeletal problems, hypertension, cardiovascular disease, sleep apnoea and some cancers.

3.2. Target Population Profile

3.2.1. Define the target population for the project.

Outline what methods will be used to define the target population for the project.

The Healthy Communities Initiative will complement other elements of the National Partnership Agreement specifically those that focus on children and workers. With this in mind, your project should specifically target those individuals who are not currently engaged in the paid workforce and are not children.

Outline how you will ensure that your project provides opportunities for individuals not in the paid workforce and who are at high risk of developing chronic disease to participate. It is acceptable for

* The Australian Government will work with LGAs to identify suitable contacts within the State Health Department and/or Division(s) of General Practice as required.

your project to specifically target a sub-population group (e.g. pensioners, stay-at-home parents or individuals actively seeking employment), provided the individuals identified align with the HCI participant profile. If applicable, describe the targeted sub-population group, and explain how you would target this group.

You may wish to include an outline of the socio-economic status of your projects target population. Consider the Socioeconomic Index for Australia (SEIFA index) when defining your target population, and if necessary demonstrate that there is a pocket of need within the community.

3.2.2. Recruitment of target population

Provide a rationale for how your target population will be recruited.

3.2.3. Identification of individuals who are NOT currently in the paid workforce

Outline how individuals or groups not currently in the paid workforce will be identified for participation in the project.

3.2.4. Identification and targeting of low income and/or high levels of income support individuals.

Outline how individuals or groups of low income and/or high income support will be identified for participation in the project.

3.2.5. Approximate size of your target population and the anticipated participant numbers.

Provide an outline of the approximate size of the target population within your LGA.

Identify the approximate number of identified individuals from the target population that will participate in your project. You should also outline the mechanisms that will be used to encourage and facilitate on-going participation by identified individuals.

PART C: PROJECT OVERVIEW

4. Project Description

You should consider the eligibility requirements, selection criteria and the aims and objectives of the Healthy Communities Initiative when completing the Project Overview section of your application.

4.1. Project Summary

4.1.1. Name of the proposed project.

Provide the name of the proposed project.

Please note a **25 word** limit applies to this section of your application.

4.1.2. Summary of the proposed project.

Your summary should cover who the project is targeting, what the major aim and objective of the project is, and an outline of the key activities and/or services of the project.

Please note a **100 word** limit applies to this section of your application.

4.1.3. Identify the target population group(s) for participation in your project.

Identify the population group(s) that will be targeted for participation in your project. You may tick more than one box, and use the “Other” option to describe a group if it is not listed.

4.2. Project Activities

The proposed project must address the levels of overweight and obesity within the community by providing opportunities for at-risk individuals to participate in physical activity and/or healthy eating activities and/or services.

4.2.1. Provide a clear outline of your project.

Please note a **1,500 word** limit applies to this section of your application.

Provide a clear outline of your project using the following headings:

- Scope of the project

Describe:

- the purpose of the project;
- the project background. Is your project a new project, or are you seeking funding to expand an existing project? If you are seeking funding for an existing project, you must demonstrate how the project will be enhanced or taken in a new direction; and
- the administrative/management structure and process for the project. If you plan on establishing a committee (e.g. a community advisory committee, a project steering committee etc) detail the composition, role and involvement of the committee in the project.

- Aims and Objectives of the project

Outline:

- how the project will contribute to the promotion of physical activity participation and healthy eating;
- how the project will increase the availability and accessibility of appropriate healthy lifestyle programs;
- how the project will target community members who are not in the workforce; and
- how currently available resources will be utilised. If your proposed project is an extension of an existing project or one component of a larger project, provide details of the existing/overall project and explain how your proposed projects will contribute.

- Geographic appropriateness

Identify the location(s) where the project activities will be conducted. Consider the suitability of the location for the types of activities being conducted and the accessibility of the location to community members. In particular, you should consider the proximity of the location to other services (e.g. shopping centres, community facilities, public toilets) and the availability of public transport.

- Population target and size

Provide a description of the population who will benefit from participation in the project activities, including the anticipated number of participants.

- Activities and/or services provided

Provide an explanation of:

- the activities and/or services that will be offered in order to meet the aims and objectives of the proposed project and the HCI;
- who will be responsible for the activities and/or services proposed; and
- any material produced for distribution (e.g. fliers, reports, CDs). As required, provide an outline of what will be produced, the purpose of the material produced and how it will be distributed.

4.2.2. Activities and/or Services

Describe how the specific project activities and/or services outlined previously will contribute to each of the following five (5) activity categories.

The activity categories are as follows:

- i. Healthy Communities Coordinator
- ii. Service delivery / subsidy
- iii. Training and community capacity building
- iv. Supportive policy environments
- v. Information sharing and awareness raising

Please note a **1,000 word** limit applies to this section of your application.

4.2.3. Venues and Service Providers

Provide an outline of the proposed venues that will be utilised in the delivery of your project. Your response should address the accessibility and availability of venues, including the proximity of the venues to public services (e.g. transport and public amenities) and events.

In addition, a brief description of proposed service providers, including their relevant experience and qualifications, should be provided.

4.3. Project Plan

4.3.1. Overall project plan

The Overall Project Plan should provide a summary of the *broader requirements* and *significant milestones* of the project. This section of the Application Form is **not** intended to be a detailed plan for each of the activities and/or services to be conducted – refer to Question 4.3.2 to provide a detailed timeline of the specific activities and/or services of the project.

You may wish to consider the following, in conjunction with any other relevant items:

- Administrative requirements (e.g. set-up)
- Human resources (e.g. staff recruitment)
- Activity / Service delivery
- Existing complementary events
- Measurement and Reporting
- Evaluation

4.3.2. 6 Monthly Timelines

Using the templates provided, outline the specific timeline requirements for the delivery of the activities and/or services relevant to your project.

Ensure the following information is provided:

- administrative activities;
- the project activity/service;
- the program area addressed by the activity/service;
- the start date for the activity/service;
- the finish date for the activity/service;
- the LGA, individual or organisation who is responsible for the activity/service; and
- additional LGAs, individuals or organisations who will contribute to the activity/service.

If a particular activity / service does not have a defined Start / End date, but is relevant to the entire duration of the project or is recurring throughout the project, please indicate this using the following terms:

- Ongoing - indicates that the activity/service is relevant throughout the duration of the project.
- Periodic - indicates that the activity/service is recurring throughout the project – please specify the frequency that the activity/service will occur.

4.4. Program Sustainment

Provide details of initiatives that will be developed to facilitate the long-term sustainment of the proposed project beyond the term of the funding provided by the Healthy Communities Initiative.

4.4.1. Facilitation of long-term sustainment

Applicants should provide details relating to the following:

- The development of partnerships with existing organisations and/or individuals within the community.
- The incorporation of a training element to ensure that appropriate skills and expertise will be available within the community to ensure the ongoing delivery of the project beyond the term of the Agreement.
- The support and/or establishment of community events that encourage involvement and participation by a wider sector of the community than the target population of the project.
- Potential cost recovery elements of the project.

Please note a **1,000 word** limit applies to this section of your application.

4.5. Program Evaluation

In this section you will be required to provide details of how the proposed project will be monitored and evaluated throughout the duration of the Agreement.

Monitoring and evaluation of the project will be required to:

- determine if the project activities and/or services implemented are achieving the desired outcomes;
- facilitate ongoing program modifications to ensure the overall success of the project;
- allow for transparency and accountability to stakeholders, including any funding bodies;
- allow for future planning;
- contribute to an evidence base that may assist to guide future program development and implementation; and
- enable links to be established with the monitoring and evaluation of other HCI grant projects.

4.5.1. Monitoring and Evaluation

You will need to identify the primary aims and objectives of the project (as outlined in question 4.2.1.) that will be assessed and outline how each of these will be monitored and evaluated.

Identify project goals for the short, medium and long-term. These goals should represent the key milestones of the project and will provide opportunities for your ongoing monitoring and evaluation.

You are required to outline an appropriate monitoring and evaluation plan for the project overall. Your monitoring and evaluation plan must be accounted for within your project budget.

Indicate the following in your evaluation plan:

- who will oversee the evaluation process
- who will be involved in the monitoring and evaluation of the project
- will the evaluation be conducted internally, or will an external evaluator be engaged. If engaging an external evaluator, please provide details.

Please note a **1,500 word** limit applies to this section of your application.

PART D: SELECTION CRITERIA

5. Capacity

5.1. Data Collection and Monitoring

5.1.1. Collection of baseline data and contribution to evidence base.

Applicants should provide information detailing any relevant experience in the collection of baseline data relating to epidemiological profile and community needs analysis, especially where it is associated with overweight and obesity.

5.2. Administrative Functions

Applicants should detail the administrative support required for the successful delivery and management of the project and outline how this will be implemented.

5.3. Relevant project implementation and management experience

Applicants must demonstrate their relevant experience, capacity and expertise to deliver and manage the proposed project.

Provide details of relevant previous or current projects that the LGA (or group of LGAs) have delivered and/or managed that will complement and/or support the implementation and management of the proposed project.

Outline any existing policies, infrastructure or resources that may assist to deliver the proposed project.

Explain who will be responsible for the overall management of the project and describe their experience in managing similar projects. In particular, provide details relating to the management of projects that promote physical activity and/or healthy eating.

Your response should make reference to experience in the planning, administration, delivery and management of physical activity and/or healthy eating programs in the community (if applicable).

Please note a **1,000 word** limit applies to this section of your application.

6. Community Involvement

6.1. Community benefits and support

Applicants should provide an explanation regarding how the proposed project will benefit the community. You should provide an outline of the local context for delivery of the project, including how it will benefit participants and the overall community. In particular, you should provide evidence that the project is unique to the LGA and not a duplicate or replication of existing programs.

Community consultations with local stakeholders and potential participants may assist with creating acceptance and developing support within the community for the delivery of the project.

6.2. Partnerships

Applicants should describe any arrangements that currently exist or that will be developed within the community that will contribute to the successful implementation of the proposed project. In addition, existing relevant links with Australian Government, state governments, non-government organisations, Division(s) of General Practice and private industry should be described, outlining their role within the proposed project.

Community partnerships should contribute to the proposed project and may facilitate the ongoing nature of the project beyond the scope of the Healthy Communities Initiative. Identify local service providers and/or stakeholders who will contribute to the project, describing their contribution and their relationship with the LGA (if applicable).

Please note a **750 word** limit applies to this section of your application.

6.3. Community Leadership

Applicants may wish to identify more than one community leader to be involved with the proposed project. Ensure the details of each of the identified leaders and their intended role within the project are clearly outlined in your response.

It is anticipated that the community leader(s) will be a significant member of the community who will make a positive contribution to the overall delivery and outcomes of the proposed project. You may wish to consider the local Mayor, a significant sporting figure, a local GP or a community health nurse.

Letters of commitment from the identified community leader(s) must include the following information:

- A commitment to support and promote the objectives of the project within the community.
- An overview of the roles and responsibilities of the community leader in the proposed project.
- An outline of the relevant experience and expertise of the community leader.

Please note a **750 word** limit applies to this section of your application.

7. Innovation

7.1. Innovation

In the event that you elect to create a new program, as opposed to accessing currently available accredited programs, you will need to provide supportive evidence that the activities and/or services you intend to implement will deliver the aims and objectives of the HCI. An explanation of the reasoning and concepts behind your proposed project activities and/or services will be required in this circumstance.

Where applicable you may wish to consider the following options to provide supportive evidence for your project:

- Successful examples of similar projects
- Project evaluations
- Scientific literature
- Statistics and reports (e.g. Australian Bureau of Statistics, Australian Institute of Health and Welfare)
- Relevant information from health care professionals or industry

Please note a **500 word** limit applies to this section of your application.

8. Project Budget

Applicants must provide a project budget, detailing how the funding provided through the Healthy Communities Initiative will be spent and outlining how any additional funding (if relevant) will be utilised in the proposed project.

8.1. Funding Source

8.1.1. Funding source(s)

Indicate, by ticking the appropriate box, the funding source(s) that best represents that which will be utilised by your proposed project.

8.1.2. Additional funding and/or in-kind support

Applicants should clearly outline the amount and source of any additional funding that will be used to complement the funding provided by the Australian Government through the Healthy Communities Initiative.

Your response should address the following:

- Details of the source of the additional funding.
- The amount of additional funding provided by each of the sources identified.
- Details of in-kind support that will be utilised.

Additional funds and/or in-kind support may be sourced as follows:

- Applicant contribution
- Partner contribution

Please note a **500 word** limit applies to this section of your application.

8.2. Project Budget details

Applicants should use the tables provided to detail a breakdown of the estimated budget for the proposed project.

The application assessment process will take into account the effective and efficient spending of funds in your project. Applicants should consider this when responding to the budget related questions.

Your budget should outline the contribution to be made by the LGA applicants and any contributions from partner organisations, combined with the funding provided through the Healthy Communities Initiative grant.

The project budget is expected to allocate the total amount of the funding provided through the Healthy Communities Initiative grant (i.e. \$410,130 excl GST) in an effective and efficient manner. This funding will be provided in line with identified milestones across the duration of the project period (April 2010 – June 2011). With this in mind, you will need to ensure that sufficient resources are available to cover each phase of the project, including the final phase of the project, as the final payment will only be made upon completion of the final milestone. (Note: Details of the milestones and payment schedule will be outlined in the Funding Agreement should you be successful in your application).

If your project requires additional items not listed in the tables that will need funding, provide a description of the item and identify the amount of funding in the blank rows available.

You will need to provide separate line items for individual staff, including the position title (e.g. project manager, administrative assistant) and the Full Time Equivalent (FTE). Identify how much funding is required for each staff member and the source of the funding.

Full Time Equivalent

A Full Time Equivalent (FTE) of 1.0 is equal to one full time staff member (e.g. work five full days per week). Each full day per week equals 0.2 FTE, while a half day equals 0.1 FTE.

Example:

- i. Staff member who works 3 full days per week = 0.6 FTE
- ii. Staff member who works 4 half days per week = 0.4 FTE
- iii. An existing full time staff member who works on other projects, but spends a quarter of their time on this project = 0.25 FTE

8.2.1. Overall budget estimate

Applicants should use the table provided to detail a breakdown of the estimated overall budget for the proposed project.

Applicants should consider the following items when developing their budget:

- Staff Costs
 - Staff salaries / wages (*Title and FTE*)
 - Superannuation
 - Salaries on-costs
 - External advisors (consultants, presenters)
- Administration / Overheads Costs:
 - Office related items
 - Computer
 - Printer
 - Rent
 - Electricity
 - Telephone
 - Internet
 - Office stationary and supplies
 - Postage
 - Insurance
 - Travel
 - Accounting and auditing
 - Training
- Program Delivery Costs
 - Marketing (advertisements, newsletters, mailouts)
 - Printing (posters, brochures, programs)
 - Venue hire
 - Meeting expenses
 - Program equipment
 - Program running costs (instructors, guest speakers, catering, volunteer costs, transport)
 - Minor capital works
 - External service providers
- Project Evaluation

8.3. Project Budget Explanation

8.3.1. Breakdown of budget items.

Applicants should provide a detailed explanation to justify the overall spending for the proposed project.

In particular, an explanation regarding the distribution of expenditure across the **term of the project** should be addressed. This may incorporate an outline of the attribution of funding as it correlates to the stages of development and delivery of the project.

Please note a **1,000 word** limit applies to this section of your application.

9. Project Endorsement

Provide endorsement of the proposed project from relevant state / territory health department and Division(s) of General Practice.

9.1. Endorsement of relevant state / territory health department

9.1.1. Provide a letter of endorsement from the relevant state / territory health department.

The letter should provide information indicating the **need** within the LGA for your proposed project (refer to 3.1. Epidemiological Profile) and should outline support relating to the ability of the LGA to conduct the proposed project as appropriate.

The letter may include examples of any successful community based programs previously conducted by the LGA, especially where they relate to the implementation of physical activity and dietary education programs. Comments should highlight the strengths of the LGA in conducting projects of this nature.

An outline of the potential linkages with existing programs should also be provided where relevant.

9.2. Endorsement of Division(s) of General Practice

9.2.1. Provide letter(s) of endorsement from the Division(s) of General Practice

The letter should provide information indicating the **need** within the LGA for your proposed project (refer to 3.1. Epidemiological Profile). In the letter, the Division of General Practice should provide support relating to the need for an intervention focusing on the identified target group and also acknowledge the appropriateness of the activities and/or services selected by the LGA.

PART E: AGREEMENTS

10. Agreements

You must indicate your agreement to the six statements by ticking the relevant box. The Agreement must be signed and dated by an authorised representative of the lead LGA that is specified at question 1.1.

PART F: DECLARATION

11. Declaration

The application must be signed by an authorised representative of the lead LGA that is specified at question 1.1. The person who signs the application must be authorised to give assurance and enter into contract and commitments on behalf of the lead LGA.

PART G: ATTACHMENTS

12. Attachment A – Details of Partnering LGAs or Organisations

Complete the details of each partnering LGA that will be participating in the proposed project.

APPLICANT CHECKLIST

	Yes	No	N/A
Have you completed ALL of the mandatory fields in the Application Form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have the minimum levels of insurance required for the project? If Yes, you will need to provide evidence of your insurance. If No, note that you will need to take out minimum levels of insurance if your application is successful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you included letters of support from your State/Territory health department and Division(s) of General Practice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you provided letters of commitment from each of the partnering LGAs or Organisations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If your project will be delivered by a group of LGAs or in conjunction with an Organisation, have you completed a separate version of <i>Attachment A – details of partner LGAs or Organisations</i> for each partnering applicant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you completed and signed the Agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you completed and signed the Declaration?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>