



**Australian Government**

**Department of Health and Ageing**

**NATIONAL PARTNERSHIP AGREEMENT ON  
PREVENTIVE HEALTH**

**HEALTHY COMMUNITIES INITIATIVE  
Local Government Area Grants**

**Phase 2 (April 2011 – June 2013)**

**APPLICANT GUIDE**

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## **PART A: GENERAL INFORMATION**

These Guidelines are designed to assist in completing the Healthy Communities LGA Grants Phase 2 Application Form and should be read in conjunction with the associated 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 at <http://www.coag.gov.au>.

The World Health Organization (WHO)<sup>1</sup> 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. The 2007-08 National Health Survey (NHS)<sup>2</sup> conducted by the Australian Bureau of Statistics reveals that more Australian adults are overweight or obese than has been previously observed. 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 obese. 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***

The Australian Government, through the National Partnership, provides funding of \$71.8 million over four years (2009-10 to 2012-13) to the Healthy Communities Initiative 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 healthy eating programs as well as developing a range of policy environments to support healthy lifestyle behaviours.

The initiative 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 healthy eating programs.

To achieve these objectives, recipients of funding through the initiative 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
- 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 will be rolled out over three phases: the Pilot Phase (April 2010 – June 2011), Phase 2 (April 2011 – June 2013); and Phase 3 (October 2011 – June 2013).

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<sup>1</sup> World Health Organisation (WHO) 'Facts related to chronic disease.'

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

## ***Healthy Communities LGA Grants***

### **Who can apply?**

Only LGAs (defined as local government bodies, either individually, as a member of a consortium or as a member of an established regional organisation of councils) can apply for funding under Healthy Communities.

All LGAs are eligible to apply for a grant under Phase 2, with the exception of those LGAs already funded under the Pilot Phase. 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 Healthy Communities 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 initiative.

Applicants that were unsuccessful in the Pilot Phase may reapply for Phase 2. Applicants unsuccessful in Phase 2 may reapply during Phase 3. Multiple applications are not permitted.

### **Funding and Grant Distribution**

Total funding of \$703,607 (GST exclusive) will be made available to successful LGAs over a period of 27 months (April 2011 – June 2013). This is based on a base rate of \$275,130 (GST exclusive) per annum indexed at 1.019% p.a.

The provisions of the Australian Taxation Office's GST Ruling GSTR 2006/11 Goods and services tax: Appropriations ("GSTR 2006/11") enable such payments to be treated as outside of the scope of GST. Therefore, GST is not payable on these grants.

Applications will be assessed on a state / territory by state / territory basis. Grants for Phase 2 will be distributed proportionally across the jurisdictions up to as follows:

New South Wales	8 grants
Victoria	7 grants
Queensland	7 grants
Western Australia	4 grants
South Australia	4 grants
Northern Territory	2 grants
Tasmania	1 grant
Australian Capital Territory	nil (sole LGA already funded in the pilot phase)
<i>TOTAL</i>	<i>33 grants</i>

If an insufficient number of applications of an adequate quality are received from within a state or territory, grants may be re-allocated to other jurisdictions where demand and application quality exceed expectations.

### **Selection Criteria**

Funding will be provided on a competitive basis. Applicants are required to provide information relating to their proposed approach in implementing the grant, their capacity to successfully implement the grant, and how this proposed approach will link with existing national policies and priorities and other Healthy Communities components.

In assessing grant applications, consideration will be given to:

- population Demographics;
- program Design;
- utilisation of National Programs;
- capacity, synergies and leadership;
- commitment to related policy; and
- the delivery of quality program.

Details for each of these assessment criteria are outlined in the Healthy Communities Initiative Phase 2 Program Guidelines.

### **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 (the Department) reserves the right to draw on information about the applicant that exists in the public domain or that has been acquired in the Department'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 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 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?**

The Healthy Communities Initiative – Application Assessment Criteria is an internal Department document. All Healthy Communities applicants must be assessed against the Application Assessment Criteria as outlined in this document. This criteria is intended to ensure that the assessment process is fair, consistent and equitable to all applicants.

Phases 2 and 3 of the Healthy Communities LGA Grants will be assessed on state-by-state basis. Three Assessment Panels will be convened to assess applications as follows:

Panel A: Queensland and Victoria

Panel B: South Australia and Western Australia

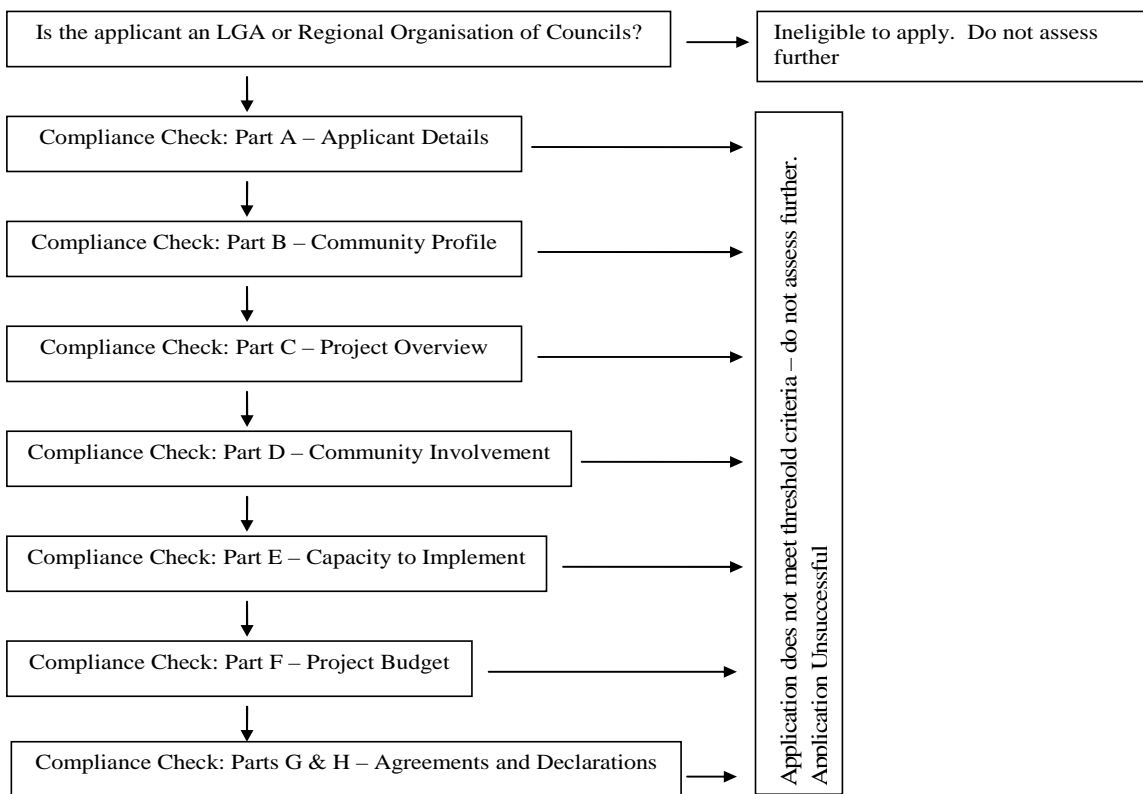
Panel C: New South Wales, Northern Territory and Tasmania

Each Assessment Panel will be composed of Australian Public Service personnel, and will consist of a Panel Chair, two voting members, a non-voting independent departmental probity advisor and a non-voting Secretariat. The Chair of the Assessment Panel is to refer to the Delegate for resolution of any substantial circumstance or issue, including any current, prior or proposed association with prospective Applicants, which could possibly be construed as having the potential to influence the even-handedness of the Assessment Panel’s deliberations.

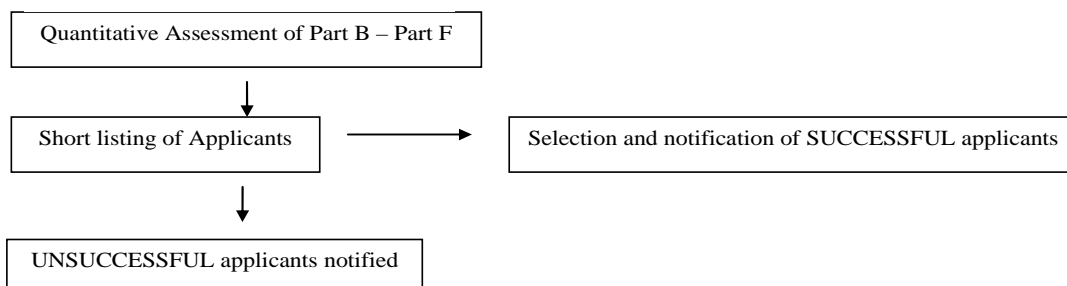
Following the state-by-state assessment the three Panel Chairs will meet with Director, National Partnership Section to moderate the assessments and scores and develop the final recommendations for funding.

The assessment will follow the process set out below:

**THRESHOLD CRITERIA**



**SELECTION CRITERIA**



The Department will make the final decision on which LGAs will receive funding through Phases 2 and 3 of Healthy Communities. The Department will convene an assessment panel of people with the required skills and experience. The panel may include independent expert(s) and will draw on expertise available to it where necessary.

All applicants will be notified of the outcome of the assessment process in writing.

### **How to apply**

Applicants must complete a Healthy Communities Initiative LGA Grants – Phase 2 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.

Do not exceed the stated maximum word limits. Note that these are an upper limit only – if you provide all the necessary information using fewer words you will not be penalised. However, you will be penalised for any question in which you exceed the word limit. Check you have not exceeded the word limit by highlighting the text for each question and running a *word count*.

Applications close at **2.00pm Canberra local time on Friday 4 February 2011**

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 or hand delivery to:

Healthy Communities Initiative Local Government Area Grants (Phase 2)  
ITA 168/1011  
Tender Box  
Department of Health and Ageing  
Sirius Building  
Foyer, Ground Floor  
23 Furzer Street  
Woden ACT 2606

Further assistance on the application process can be obtained by contacting COAG Healthy Communities Initiative by email at [COAGHealthyCommunities@health.gov.au](mailto:COAGHealthyCommunities@health.gov.au).

## **PART B: APPLICATION GUIDELINES**

The following sections are provided to assist with completing the *Healthy Communities initiative LGA Grants - Phase 2 Application Form*. Please note that:

- 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.
- ALL fields in the Grant Application Form are mandatory, unless otherwise stated. Applications not answering each applicable question will be considered non-compliant and will not be further assessed.
- **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](mailto:COAGHealthyCommunities@health.gov.au) or telephone (02) 6289 4381.

## ***SECTION A: APPLICANT DETAILS***

### **1. Details of the LGA signing the contract**

#### **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.

#### **1.2 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.

#### **1.3 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.

#### **1.4 LGA telephone number**

Provide a general contact telephone number for the LGA.

#### **1.5 LGA address details**

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

#### **1.6 LGA email address**

Provide a general email address for the LGA.

#### **1.7 LGA website address**

Provide the website address for the LGA.

#### **1.8 Insurance**

Indicate whether the LGA has the minimum level of worker's compensation, public liability and professional indemnity 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 1.9, you must provide evidence of insurance as an attachment to your application.

#### **1.9 Application Model**

Indicate whether the application is being submitted by a single LGA, a lead LGA partnering with a small group of neighbouring LGAs, or a pre-established arrangement between either a single LGA or a lead LGA that is partnering with a small group of neighbouring LGAs and a not-for-profit organisation.

If you are delivering the grant as a group of LGAs or in conjunction with a not-for-profit organisation, please identify how many LGAs / organisations will make up the group. The total number must include the lead LGA.

If your application model consists of more than a single LGA you must complete the form at Attachment A for each partnering body.

Please note that the Australian Government (Commonwealth) will only sign an agreement for Healthy Communities funding with the LGA nominated as the lead LGA (at Question 1.1). The lead LGA will receive the funding and assume legal responsibility for delivering the services outlined in the Funding Agreement.

### **1.10 Details of the Primary Contact for the project**

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

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

### **1.11 Details of the Secondary Contact for the project**

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

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. Therefore, the nominated person should be familiar with the project proposal.

*N.B. 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](mailto:COAGHealthyCommunities@health.gov.au).*

## ***SECTION B: COMMUNITY PROFILE***

### **2. Local Government Area (LGA) Characteristics**

This section relates to the whole population within your LGA or group of LGAs.

#### **2.1 Location of LGA that is applying for the Healthy Communities LGA Grant.**

Identify the location of the 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.

#### **2.2 Provide a brief description of the key demographic characteristics of your LGA's population. (300 word limit)**

Outline your community's distribution in terms of age and gender. Indicate any significant sub populations such as migrant groups, retirees, university students or young families as well as the proportion of Aboriginal and Torres Strait Islander persons in your community if applicable.

#### **2.3 Identify the chronic diseases that affect your community, with specific reference to the chronic diseases that are associated with overweight and obesity. (300 word limit)**

Detailed information regarding chronic disease within your region may be sought from either your State Health Department or your local Division(s) of General Practice. Alternatively, doctors within your community, your local hospital or other health professionals may be able to provide you with a "picture" of chronic disease within 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.

#### **2.4 Describe the levels of obesity and overweight within your community. (300 word limit)**

Outline the levels of both obesity and overweight within your LGA(s). Detailed information regarding levels of obesity and overweight within your region may be sought from either your State Health Department or your local Division(s) of General Practice. Alternatively, doctors within your community, your local hospital or other health professionals may be able to provide you with a "picture" of overweight and obesity within your community.

#### **2.5 Provide a brief description of the prevalence of socio-economic disadvantage within your community. (300 word limit)**

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.

Provide an outline of the prevalence of socio-economic disadvantage within your community, with specific reference to your LGA's Socioeconomic Index for Australia (SEIFA), unemployment rates and levels of educational attainment. You may also wish to indicate where there are particular pockets of need within the community.

**2.6 Provide a map of your LGA (or group of LGAs) showing the geographic location of socio-economically disadvantaged areas.**

Include a map which indicates the geographic boundary of the LGA(s) and the areas within your LGA(s) that are socio-economically disadvantaged. Your map should be included as an attachment to your application.

## ***SECTION C: PROJECT OVERVIEW***

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.

### **3. Project Description**

#### **3.1 Name of the proposed project (25 word limit)**

Provide the name of the proposed project. You may develop your own project name that is unique to your LGA.

#### **3.2 Aims and objectives of the project. (100 word limit)**

Outline the aims and objectives of your project. That is, what you hope to broadly achieve through your project. This section may include reference to:

- 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; or
- how the project will contribute to the capacity of the LGA to support healthy lifestyles within the community.

#### **3.3 Summary of the proposed project. (200 word limit)**

Your project summary should cover who the project is targeting, an outline of the key activities and/or services of the project 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 activities will contribute.

### **4. Target Population**

#### **4.1 Identify the target population group(s) for participation in your project (tick all that are applicable).**

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

In selecting 'Other' groups, keep in mind that the Healthy Communities initiative will complement other elements of the National Partnership Agreement specifically those that focus on children and workers. Therefore, your project should not specifically target those individuals who are currently engaged in the paid workforce or children.

#### **4.2 Outline the approximate size of your target population and the anticipated number of participants that your project will engage. (200 word limit)**

Outline the approximate size of the target population within your LGA and identify the approximate number of individuals from the target population that you expect to engage through your project. You may also indicate the approximate number of individuals you expect to engage from the wider community.

## **5. Project Outputs**

### **5.1 Identify the healthy living activities and/or services that you will produce or deliver as part of your project. (1,000 word limit)**

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.

Outline the healthy living activities and services you will provide. These are activities that will actively engage members of the target population in physical activity and healthy eating behaviour, such as outdoor exercise sessions or cooking classes that provide advice about purchasing and preparing healthy and nutritious meals.

In answering this question, you do not need to include information that you have provided in the remaining questions of this item.

### **5.2 Identify the National Program Grants that your LGA intends to utilise. If you do not intend to engage with any of the National Program Grants, please justify this decision.**

National Program Grants have been provided to six not-for-profit organisations to expand their healthy lifestyle programs across Australia. The aim of the National Program Grants is to ensure these programs are available nationally, including to a majority of the Local Government Areas participating in the initiative. Details of the National Program Grants are available at [www.healthyactive.gov.au](http://www.healthyactive.gov.au) and at Attachment C of the Healthy Communities Initiative Phase 2 Program Guidelines.

LGAs are strongly encouraged to engage with the National Programs. Outline which National Programs your project intends to utilise and why.

If you do not intend to utilise any of the National Programs, you must justify this decision.

### **5.3 Identify the education and training services you will provide/purchase to increase your community's capacity to engage in healthy lifestyle behaviour. (300 word limit)**

Providing education and training opportunities to community members will enable the community to continue to engage in healthy behaviour beyond the life of the project.

Outline the education and training services that your project will provide to community members to increase your community's capacity to engage in healthy lifestyle behaviour.

Examples may include providing training to community members to become mentors so that they can assist people in the community to make lifestyle changes, or providing training in running physical activity classes.

### **5.4 How will you promote your project and raise awareness of the importance of healthy living? (300 word limit)**

Outline communications and marketing strategies that will be employed to promote your project's activities and the strategies that will be used to increase the community's awareness of the importance of healthy living.

This may include activities such as using existing community events to distribute pamphlets and promotional material about the project, media campaigns, or utilising existing services as a way to promote the project to the target group.

**5.5 Identify the project activities that will contribute to building a policy environment that supports healthy living in the community. (200 word limit)**

LGAs will be required to undertake a policy review to ensure their policy environment supports and promotes healthy living.

Indicate how your LGA will undertake a review as well as any new policies that may be developed or additional policy-based activity that may be undertaken.

**5.6 Identify existing local, state-based or national healthy living activities or campaigns that your project will link with. (300 word limit)**

Outline which local, state-based or national healthy living campaigns that will be linked to your project and how they will be utilised. For example, resources available through the Measure Up campaign (<http://www.measureup.gov.au/internet/abhi/publishing.nsf/Content/Home>) might be distributed at community events, or utilised in local activities.

**5.7 Provide information about the resources (including existing infrastructure and service providers) you intend to use in the delivery of your project. (200 word limit)**

Outline the physical (buildings, courts, pools) and human (committees, advocates) resources that already exist in your community and how you intend to utilise them 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.

**6. Recruitment**

**6.1 How will the target population be recruited to participate in project activities and/or services? (500 word limit)**

Describe how your target population will be recruited and engaged in the project. Outline the tools, resources and existing partnerships that will be used.

**7. Project Plan**

**7.1 Provide an overall project plan outlining key dates for implementation and significant milestones of the proposed project, using the Gantt Chart template at Attachment B1.**

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.

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; and
- evaluation.

List the items in the left hand column of the template and indicate the time period by highlighting the relevant sections of the chart.

## **7.2 Provide a detailed timeline for the first six months of your project (April – September 2011) using the Project Plan template at Attachment B2.**

Using the template provided, outline the timelines for the delivery of the activities and/or services relevant to your project for the first six months.

Ensure the following information is provided:

- administrative activities;
- the project 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.

Further detailed planning will be required following the execution of a Funding agreement with the Commonwealth.

## **8. Project Administration**

### **8.1 What financial system does your LGA use?**

Identify the financial system and software that will be used to manage the project funds.

### **8.2 How does this system identify different funding streams?**

It is essential that the Australian Government can demonstrate financial accountability. Outline how your financial system will be able to identify expenditure and income for the Healthy Communities initiative funding stream, separate from other funding sources.

### **8.3 How will you identify any interest earned on Healthy Communities project funds?**

Outline how your financial system will identify any interest earned on Health Communities project funds.

Note that the word limit for questions 8.1, 8.2 and 8.3 combined is 100 words.

### **8.4 Describe the governance mechanisms that will be put in place to guide the development of the project and ensure it remains on track. (200 word limit)**

Describe 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.

### **8.5 How will your Healthy Communities Coordinator support the delivery and management of the proposed project? (200 word limit)**

The job description for the Healthy Communities Coordinator is provided at Attachment A to the Program Guidelines. Describe the role of the Healthy Communities Coordinator in your project.

## **9. Monitoring and Evaluation**

### **9.1 Describe how you will monitor and evaluate the project, including the proposed monitoring arrangements for measuring overweight and obesity. (1,500 word limit)**

The Healthy Communities initiative Evaluation Guide is available at [www.healthyactive.gov.au](http://www.healthyactive.gov.au) and at Attachment D to the *Healthy Communities initiative Phase 2 Program Guidelines* to inform your response to this question.

You are required to provide a plan for 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 projects under the National Partnership Agreement on Preventive Health.

Your response will need to identify:

- the primary aims and objectives of the project (as outlined in question 3.2);
- short term goals for the project (for the first 6 months of the project);
- medium term goals for the project (12-18 months); and
- long-term goals for the project (30 months and beyond the project period).

The goals should represent the key milestones of the project and will provide opportunities for your ongoing monitoring and evaluation.

You will need to outline how each of the objectives and goals will be assessed and how each will be monitored and evaluated, including how relevant data will be collected.

You will also need to 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; and
- whether the evaluation will be conducted internally or an external evaluator will be engaged.

Applicants should provide information detailing any relevant experience in the collection of baseline data and evaluation activity, especially where it is associated with overweight and obesity.

Your monitoring and evaluation plan must be accounted for within your project budget.

## ***SECTION D: COMMUNITY INVOLVEMENT***

### **10. Community Benefits and Support**

#### **10.1 How will the community be consulted in developing the project? Who will be consulted? (300 word limit)**

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

Describe any processes that will be, or have been, put in place to enable the community to be consulted in developing the project.

#### **10.2 Describe how the proposed project could benefit members of the community beyond the target population. (300 word limit)**

Applicants should provide an explanation regarding how the proposed project will benefit the broader community. In particular, you should provide evidence that the project is unique to the LGA and not a duplicate of existing programs. You may wish to identify activities that will reach the broader population through exposure to promotional material, or the impact of knowledge gained by one family member on other family members.

### **11. Community Leadership**

#### **11.1 Identify local individuals or organisations within the community who will provide leadership and act as a champion for the project. (500 word limit)**

Local individuals and organisations can play a vital role in promoting the project's activities and key messages. 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.

#### **11.2 Attach letters of commitment from the identified community leaders(s).**

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; and
- an outline of the relevant experience and expertise of the community leader.

### **12. Partnerships and Networks**

#### **12.1 Identify and describe any existing networks or partnerships that will contribute to the implementation of the project. Provide a letter of support from partners. (750 word limit)**

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. 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.

Include a letter of support from key partners who will be involved in the project, indicating their commitment to healthy living and commitment to the project, and the role they will play in the project.

**12.2 Provide a letter of endorsement from the Division(s) of General Practice.**

Provide endorsement of the proposed project from the relevant Division(s) of General Practice.

The letter should provide information indicating the need within the LGA for your proposed project and also acknowledge the appropriateness of the activities and/or services selected by the LGA.

## ***SECTION E: CAPACITY TO IMPLEMENT***

### **13. Relevant Project Implementation and Management Experience**

#### **13.1 Provide a description of any previous or current projects (if any) that demonstrate the capacity of the LGA (or group of LGAs) to implement and manage the proposed project. (1,000 word limit)**

Applicants must demonstrate their relevant experience, capacity and expertise to deliver and manage 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 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. Your response should outline what was involved in the planning, administration, delivery and management of these programs in the community. You may wish to draw particular attention to any projects that focused on increasing healthy behaviour.

Outline any existing policies, infrastructure, resources or processes in place that will be utilised to manage the project and ensure that the timeframes and budget are met.

### **14. Commitment to Related Policy**

#### **14.1 What policies does your LGA already have in place that demonstrate a commitment to the promotion of healthy lifestyles? (300 word limit)**

Indicate the existing policies that support healthy lifestyles within your community and describe how they demonstrate commitment to healthy lifestyles. This may include policies that focus specifically on promoting health, or broader policies that have a healthy living component (e.g. a transport policy that promotes cycling as an active form of transport).

### **15. Sustainability**

#### **15.1 What steps would be undertaken to facilitate the long-term sustainability of the proposed project activities and/or services? (750 word limit)**

It is important that healthy living behaviour adopted in the community through the project is sustainable beyond the project period. Outline how the proposed project activities will be able to continue beyond the term of the funding provided by the Healthy Communities initiative.

In developing your response, applicants should consider 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; and
- Potential cost recovery elements of the project.

## ***SECTION F: PROJECT BUDGET***

### **16. Funding Source**

#### **16.1 Clearly identify the funding source(s) that will be utilised for the proposed project (tick the applicable option).**

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

#### **16.2 Provide details of any additional funding and/or in-kind support that will be utilised to conduct your proposed project. (500 word limit)**

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.

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

- applicant contribution; and/or
- partner contribution.

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; and
- what the funding will be used for.

### **17. Project Budget Details**

#### **17.1 Provide a detailed budget breakdown for the project (use the template provided at Attachment B3).**

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.

Applicants should use the template 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.

The project budget is expected to allocate the total amount of the funding provided through the Healthy Communities Initiative grant (i.e. \$703,607 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 2011 – June 2013). 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).

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

Budget items should be detailed so that it is clear exactly what funding will be used for across the term of the project. You may add additional rows to the table if required.

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

## ***SECTION G: AGREEMENTS***

You must indicate your agreement to the seven statements by ticking the relevant boxes. The Agreement must be signed and dated by an authorised representative of the lead LGA.

### *Agreement 4: Overall Evaluation*

The Commonwealth has appointed KPMG to undertake an evaluation of the Healthy Communities Initiative as a whole. The evaluator will also provide guidance and support to the successful LGAs through the development of a suite of standardised tools and resources, and to collate the outputs provided by all local level evaluations. The Commonwealth will facilitate meetings and teleconferences between successful LGAs and KPMG to ensure both parties work closely together. In addition to the support to be provided by the Commonwealth's evaluator, successful LGAs may engage an external evaluation specialist to assist them with the development and implementation of their evaluation methodology.

### *Agreement 5: Healthy Communities Quality Framework*

The Commonwealth will appoint an external contractor(s), namely a 'Registration Body', in early 2011 to implement and manage the Healthy Communities Quality Framework assessment and registration process. Successful LGAs will be required to take reasonable steps to utilise programs and providers that are willing to make a commitment to apply for registration against the Healthy Communities Quality Framework. Programs and providers will be required to apply within six months of the Registration Body being established.

The Healthy Communities National Programs (see Selection Criteria on page 8 of the Program Guidelines) will be the first to apply for registration against the Quality Framework.

### *Agreement 6: Insurance Cover*

Applicants are required to have, or agree to take out if successful, the following minimum insurances:

- a. Worker's compensation for an amount required by relevant State or Territory legislation;
- b. Public liability insurance to a minimum of \$10 million per claim; and
- c. Professional indemnity insurance to a minimum of \$10 million per claim.

## ***SECTION H: DECLARATIONS***

### **Declaration 1**

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

### **Declaration 2**

This declaration must be made by someone who has the authority to declare that the LGA is solvent, such as a financial officer.

## ***ATTACHMENTS***

### **ATTACHMENT A**

Complete the details of each partnering LGA or organisation that is involved in implementing the proposed project.

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; and
- 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; and
- the resources the LGA/Organisation will provide to the project.

Please note a **2 page** limit applies to each letter. Each letter must be signed by an appropriately authorised person capable of committing the organisation. Letters do not need to duplicate letters that have been provided in relation to Section 12.1.

### **ATTACHMENT B1 – GANNT CHART**

Refer to Item 7.1

### **ATTACHMENT B2 – PROJECT PLAN TEMPLATE**

Refer to Item 7.2

## APPLICANT CHECKLIST

	Yes	No	N/A
<p><b>Have you completed ALL of the mandatory fields in the Application Form?</b> Applications not answering each applicable question will be considered non-compliant and will not be further assessed.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you attached Certificates of Currency for the insurance levels specified at Item 1.9?</b> Note that if you do not have the minimum levels of insurance you will need to take out minimum levels of insurance if your application is successful.</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you included letters of support from your Division(s) of General Practice?</b> Refer Question 12.2</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you provided letters of commitment from each of the partnering LGAs or Organisations?</b> Refer Question 12.1 and Attachment A</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>If your project will be delivered by a group of LGAs or in conjunction with an Organisation, have you completed a separate version of Attachment A – details of partner LGAs or Organisations for each partnering applicant?</b></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>Have you completed and signed the Agreements?</b> Refer Section G</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you completed and signed the Declaration?</b> Refer Section H</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you attached a map of your LGA?</b> Refer Question 2.6</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you attached letters of commitment from your community leaders?</b> Refer Question 11.2</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you completed Attachments B1, B2 and B3?</b> Refer Questions 7.1, 7.2 and 17.1</p>	<input type="checkbox"/>	<input type="checkbox"/>	
<p><b>Have you ensured that you have provided 4 copies (1 marked Original) unbound (i.e. not stapled, ring-bound, placed in folders/sleeves), including supporting documents (word format, single sided), <u>plus an electronic copy</u> (Microsoft word 2003 format)?</b></p>	<input type="checkbox"/>	<input type="checkbox"/>	