

Rural Health Workforce Support Activity and More Doctors for Rural Australia Program Support Package Grant Opportunity

These are DRAFT Grant Opportunity Guidelines and do not represent a commitment to funding from the Commonwealth.

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Health Workforce Program: Rural Health Workforce Support Activity grant opportunity processes

The Health Workforce Program is designed to achieve Australian Government objectives. This grant opportunity is part of the above grant program which contributes to the Department of Health's Outcome 2. The Department of Health works with stakeholders to plan and design the grant program according to the Commonwealth Grants Rules and Guidelines (CGRGs).



The grant opportunity opens

We publish the grant opportunity guidelines on **GrantConnect**.



You complete and submit a grant application

You complete the Application Form and address all of the eligibility and assessment criteria to be considered for a grant.



We assess all grant applications

We assess the applications against eligibility criteria. We assess your eligible application against the assessment criteria including an overall consideration of value with money.



We make grant recommendations

We provide advice to the decision maker on the merits of each application.



Grant decisions are made

The decision maker decides which applications are successful.



We notify you of the outcome

We advise you of the outcome of your application. We may not notify unsuccessful applicants until grant agreements have been executed with successful applicants.



We enter into a grant agreement

We will enter into a grant agreement with you if successful. The type of grant agreement is based on the nature of the grant and will be proportional to the risks involved.



Delivery of grant

You undertake the grant activity as set out in your grant agreement. The Community Grants Hub manage the grant by working with you, monitoring your progress and making payments.



Evaluation of the grant opportunity

We evaluate your specific grant activity and the grant opportunity as a whole. We base this on information you provide to us and that we collect from various sources.

2. Introduction

These guidelines contain information for the Rural Health Workforce Support Activity and the More Doctors for Rural Australia Program Support Package grant opportunity.

You must read these guidelines before filling out an application.

This document sets out:

- the purpose of the grant program/grant opportunity;
- · the eligibility and assessment criteria;
- how grant applications are considered and selected;
- how grantees are notified and receive grant payments;
- how grantees will be monitored and evaluated; and
- responsibilities and expectations in relation to the opportunity.

About the grant program

The Health Workforce Program (the Program) is an Australian Government initiative administered by the department to deliver health workforce outcomes and support outreach health services.

The objectives of the Program are to strengthen the capacity of the health workforce to deliver high quality care by targeting the following priority areas:

- increasing the supply of health workers taking into account the changing demographics of the Australian population, and changing health needs and address current shortages; and
- providing access to national vocational general practice education and training to doctors who are seeking specialist general practice registration.

The intended outcome of the Program is to improve the capacity, quality and the mix of the health workforce to meet the requirements of the Australian health system. It will improve the health outcomes communities in rural, regional and remote locations by encouraging health professionals to work in these areas and supporting the delivery of outreach health activities.

We administer the program according to the <u>Commonwealth Grants Rules and Guidelines</u> (CGRGs).

3.1 About the grant opportunity

This grant opportunity will include the Rural Health Workforce Support Activity (RHWSA) and the More Doctors for Rural Australia Program (MDRAP) Support Package.

- The RHWSA aims to improve the capacity, quality, distribution and mix of the health workforce to better meet the needs of regional, rural and remote communities and to deliver a sustainable and well-distributed workforce for Australia
- The MDRAP Support Package will enhance the MDRAP by providing funding to support supervision and education for doctors on the program. Under the Support Package, MDRAP doctors are provided with tailored learning and supervision to meet their needs and that of their region. This supports safe delivery and quality care.

The RHWSA grant activity will run for two financial years, 2021-22 and 2022-23, with the option for a 1-year extension in the 2023-24 financial year. The MDRAP Support Package is for two years only.

The objectives of the grant opportunity are to:

- support quality, continuous primary health care access for rural and remote communities;
- contribute to addressing health workforce shortages and maldistribution in regional, rural and remote Australia through workforce assessment and planning;
- provide access to national vocational general practice education and training to doctors who are seeking specialist general practice registration; and
- provide contemporary, national and jurisdictional approaches to the specific issues and concerns in attracting, retaining, training and supporting the health workforce.

The intended outcomes of the grant opportunity are to:

- meet current and future community health workforce needs through workforce planning;
- improve access and continuity of access to essential primary health care in priority areas, particularly those identified through workforce needs assessments;
- assist non-GP specialist workforce in priority areas where there is an identified need, and/or where requested by the Commonwealth;
- build local health workforce capability with a view to ensuring communities can access the right health professional at the right time;
- grow the sustainability and supply of the health workforce strengthening the long term access to appropriately qualified health professionals;
- provide a safe practice environment for doctors participating on the MDRAP;
- foster interest in general practice fellowship pathways;
- increase participation of doctors and practices in the MDRAP;
- ensure practices support doctors with supervision requirements and provide access to appropriate training modules;
- support health professionals or practices that are located in, or service natural disaster or emergency affected areas;
- establish a single point of contact and an effective national representative body;
- implement the KPMG review recommendations and update operational guidelines in consultation with the department; and
- collaborate with relevant stakeholders, through the establishment of formal networks of consultation to develop national and jurisdictional based solutions.

The Activity will be measured against the below Performance Indicator/s (PIs).

Table 1: Performance Indicator/s (PIs)

Action	PI & Measure
All of the requirements in the Grant Agreement are met.	Information is provided to an acceptable standard in the performance reports, Activity Work Plans and budgets.
Activities are completed according to the scope, timeframes and budget defined in the Activity Work Plan.	The department and your organisation agree that the requirements outlined in the Activity Work Plan have been completed as specified.
Community and stakeholder engagement are completed according to the agreed Activity Work Plan.	The Department and your organisation agree that community and stakeholder engagement activities outlined in the Activity Work Plan have been completed as specified.
Doctors are assessed for the MDRAP Support Package.	All doctors joining the MDRAP are assessed for the Support Package within 3 months of joining the MDRAP.
Doctors complete the MDRAP compulsory foundation learning module/s.	All participants complete required foundation modules (as per MDRAP Operational Guidelines) within 3 months of commencement on the MDRAP.
Total number of doctors who have joined a formal GP fellowship program.	75% of doctors who leave MDRAP join a college led fellowship program.
Doctors complete training and development courses.	All doctors on the MDRAP should complete some development (in addition to foundation learning modules) each 12 months on the MDRAP.
Recommendations from the KPMG Review are implemented as agreed by the Commonwealth.	Recommendations to be implemented as outlined in Attachment A.

3.2 COVID-19

As a result of COVID-19, service providers may need to identify alternative methods of service delivery. The department will support flexibility in the delivery of planned services to enable contracted service providers to adapt to the changing environment. The department will be considered in its approach to reporting over this time and be flexible in reporting requirements under the terms of the Schedule.

4. Grant amount and grant period

4.1 Grants available

The Australian Government has announced a total of up to:

- \$80.325 million (GST exclusive) over three years (two years plus one year option) for the RHWSA, consisting of:
 - \$53.400 million (GST exclusive) over two years (2021-22 and 2022-23);
 plus
 - o \$26.925 million (GST exclusive) as a one-year extension option.
- \$41.877 million (GST exclusive) over two years (2021-22 and 2022-23) for the MDRAP Support Package.

The grant opportunity will run from 1 July 2021 to 30 June 2023, with an option to extend until 30 June 2024 for the RHWSA.

The *minimum grant amount* for the RHWSA is \$53.4 million (GST exclusive) over two years. *The maximum grant amount* for the RHWSA is \$80.325 million (GST exclusive) over three years.

The *minimum grant amount* for MDRAP is \$41.877 million (GST exclusive). The *maximum grant amount* for MDRAP is \$41.877 million (GST exclusive).

The *total minimum grant* amount is \$95.28 million (GST exclusive) over two years. The *total maximum grant amount* is \$122.202 million (GST exclusive) over three years.

Table 2	· Grant	Opportunity	Funding	Available
I abic Z	. Orani	Opportunity	i ununing	Available

Program	2021-22 FY \$ M (GST exclusive)	2022-23 FY \$ M (GST exclusive)	Extension Option 2023-24 FY \$M (GST exclusive)	Total \$ M (GST exclusive)
RHWSA	\$26.475	\$26.925	\$26.925	\$80.325
MDRAP	\$20.762	\$21.115	\$0	\$41.877
TOTAL	\$47.237	\$48.04	\$26.925	\$122.202

4.2 Grant period

The maximum grant period is three years.

5. Eligibility criteria

We cannot consider your application if you do not satisfy all the eligibility criteria. To be eligible to apply you must be the organisation/s listed below and have received an invitation to apply from the department.

Please note that an automated notification email from GrantConnect advising you of a new grant opportunity is not an invitation to apply for this grant opportunity.

5.1 Who is eligible to apply for a grant?

To be eligible you must be one of the listed organisations and apply on behalf of the RWAs through a single application:

Table 3: Eligible organisation/s

Legal name of organisation	ABN
Northern Territory PHN	17 158 970 480
New South Wales Rural Doctors Network	52 081 388 810
Health Workforce Queensland	81 065 574 996
Rural Doctors Workforce Agency South Australia	68 068 926 518
HR Plus Tasmania	33 922 612 254
Rural Workforce Agency Victoria	31 081 163 519
Rural Health West	29 123 188 367
Rural Health Workforce Australia	60 094 976 682

Rationale for Invitation:

The eligible organisations invited to apply for this grant opportunity are considered to have:

- demonstrated capability to administer the RHWSA and the MDRAP support package;
- the ability to deliver the project activities in the project location;
- knowledge of the wider rural and remote health sector and have established relationships with a wide variety of health stakeholder groups, including general practice operators;
- delegated authority to manage the RHWSA and MDRAP support package on behalf of the Department; and
- detailed knowledge of and capability to deliver to the project objectives and outcomes.

Delivering activities of this nature require relevant skills and knowledge of workforce matters in the specified target locations to meet the needs of jurisdictions. The organisation will also facilitate representation and coordination of workforce needs at a national level.

Rural Workforce Agencies (RWAs) have the ability and knowledge to undertake the required activities based on their previous experience. They have provided health workforce recruitment and retention support in regional, rural and remote areas. RWAs have delivered the RHWSA since July 2017 and the MDRAP program since inception and the MDRAP support package since 2019.

RWAs have also demonstrated through their responses to flood, bushfire emergencies and the COVID-19 pandemic that they are able to respond effectively to the changing needs within their jurisdictions.

The organisations as listed above have built strong networks in their communities, which have been leveraged throughout the years that the program has run. These organisations have established connections with community organisations and counterparts.

Their established administrative arrangements and infrastructure will help the department deliver the project quickly and efficiently. This approach will provide the best value for money for the department.

5.2 Who is not eligible to apply for a grant?

You are not eligible to apply if you are:

- an organisation, or your project partner is an organisation, included on the National Redress Scheme's website on the list of 'Institutions that have not joined or signified their intent to join the Scheme' (www.nationalredress.gov.au)
- any organisation not listed in Section 4.1.

6. What the grant money can be used for

6.1 Eligible grant activities

Eligible activities must directly relate to the grant opportunity and may include, but are not limited to:

- implementation of Ministerially agreed recommendations from the KPMG review in consultation with the department;
- establish and provide on-going secretariat support to a jurisdictional Health Workforce Stakeholder Group;
- develop a Health Workforce Needs Assessment (HWNA) addressing access, quality and sustainability of health services in regional, rural and remote Australia;
- develop an Activity Work Plan (AWP) to meet access, quality and sustainability requirements identified within the HWNA;
- develop and maintain guidelines and policies, including the provision of grant and incentives to students, health professionals and business practices identified within the HWNA;
- develop and maintain guidelines and policies relating to the case management of grant recipients including processes for the recovery of funds;
- administration of the MDRAP and the Rural Locum Relief Program (RLRP) (which has now closed to new applications);
- reasonable costs associated with the delivery of the MDRAP support package, under the supervision and support, learning and development, and administration and governance streams, as detailed in the MDRAP Operational Guidelines;
- administer the 5 year Overseas Trained Doctor Scheme;
- support services to identified Bonded Program (see glossary) recipients as outlined below:
 - providing participants with options and recruitment support for placement into rural roles that meet their RoSO.
 - providing information about professional development and support to enable participants to be part of a broader rural medical professional network.

- providing participants with information about accessing rural medical experiences during undergraduate and early career and access to grants.
- administer the Workforce Incentive Program Doctor Stream Flexible Payment System (FPS);
- payment of grants and incentives that address the HWNA and that have been identified in the AWP;
- participate in national coordination activities;
- develop and implement a monitoring and evaluation framework.

National Governance

- apply a national approach to the establishment of governance arrangements and activities that support improvements to the profile and recognition of RWAs and their activities nationally;
- work closely with the Department and other RWAs to ensure national consistency
 of the administration of both the RHWSA and MDRAP (and associated support
 package) and in the application of support services across Australia as well as
 those tailored to meet a specific region's needs;
- Develop and apply robust mechanisms to ensure that the program monitoring and reporting on activity and expenditure does not exceed the allocated annual funding, including working with the department to develop required activity reporting to enable assessment of the programs this grant supports.

6.2 Eligible locations

Eligible grant activities needed in regional, rural and remote areas, prioritised for the purposes of this program as locations categorised as Modified Monash (MM) 2-7 under the Monash Modified Model 2019 classification, in the following states:

- New South Wales
- Victoria
- Queensland
- Northern Territory
- South Australia
- Western Australia
- Tasmania.

The MDRAP and MDRAP Support Package, is only available to practices located in MM 2-7 areas that hold Distribution Priority Area status.

Aboriginal Medical Services and Aboriginal Community Controlled Health Services located in MM 1 or non-DPA locations will also be eligible for support. Other activities in MM1 areas may be required to address workforce shortages in those areas.

6.3 Eligible expenditure

You can only spend the grant on eligible expenditure you have incurred for eligible grant activities defined in your grant agreement and operational guidelines. The following budget classifications include;

RHWSA		
Funding stream	Percentage of total funding	Description
Operational Funding	Up to 15%	The operational funding will not total more than 15 per cent of the total budget
Program Delivery including Grants and Incentives	60%	The program delivery and grants and incentives funding budget will not be less than 60 percent of the total budget. Allocation of funding will be evenly distributed between the access, quality and sustainability elements.
Flexible Funds for Program Delivery including Grants and Incentives	25%	The program delivery and grants and incentives flexible funding will be for innovation projects and responses to natural disasters and emergency events. This will total no more than 25 per cent of the total budget. Written approval for the use of these funds will be required from the Department.

2% of Program Delivery and Flexible Funds will be allocated to National Coordination activities.

MDRAP		
Funding Stream	Percentage of total funding	Description
Administration	Up to 15%	The Administration funding of the Support Package will not total more than 15% of the total budget.
Supervision and Support	65%	Paid to the eligible MDRAP employer or practice/setting in a MM 2-7 and DPA locations for clinical supervision of MDRAP doctors.
Learning and Development	20%	Reimbursement of costs for participants completing foundation learning modules provided by the GP Colleges and, if identified, for necessary learning and development needs (funding on a case-by-case basis for individual MDRAP doctors based on an agreed assessment plan).

If your application is successful, we may ask you to verify project costs that you provided in your application. You may need to provide evidence such as quotes for major costs.

Not all expenditure on your grant activity may be eligible for grant funding. The Decision Maker makes the final decision on what is eligible expenditure and may give additional guidance on eligible expenditure if required.

6.4 What the grant money cannot be used for

You cannot use the grant for any activities not mentioned in Section 5.1.

You cannot use the grant for the following costs:

- purchase of land;
- wages/salaries unrelated to the delivery of the grant;
- · major capital expenditure;
- the covering of retrospective costs;
- costs incurred in the preparation of a grant application or related documentation;
- subsidy of general ongoing administration of an organisation such as electricity, phone and rent;
- major construction/capital works;
- · overseas travel; and
- activities for which other Commonwealth, state, territory or local government bodies have primary responsibility.

The assessment criteria

You **must** address all of the following assessment criteria in the application form. All criterion have equal weighting. Only applications with all four criterion assessed as 'suitable' will be considered to receive grant funding.

The amount of detail and supporting evidence you provide in your application should be relative to the size, complexity and grant amount requested. Word limits apply to each criterion and responses will not be read beyond the prescribed word limits. As a guide, 500 words is approximately one A4 page of 12-font text.

Criterion 1

How will your grant activity align with program objectives and outcomes?

Describe your project, demonstrate how your proposal aligns with the program, and grant opportunity objectives and outcomes at Section 2.1. Your response should be no more than 1500 words. A good response should include:

- a clear definition describing the specific local population health needs and primary healthcare access barriers for rural and remote communities.
- a case for how the project contributes to addressing health workforce shortages and maldistribution in regional, rural and remote Australia;
- the expected approach to the specific issues and concerns in attracting, retaining, training and supporting the health workforce;

- describe opportunities for the MDRAP Support Activity to support other programs or activities covered by this grant opportunity; and
- how you will implement the recommendations from the KPMG review in consultation with the department.

Criterion 2

Efficient and Economical use of Grant Funds

Demonstrate how you will undertake the proposed activity, and how it is an efficient and economical use of grant funds for both the RHWSA and the MDRAP Support Package. Your response should be no more than 750 words. A good response should include:

- how the funds will be administered and managed throughout the grant period.
- a breakdown of key expenditure required to deliver the grant opportunity including an itemised budgets for predicted operational and program delivery grants and incentive expenses.

Criterion 3

Effective Risk Management Strategies

You must demonstrate this by providing a completed risk management plan including:

- the organisation's capacity to identify, manage and mitigate the risks associated with the proposed activities;
- a detailed analysis of any risks or challenges in delivering the proposed activities; and
- providing strategies to address or mitigate the identified risks.

Criterion 4

National Coordination Activity

Describe how you will undertake the national coordination activities. Your response should be a minimum of 500 words and no more than 1000 words. A good response should include how you will:

- Promote, brand and represent RWAs at a national level and promote the RHWSA and MDRAP support package nationally;
- Coordinate a forum/stakeholder group to enable RWA input at a national level;
- Work to both collaborate, and reduce duplication of effort, with other organisations with common interests and directly and frequently engage with those entities;
- Facilitate and ensure a nationally consistent approach to RHWSA and MDRAP support package activities across RWAs, where appropriate;
- Establish appropriate management, and develop a clear governance and reporting structure; and
- Provide coordinated and consolidated feedback and reporting to government on RHWSA and MDRAP outcomes and activity.

8. How to apply

Before applying, you must read and understand these guidelines and the Application Form.

These documents may be found at <u>GrantConnect</u>. Any alterations and addenda¹ will be published on GrantConnect and by registering on this website, you will be automatically notified on any changes. GrantConnect is the authoritative source for grants information.

To apply you must:

- complete the Application Form on GrantConnect;
- provide all the information requested;
- address all eligibility criteria and assessment criteria;
- include all necessary attachments; and
- submit your application to <u>grant.atm@health.gov.au</u> with the email subject line "GO4795 Application" followed by your organisation name and do this by the closing date and time, as specified on the front cover of these guidelines.

You are responsible for ensuring that your application is complete and accurate. Giving false or misleading information is a serious offence under the <u>Criminal Code 1995</u> and we will investigate any false or misleading information and may exclude your application from further consideration.

If you find an error in your application after submitting it, you should contact us immediately on grant.atm@health.gov.au or call (02) 6289 5600. We do not have to accept any additional information, nor requests from you to correct your application after the closing time.

You cannot change your application after the closing date and time.

If we find an error or information that is missing, we may ask for clarification or additional information from you that will not change the nature of your application. However, we can refuse to accept any additional information from you that would change your submission after the application closing time.

You should keep a copy of your application and any supporting documents. We will acknowledge that we have received your application within two working days. If you need further guidance around the application process or if you are unable to submit an application via email, please contact us at grant.atm@health.gov.au or by calling (02) 6289 5600.

8.1 Attachments to the application

We require the following documents with your application:

- an activity work plan (Criterion 1 of the application form)
- an indicative budget (Criterion 2 of the application form)
- a detailed risk management plan, including risk related to COVID-19, and any supporting documentation, describing how you propose to monitor, manage and

¹ Alterations and addenda include but are not limited to: corrections to currently published documents, changes to close times for applications, Questions and Answers (Q&A) documents and Frequently Asked Questions (FAQ) documents

report identified risks including risks that may arise during your project (Criterion 3 of the application form)

• a plan to undertake the national coordination activities (Criterion 4 of the application form).

If you do not attach the requested documents, your application will not progress further in the process.

You must attach supporting documentation to the Application Form in line with the instructions provided within the form. You should only attach requested documents. We will not consider information in attachments that we do not request.

8.2 Timing of grant opportunity processes

You must submit an application between the published opening and closing dates.

If you are successful, we expect you will be able to commence your grant activity around 1 July 2021.

Table 4: Expected timing for this grant opportunity

Activity	Expected Timeframe
Open on GrantConnect	3 weeks
Assessment of applications	2 weeks
Approval of outcomes of selection process	2 weeks
Negotiations and award of grant agreement	1-3 weeks
Earliest start date of grant activity	01/07/2021
End date of grant activity or agreement	30/06/2024

8.3 Questions during the application process

If you have questions relating to clarification of information of the available grant, technical issues or process during the application period, please contact grant.atm@health.gov.au. The department will respond to emailed questions within three working days.

Requests for clarification may form the basis of a response that will be posted on the <u>GrantConnect</u> website in Frequently Asked Questions document relating to this grant opportunity. Any questions will be de-identified. Registered applicants will be notified of updates to the documents via email from the <u>GrantConnect</u> website.

The department cannot assist you to address assessment criteria/determine eligibility or complete your application.

9. The grant selection process

9.1 Assessment of grant applications

We first review your application against the eligibility criteria in Section 4.

We consider eligible applications through a closed non-competitive grant process.

We will then assess your application against the assessment criteria (see Section 6). We consider your application on its merits, based on:

- how well it meets the criteria: and
- whether it provides value with relevant money.

We will rate your application using the Descriptive Classification Rating Scale.

Table 5: Descriptive Classification Rating Scale

Rating (for individual criterion)	Rank
High/good quality – response against this criterion meets all/most sub- criteria to a higher than average/average standard. Evidence is available and provides support for claims against this criterion.	Suitable
Poor quality – poor claims against this criterion, meets some or none of the sub-criteria. Evidence is unavailable, not relevant or lacking in detail.	Not Suitable

When assessing the extent to which the application represents value with relevant money, we will have regard to:

- the relative value of the grant sought;
- extent to which the geographic location of the application matches identified priorities outlined in the annual Health Workforce Needs Assessment;
- the extent to which the evidence in the application demonstrates that it will contribute to meeting the outcomes/objectives; and
- how the grant activities will target groups or individuals.

9.2 Who will assess applications?

An assessment committee will assess each application on its merits. The assessment committee will be made up of staff within the Rural Access Branch of the department.

We may ask external experts/advisors to inform the assessment process. Any expert/advisor, who is not a Commonwealth Official, will be required/expected to perform their duties in accordance with the CGRGs.

The assessment committee may seek additional information about you or your application. They may do this from within the Commonwealth, even if the sources are not nominated by you, as referees. The assessment committee may also consider information about you that is available through the normal course of business.

The assessment committee recommends to the Decision Maker which applications to approve for a grant.

9.3 Who will approve grants?

The Assistant Secretary of Rural Access Branch (the Decision Maker) decides which grants to approve taking into account the recommendations of the assessment committee and the availability of grant funds for the purposes of the grant opportunity.

The Decision Maker's decision is final in all matters, including:

- the approval of the grant;
- · the grant funding amount to be awarded; and
- the terms and conditions of the grant.

There is no appeal mechanism for decisions to approve or not approve a grant.

10. Notification of application outcomes

We will advise you of the outcome of your application in writing. If you are successful, we will advise you of any specific conditions attached to the grant.

11. Successful grant applications

11.1 The grant agreement

You must enter into a legally binding grant agreement with the Commonwealth. We use the standard grant agreement in this program.

Each agreement has general terms and conditions that cannot be changed. Sample grant agreements are available on the Department of Finance's <u>website</u>.

We must execute a grant agreement with you before we can make any payments. We are not responsible for any of your expenditure until a grant agreement is executed. If you choose to start your grant activities before you have an executed grant agreement, you do so at your own risk.

Your grant agreement may have specific conditions determined by the assessment process or other considerations made by the Decision Maker. We will identify these in the agreement.

The Commonwealth may recover grant funds if there is a breach of the grant agreement.

Standard Grant Agreement

We will use a standard grant agreement.

You will have 20 days from the date of a written offer to execute this grant agreement with the Commonwealth ('execute' means both you and the Commonwealth have signed the agreement). During this time, we will work with you to finalise details.

The offer may lapse if both parties do not sign the grant agreement within this time. Under certain circumstances, we may extend this period. We base the approval of your grant on the information you provide in your application.

You may request changes to the grant agreement. However, we will review any required changes to these details to ensure they do not impact the grant as approved by the Decision Maker.

11.2 The Multicultural Access and Equity Policy obliges

The Multicultural Access and Equity Policy obliges Australian Government agencies to ensure that cultural and linguistic diversity is not a barrier for people engaging with government and accessing services to which they are entitled. For example, providing access to language services where appropriate.

11.3 Commonwealth Child Safe Framework

The Royal Commission into Institutional Responses to Child Sexual Abuse highlighted the need for organisations to adopt child safe practices including appropriate screening of staff, mandatory reporting and adoption of the National Principles for Child Safe Organisations. The Australian Government committed to a new Commonwealth-wide

framework to protect children and young people it is responsible for – the Commonwealth Child Safe Framework (CCSF).

The Australian Government is considering appropriate ways to apply the requirements of the CCSF to grant recipients. A child safety clause is likely to be included in a grant agreement where the Commonwealth considers the grant is for:

- services directly to children; or
- activities that involve contact with children that is a usual part of, and more than incidental to, the grant activity.

A child safety clause may also be included in the grant agreement if the Commonwealth considers the grant activity involves children more broadly.

The successful applicant will be required to comply with all child safety obligations included in the grant agreement published with this grant opportunity or notified to the successful applicant prior to execution of the grant agreement.

Irrespective of the child safety obligations in the grant agreement, you must always comply with your state and territory legislative requirements for working with children and mandatory reporting.

The Australian Government has commissioned the Australian Human Rights Commission to develop a series of tools and resources to assist organisations to implement the National Principles.

11.4 How we pay the grant

The grant agreement will state the:

maximum grant amount to be paid.

We will not exceed the maximum grant amount under any circumstances. If you incur extra costs, you must meet them yourself.

We will make payments according to an agreed schedule set out in the grant agreement. Payments are subject to satisfactory progress on the grant activity.

11.5 Grants Payments and GST

Payments will be GST Exclusive. If you are registered for the <u>Goods and Services Tax</u> (<u>GST</u>), where applicable, we will add GST to your grant payment and issue you with a Recipient Created Tax Invoice.

Grants are assessable income for taxation purposes, unless exempted by a taxation law. We recommend you seek independent professional advice on your taxation obligations or seek assistance from the <u>Australian Taxation Office</u>. We do not provide advice on your particular taxation circumstances.

12. Announcement of grants

If successful, your grant will be listed on the GrantConnect website 21 calendar days after the date of effect as required by Section 5.3 of the CGRGs.

13. How we monitor your grant activity

13.1 Keeping us informed

You should let us know if anything is likely to affect your grant activity or organisation.

We need to know of any key changes to your organisation or its business activities, particularly if they affect your ability to complete your grant, carry on business and pay debts due.

You must also inform us of any changes to your:

- name;
- addresses;
- nominated contact details; and
- bank account details.

If you become aware of a breach of terms and conditions under the grant agreement, you must contact us immediately.

You must notify us of events relating to your grant and provide an opportunity for the Minister or their representative to attend.

13.2 Reporting

You must submit reports in line with the grant agreement. We will provide sample templates for these reports as appendices in the grant agreement. We will expect you to report on:

- progress against agreed grant activity milestones, outcomes and key performance indicators;
- progress against priorities advised in your Health Workforce Needs Assessment;
 and
- expenditure of the grant.

The amount of detail you provide in your reports should be relative to the size, complexity and grant amount.

We will monitor progress by assessing reports you submit and may conduct site visits or request records to confirm details of your reports if necessary. Occasionally we may need to re-examine claims, seek further information or request an independent audit of claims and payments.

Progress reports

Progress reports must:

- include evidence of your progress towards completion of agreed activities;
- show the total eligible expenditure incurred to date;
- include evidence of expenditure; and

• be submitted by the report due date (you can submit reports ahead of time if you have completed relevant activities).

We will only make grant payments when we receive satisfactory progress reports.

You must discuss any reporting delays with us as soon as you become aware of them.

Ad-hoc reports

We may ask you for ad-hoc reports on your grant. This may be to provide an update on progress, or any significant delays or difficulties in completing the grant activity.

Final report

When you complete the grant activity, you must submit a final report.

Final reports must:

- identify if and how outcomes have been achieved;
- include the agreed evidence as specified in the grant agreement;
- identify the total eligible expenditure incurred; and
- be submitted within 90 days of completion in the format provided in the grant agreement.

13.3 Audited financial acquittal report

We may ask you to provide an independently audited financial acquittal report. A financial acquittal report will verify that you spent the grant in accordance with the grant agreement. The financial acquittal report template is attached to the sample grant agreement.

13.4 Grant agreement variations

We recognise that unexpected events may affect your progress. In these circumstances, you can request a variation to your grant agreement. You can request a variation by contacting the Director of the Rural Distribution Section, Health Workforce Division.

You should not assume that a variation request will be successful. We will consider your request based on provisions in the grant agreement and the likely impact on achieving outcomes.

13.5 Record keeping

We may also inspect the records you are required to keep under the grant agreement.

13.6 Evaluation

We will evaluate the grant opportunity to measure how well the outcomes and objectives have been achieved. We may use information from your application and reports for this purpose. We may also interview you, or ask you for more information to help us understand how the grant impacted you and to evaluate how effective the program was in achieving its outcomes.

We may contact you up to one year after you finish your grant for more information to assist with this evaluation.

13.7 Acknowledgement

The program logo should be used on all materials related to grants under the program. Whenever the logo is used, the publication must also acknowledge the Commonwealth as follows:

'Rural Health Workforce Support Activity – an Australian Government initiative'.

'More Doctors for Rural Australia Program – an Australian Government initiative'.

14. Probity

The Australian Government will make sure that the grant opportunity process is fair, according to the published guidelines, incorporates appropriate safeguards against fraud, unlawful activities and other inappropriate conduct and is consistent with the CGRGs.

These guidelines may be changed from time-to-time by the department. When this happens, the revised guidelines will be published on GrantConnect.

14.1 Enquiries and feedback

The department's <u>Complaint Handling Process</u> apply to complaints about this grant opportunity. All complaints about a grant process must be provided in writing.

Any questions you have about grant decisions for this grant opportunity should be sent to grant.atm@health.gov.au.

If you do not agree with the way the department has handled your complaint, you may complain to the <u>Commonwealth Ombudsman</u>. The Ombudsman will not usually look into a complaint unless the matter has first been raised directly with the relevant Commonwealth entity.

The Commonwealth Ombudsman can be contacted on:

Phone (Toll free): 1300 362 072

Email: ombudsman@ombudsman.gov.au Website: Commonwealth Ombudsman

14.2 Conflicts of interest

Any conflicts of interest could affect the performance of the grant opportunity or program. There may be a conflict of interest, or perceived conflict of interest, if the department's staff, any member of a committee or advisor and/or you or any of your personnel:

- has a professional, commercial or personal relationship with a party who is able to influence the application selection process, such as an Australian Government officer;
- has a relationship with or interest in, an organisation, which is likely to interfere
 with or restrict the applicants from carrying out the proposed activities fairly and
 independently; or
- 3. has a relationship with, or interest in, an organisation from which they will receive personal gain because the organisation receives a grant under the grant program/ grant opportunity.

You will be asked to declare, as part of your application, any perceived or existing conflicts of interests or that, to the best of your knowledge, there is no conflict of interest.

If you later identify an actual, apparent, or perceived conflict of interest, you must inform the department in writing immediately.

Conflicts of interest for Australian Government staff will be handled as set out in the Australian <u>Public Service Code of Conduct (Section 13(7))</u> of the <u>Public Service Act 1999</u>. Committee members and other officials including the decision maker must also declare any conflicts of interest.

We publish our conflict of interest policy on the <u>Australian Public Service Commission's</u> website.

14.3 Privacy

We treat your personal information according to the <u>Privacy Act 1988</u> and the <u>Australian Privacy Principles</u>. This includes letting you know:

- 1. what personal information we collect;
- 2. why we collect your personal information; and
- 3. who we give your personal information to.

Your personal information can only be disclosed to someone else for the primary purpose for which it was collected, unless an exemption applies.

The Australian Government may also use and disclose information about grant applicants and grant recipients under this grant opportunity in any other Australian Government business or function. This includes disclosing grant information on GrantConnect as required for reporting purposes and giving information to the Australian Taxation Office for compliance purposes.

We may share the information you give us with other Commonwealth entities for purposes including government administration, research or service delivery, according to Australian laws.

As part of your application, you declare your ability to comply with the *Privacy Act 1988* and the Australian Privacy Principles and impose the same privacy obligations on officers, employees, agents and subcontractors that you engage to assist with the activity, in respect of personal information you collect, use, store, or disclose in connection with the activity. Accordingly, you must not do anything, which if done by the department would breach an Australian Privacy Principle as defined in the Act.

14.4 Confidential Information

Other than information available in the public domain, you agree not to disclose to any person, other than us, any confidential information relating to the grant application and/or agreement, without our prior written approval. The obligation will not be breached where you are required by law, Parliament or a stock exchange to disclose the relevant information or where the relevant information is publicly available (other than through breach of a confidentiality or non-disclosure obligation).

We may at any time, require you to arrange for you; or your employees, agents or subcontractors to give a written undertaking relating to nondisclosure of our confidential information in a form we consider acceptable.

We will keep any information in connection with the grant agreement confidential to the extent that it meets all of the three conditions below:

- 1. you clearly identify the information as confidential and explain why we should treat it as confidential;
- 2. the information is commercially sensitive; and
- 3. revealing the information would cause unreasonable harm to you or someone else.

We will not be in breach of any confidentiality agreement if the information is disclosed to:

- 1. the committee and other Commonwealth employees and contractors to help us manage the program effectively;
- 2. employees and contractors of our department so we can research, assess, monitor and analyse our programs and activities;
- 3. employees and contractors of other Commonwealth agencies for any purposes, including government administration, research or service delivery;
- 4. other Commonwealth, State, Territory or local government agencies in program reports and consultations;
- 5. the Auditor-General, Ombudsman or Privacy Commissioner;
- 6. the responsible Minister or Parliamentary Secretary; and
- 7. a House or a Committee of the Australian Parliament.

The grant agreement may also include any specific requirements about special categories of information collected, created or held under the grant agreement.

14.5 Freedom of information

All documents in the possession of the Australian Government, including those about this grant opportunity, are subject to the *Freedom of Information Act 1982* (FOI Act).

The purpose of the FOI Act is to give members of the public rights of access to information held by the Australian Government and its entities. Under the FOI Act, members of the public can seek access to documents held by the Australian Government. This right of access is limited only by the exceptions and exemptions necessary to protect essential public interests and private and business affairs of persons in respect of whom the information relates.

All Freedom of Information requests must be referred to the Freedom of Information Coordinator in writing.

By mail: Freedom of Information Coordinator

FOI Unit

Department of Health

GPO Box 9848

CANBERRA ACT 2601

By email: foi@health.gov.au

15. Consultation

The Rural Health Workforce Support Activity and MDRAP Support Package were designed in collaboration with the Rural Workforce Agencies.

16. Glossary

Term	Definition
accountable authority	see subsection 12(2) of the <u>Public Governance</u> , <u>Performance and Accountability Act 2013</u>
administering entity	when an entity that is not responsible for the policy, is responsible for the administration of part or all of the grant administration processes
assessment criteria	are the specified principles or standards, against which applications will be judged. These criteria are also used to assess the merits of proposals and, in the case of a competitive grant opportunity, to determine application rankings.
Bonded Program	Refers to any or all of:
	 the statutory Bonded Medical Program established under Part VD of the Health Insurance Act 1973 and the Health Insurance (Bonded Medical Program) Rule 2020 - the Medical Rural Bonded Scholarship (MRBS) Scheme the Bonded Medical Places (BMP) Scheme.
	Recipients have a return of service obligation (RoSO) to work for a period ranging from 12 months to six years in areas of workforce shortage in rural and remote Australia.
Bonded Program Participant	A recipient who has a return of service obligation (RoSO) under a Bonded Program. It includes:
	 medical students, interns, vocational trainees, non-vocationally recognised and vocationally recognised doctors general practitioners and other medical specialists
commencement date	the expected start date for the grant activity
completion date	the expected date that the grant activity must be completed and the grant spent by
co-sponsoring entity	when two or more entities are responsible for the policy and the appropriation for outcomes associated with it
date of effect	can be the date on which a grant agreement is signed or a specified starting date. Where there is no grant agreement, entities must publish information on individual grants as soon as practicable.
decision maker	the person who makes a decision to award a grant

Term	Definition
eligibility criteria	refer to the mandatory criteria which must be met to qualify for a grant. Assessment criteria may apply in addition to eligibility criteria.
Commonwealth entity	a Department of State, or a Parliamentary Department, or a listed entity or a body corporate established by a law of the Commonwealth. See subsections 10(1) and (2) of the PGPA Act
Commonwealth Grants Rules and Guidelines (CGRGs)	establish the overarching Commonwealth grants policy framework and articulate the expectations for all non-corporate Commonwealth entities in relation to grants administration. Under this overarching framework, non-corporate Commonwealth entities undertake grants administration based on the mandatory requirements and key principles of grants administration.
Five Year Overseas Trained Doctors (5-Yr OTD) Scheme	The Five Year Overseas Trained Doctor Scheme seeks to improve access to general practitioners in regional and remote Australia, with a specific emphasis on the least desirable locations. The Scheme achieves this aim by providing a significant reduction to a general practitioner's moratorium period once they have completed a return of service period of between three and five years, and obtain both permanent residency and vocational recognition.
grant	for the purposes of the CGRGs, a 'grant' is an arrangement for the provision of financial assistance by the Commonwealth or on behalf of the Commonwealth:
	o under which relevant money ² or other <u>Consolidated</u> <u>Revenue Fund</u> (CRF) money ³ is to be paid to a grantee other than the Commonwealth; and
	 which is intended to help address one or more of the Australian Government's policy outcomes while assisting the grantee achieve its objectives.
grant activity/activities	refers to the project/tasks/services that the grantee is required to undertake
grant agreement	sets out the relationship between the parties to the agreement, and specifies the details of the grant

 $^{\rm 2}$ Relevant money is defined in the PGPA Act. See section 8, Dictionary.

 $^{^{3}}$ Other CRF money is defined in the PGPA Act. See section 105, Rules in relation to other CRF money.

Term	Definition		
GrantConnect	is the Australian Government's whole-of-government grants information system, which centralises the publication and reporting of Commonwealth grants in accordance with the CGRGs		
grant opportunity	refers to the specific grant round or process where a Commonwealth grant is made available to potential grantees. Grant opportunities may be open or targeted, and will reflect the relevant grant selection process.		
grant program	a 'program' carries its natural meaning and is intended to cover a potentially wide range of related activities aimed at achieving government policy outcomes. A grant program is a group of one or more grant opportunities under a single Portfolio Budget Statement Program.		
grantee	the individual/organisation which has been selected to receive a grant		
Health Workforce Needs Assessment (HWNA)	Means an assessment of the health workforce which provides information on:		
	 access to health professionals in regional and rural Australia; quality of health professionals in regional and rural Australia sustainability of the health workforce in regional and rural Australia; and provides an assessment of issues/hot spots that require urgent/immediate improvement and intervention by the grant recipient and/or a related stakeholder. 		
'Hotspot'	Means a local area, region and/or locality that has been identified as having persistent workforce issues that directly impact on adequate access to health services.		
Modified Monash Model 2019	The Modified Monash Model is a geographical classification that categorises different areas in Australia into seven remoteness categories according to geographical remoteness, as defined by the Australian Bureau of Statistics (ABS) 2016 Census data, and town size.		

Term	Definition	
More Doctors for Rural Australia Program (MDRAP)	The More Doctors for Rural Australia Program (MDRAP) supports non-vocationally recognised doctors to gain valuable general practice experience rural and remote communities prior to joining a colleg fellowship pathway. The MDRAP also supports junior doctors and locums providing services in rural and remote communities.	
PBS Program	described within the entity's Portfolio Budget Statement, PBS programs each link to a single outcome and provide transparency for funding decisions. These high-level PBS programs often comprise a number of lower level, more publicly recognised programs, some of which will be Grant Programs. A PBS Program may have more than one Grant Program associated with it, and each of these may have one or more grant opportunities.	
Return of Service Obligation (RoSO)	Means the requirement under the Bonded Program to work for a period ranging from 12 months to six years in areas of workforce shortage in rural and remote Australia.	
selection criteria	comprise eligibility criteria and assessment criteria.	
selection process	the method used to select potential grantees. This process may involve comparative assessment of applications or the assessment of applications against the eligibility criteria and/or the assessment criteria.	
value with money	value with money in this document refers to 'value with relevant money' which is a judgement based on the grant proposal representing an efficient, effective, economical and ethical use of public resources and determined from a variety of considerations.	
	 When administering a grant opportunity, an official should consider the relevant financial and nonfinancial costs and benefits of each proposal including, but not limited to: 1.1 the quality of the project proposal and activities; 2.1 fitness for purpose of the proposal in contributing to government objectives; 3.1 that the absence of a grant is likely to prevent the grantee and government's outcomes being achieved; and 4.1 the potential grantee's relevant experience and performance history. 	
Vocationally recognised	Means an Medical Practitioner who has been assessed by a Medical College as being eligible for Fellowship	

Term	Definition
Workforce Incentive Program (WIP) – Doctor Stream	The WIP provides financial incentives to medical practitioners to provide eligible primary care services in regional, rural and remote locations in Australia. The Flexible Payment System (FPS) is for practitioners who provide eligible services which are not billed under the Medical Benefits Schedule.



Attachment A: Implementation of KPMG recommendations

No.	Recommendations/approach	Supported (Y/N)
	Mid 2021	
1	Improvements to governance will be progressed in coming months to ensure that there is a national approach to rural workforce activity. - National lead and activities to be identified as part of grant opportunity.	Yes
2	A monitoring and evaluation framework is needed to ensure ongoing effectiveness of the program. This would provide for consistent streamlined reporting across all RWAs, create program efficiencies, and facilitate continuous improvement.	Yes
	 To be developed in 2021-22 by the national coordination lead, in consultation with RWAs and the department. 	
3	The report found the current required split between the program elements; Access, Quality and Sustainability was restrictive and did not permit flexibility to allow RWAs to target areas of need or contingencies such as emergencies or natural disasters.	Yes
	 Grant opportunity to identify what the percentages should be with a minimum percentage to be applied to the three priority areas and no more than the current 15 per cent permitted for administration. Up to 25 per cent of funding will be subject to proposals put forward by the RWA for innovative projects, subject to approval. 	
	During 2021-2023	
4	Within grants, RWA's will be required to work with PHNs to develop a joint workforce needs assessments to align, reduce duplication and focus effort for the Australian Government.	Yes
	- Other organisations can be involved.	
5	Place based workforce planning is needed to ensure that local workforce needs are addressed, building on current practices.	Yes
	 To also consider findings from the innovative primary care models being trialled. Evaluation of these trials will commence in 2021, which will assist with how RWAs might implement further appraoches. 	
	Longer term	
6	A revised performance framework will need to include outcomes-based reporting and consistent reporting by RWAs. Any digital platform will support performance reporting by RWAs and consolidation of data.	Yes
	 This recommendation recognises time to implement is required and that a working model exists with the PHN reporting portal. Work to assess suitability and what it might require to extend will be undertaken by the Department and may require future funding. 	