Application Form: Regional Health Infrastructure Fund 2023-24

* indicates a required field

Submissions close on 11 September 2023 at 5:00 PM.

Health Service / Agency Details

Applicant Organisation name *

Select your Organisation name from the dropdown list

Applicant Organisation ABN *

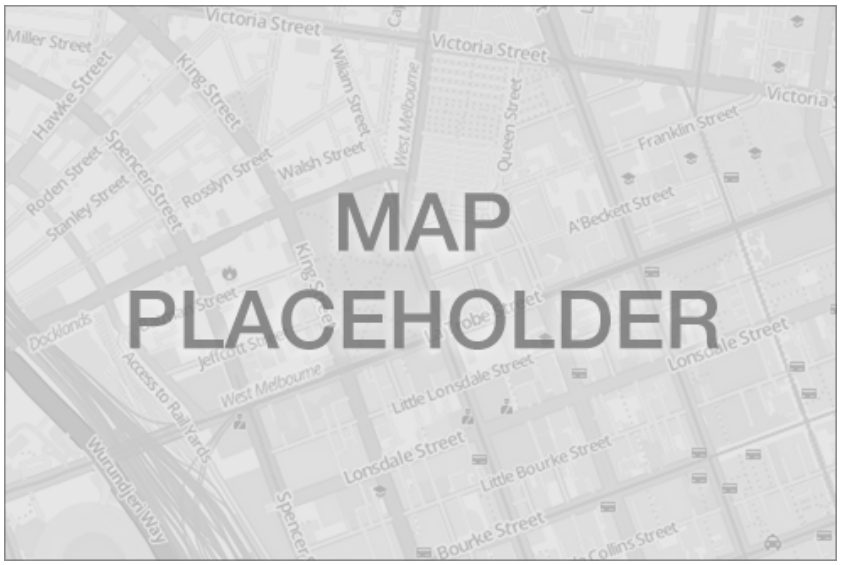
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Organisation's Primary Address (Head Office / Main Campus) *

Address

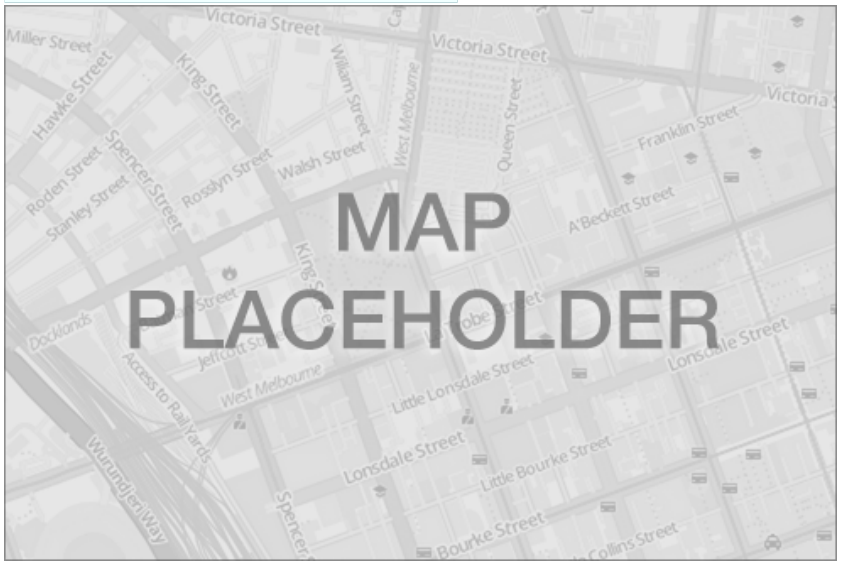


Full Address of Head Office in organisation that operates from multiple offices

Name of Department / Campus / Facility to which this submission relates *

Examples: Emergency Department; Ward 2; Building name; Campus name; Name of Residential Aged Care facility; Hospital name.

Address of Department / Campus / Facility to which the submission relates *
Address



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Applicant *
Organisation Name

Please provide the Applicant Organisation Name exactly as it appears above.

Regional Division *

Choose a division

Area *

Choose divisional area

Local Government Area (LGA) *

Health Service / Agency Type *

- ○ Bush Nursing Centre
- ○ Bush Nursing Hospital
- ○ Incorporated Public Residential Aged Care Service
- ○ Local Health Service
- ○ Mental Health and Alcohol & Other Drugs
- ○ Multipurpose Services
- ○ Publicly Funded Community Specialist Palliative Care Services
- ○ Regional Hospital
- ○ Registered Community Health Service
- ○ Small Rural Health Service
- ○ Sub-regional Hospital

Is this property: *

- ○ Owner Occupied
- ○ Leased from Department of Health
- ○ Leased from Other

Were you funded for Stream 2 (planning) in RHIF 22-23 for this project? *

- ○ Yes
- ○ No

Stream 2 funded through RHIF 22-23

Are you ready to submit a Stream 1 application under RHIF 23-24? *

- ○ Yes
- ○ No

Is this project still a priority for you? *

- ○ Yes
- ○ No

Why is this project not a priority any more? *

What progress have you made so far? *

Project Details

* indicates a required field

Details of submission

Project / Proposal Title *

Must be no more than 10 words.
Your title should be short but descriptive. Each proposal requires separate application form. If you are an existing Stream 2 reapplying, use the same project title here (excluding "Planning for").

Basic description of project (maximum 50 words) *

Word count:
Must be no more than 50 words.
Succinct description to characterise the nature of the project. Examples: "Replace CT scanner to reduce waitlist times and enhance service delivery" // "Construct a new Community Health Centre to deliver primary care services, including GP, dental, physio, OT, and other Allied Health and Clinical services" // "Renovate reception and waiting area, and install swipe entry doors to improve safety and amenity for patients and staff" // "Upgrade of essential facilities and equipment including nurse call system, fire detection system, ICT server, floor coverings, patient beds, theatre suction system, and washer disinfector."

Application Priority *

- ○ Priority 1
- ○ Priority 2
- ○ Existing Stream 2

Maximum of two applications per Health Service for RHIF 2023-24. Where Health Services have been amalgamated, the amalgamated Health Service may seek VHBA approval (via email to RHIF.Applications@health.vic.gov.au) to submit more applications (in such case, the application priority should be included in the answer to the Expected Benefits question).

Has this proposal been submitted in previous grant rounds or other grant programs? *

- ○ Yes
- ○ No

Please identify which funding round and year and whether successful. *

Does this proposal have interdependencies with other current or planned projects? *

○ Yes
○ No

For instance, if this project requires other stages or infrastructure connections before this project can commence etc.

Please detail the nature of the dependency *

Word count:

Must be no more than 100 words.
Explain where relevant the sequence of works proposed, and critical milestones and time constraints if any.

Key deliverables of project *

Word count:

Must be no more than 250 words.
Please provide a simple, bullet point-style description of the deliverables from the project (eg. Two new consulting rooms including fixtures and fittings). Scoping statements must be supplied. For construction projects, this must include floor areas, greenfield / refurbishment, number of storeys, services requirements, standard of fitout, finishes, FF&E etc. For purchases and specialist procurement, equipment types, models, quantities, etc are to be included. These must match the cost plan under the 'Financial Details' section of this application form.

Expected Benefits from Project *

Word count:

Must be no more than 250 words.
Please describe the current state and the future state that will be achieved as a result of delivering this project (against business case benefits):- ○ Improved patient experience & quality of care (eg. Improved access to care, Reduced incidence of patient harm, Increased patient satisfaction) ○ Increased system efficiency (eg. Increased system throughput, Reduction in reactive maintenance expenditure) ○ Improved workforce experience and safety (eg. Increased workforce satisfaction, Reduction in health sector job vacancies) ○ Stronger regional communities and economies (eg. Decreased distance to treatment, Increased employment in health sector)

Does this Project / Proposal require operational growth funding? *

○ Yes
○ No

Has all operational funding been secured? Provide detail. *

Service Type *

- ○ Acute
- ○ Aged Care
- ○ Bush Nursing - Hospital / Centre
- ○ Critical Care
- ○ Dental
- ○ Emergency / Urgent Care
- ○ Maternity
- ○ Mental Health
- ○ Operating Theatre
- ○ Paediatric
- ○ Palliative Care
- ○ Sub-acute
- ○ Other:

Project Category

RHIF 2023-24 applications will be categorised into one of the following:

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

Below are a few examples of projects that fall under these categories:

Regulatory and compliance

- Asbestos
- AS4187
- Building Fabric refurbishment (e.g.: bathrooms, client meal preparation)
- Fire detection and suppression

Quality and Safety

- Non-medical items
- Medical / Engineering assets
- Breast screening equipment
- Operating theatre lights and equipment
- Radiotherapy equipment
- Security and duress systems, nurse call
- Infection prevention and Control

Respond to Growing Demand / Capability

- Building upgrades, redevelopment and expansions works such as new treatment rooms, consulting rooms, wards etc
- Construction, reconfigurations and refurbishments.
- Civil and infrastructure works (incl gas, water, sewer, Communications)
- Ceiling tracking and hoists
- Handsets for telephony systems
- Electrical distribution boards
- ICT hardware and management systems

Which project category does this application relate to? *
- ○ Regulatory and Compliance
- ○ Quality and Safety
- ○ Respond to Growing Demand / Capability

Project Type *
- ○ New Construction
- ○ Refurbishment
- ○ Client Meal Preparation
- ○ DDA & Universal Access Works
- ○ Design Development
- ○ Engineering Infrastructure Works (eg engineering plant & equipment, electrical work, generators, Heating Ventilation and Air Conditioning)
- ○ Equipment (Medical)
- ○ Fire safety
- ○ Healthcare Worker Safety
- ○ Infection Prevention and Control
- ○ Motor vehicle
- ○ Security
- ○ Information and communications technology (ICT)
- ○ Other:

Please refer to Regional Health Infrastructure Fund page

*The 'Motor vehicles' project type is only applicable for **Bush Nursing Centres.** Other services are ineligible to request funding for motor vehicles.*

What does this Information Communication Technology project relate to?
- ☐ Nurse Call
- ☐ Duress Alarms
- ☐ Security
- ☐ WiFi Upgrade
- ☐ Software
- ☐ Hardware
- ☐ Other:

Minimum sustainability requirements

Click here to download the Sustainability Checklist from Regional Health Infrastructure Fund page (under the downloads section).

Please complete and upload the Sustainability Checklist for Grants. *
Attach a file:

Enhanced sustainability initiatives

For construction and refurbishment projects over $5m, it is mandatory to include 2.5% budget of the total construction cost for enhanced sustainability initiatives.

For construction and refurbishment projects under $5m, a budget allocation of up to 2.5% of the total construction cost will be considered to support enhanced sustainability initiatives where the application demonstrates the benefit of the additional investment.

For examples of enhanced sustainability initiatives, please refer to the RHIF Guidelines and FAQs here.

Outline any enhanced sustainability features that the project is including. *

- ☐ Climate adaptation and resilience
- ☐ Energy
- ☐ Transition to electric
- ☐ Indoor environment quality
- ☐ Transport
- ☐ Water management
- ☐ No enhanced sustainability initiatives included in this project.
- ☐ Other:

Provide further detail on the enhanced sustainability initiatives that go beyond the minimum requirements *

Word count:
Must be no more than 250 words.

Provide level of additional investment sought for enhanced sustainability initiatives as outlined above. *

$
Must be a dollar amount.

With which Regulation / Standard / Guideline / Royal Commission Recommendation are you seeking to comply? *

Describe the current gap against the compliance with the Regulation / Standard / Guideline / Royal Commission Recommendation *

How long have you been non-compliant and what has the impact been? Does the project ensure you will be fully compliant, and what evidence will you provide to demonstrate compliance upon completion of this project?

Project Readiness

VHBA is prepared to consider funding for Ready for Implementation projects (Stream 1) as well as projects requiring funding for Planning or Design Development (Stream 2).

If you received funding from 2022-23 RHIF for Stream 2 (planning), you MUST reapply regardless of the current status of the project.

Have you received Commissioning System Improvements' (CSI - Department of Health) support for this Project? *

- ○ Yes
- ○ No

Contact your Commissioning & System Improvements (CSI) representative to discuss this project and obtain their support.

Please attach email in the Supporting Documentation section below.

Provide the contact details of relevant CSI representative. *

Stream 1 – Ready for Implementation - projects ready to be considered for full funding

-
  - All designs and specifications complete and approved, detailed design accompanied by Cost Plan, Regulatory Approvals in place, ready to invite market tenders for construction / delivery quotations

Stream 2 - Project in Planning or Design.

Stream 2 Projects in progress - Projects funded for planning in RHIF 2022-23 reapplying for Stream 1 funding.

Nominate whether you are seeking funding in Stream 1 or 2 *
○ Stream 1
○ Stream 2
Refer to the RHIF 23-24 Guidelines.

What stage is this project at? *
○ Preliminary / Sketch Design / Cost Plan not complete
○ Schematic Design Documentation and Cost Plan
○ Detailed Design / Cost Plan Complete
○ Ready for Tender
If selecting "Other", please specify the stage this project is at.

Please refer to the RHIF Guidelines and FAQs here for details of supporting documentation requirements.

VHBA expect the following documents to be submitted. Please confirm these are attached. - validate against guidelines *
☐ Project management plan (PMP) for construction projects
☐ Detailed Design Drawings
☐ Technical Specifications
☐ Supporting Consultant Reports
☐ Independent Cost Plan from a quantity surveyor
☐ Builders Quotation / Supplier Quotation
☐ List of Specialist Medical Equipment
☐ Tender Documents
☐ Other:
If selecting "Other", please specify the documentation submitted.

Stream 2 Additional Details

Funding is sought because (tick all that are applicable): *
☐ Regulatory Planning or development approvals are incomplete
☐ Design work required from Architectural, health planner etc
☐ Technical work required from engineers, building services consultants etc
☐ Other:

What is required to complete Regulatory Planning or development approvals? *

Provide details of the Design work required from Architectural, health planner etc *

Provide details of the Technical work required from engineers, building services consultants etc *

What else is required for this project to advance to the next stage of readiness? *

Supporting documentation

Please attach documentation to support your proposal. Supporting documentation must include:

- Detailed Design Drawings.
- Project Management Plan (mandatory requirement for construction or refurbishment projects in excess of $0.5 million)
- Quantity Surveyor Plan
- Builder Quotation / Supplier Quotation
- Schedule of specialist medical equipment (including cost estimates for individual items)
- Procurement framework plan for purchases
- Photographs of existing conditions and non compliance where appropriate
- Independent Review, Audit or Noncompliance Reports, if appropriate.
- Email confirming Regional CSI support for the proposal.

Please refer to the RHIF Guidelines and FAQs here.

Attach Supporting Documentation *

Attach a file:

Please ensure that all files are clearly named so as to be easily identifiable. Individual file size cannot be more than 25 MB.

Stream 2 funded from RHIF 22-23, but not ready to convert to Stream 1

* indicates a required field

Is the scope of work in line with the key deliverables approved as part of RHIF 22-23 funding? *
- ○ Yes
- ○ No

Explain the scope changes and reason for scope variance *

What stage is this project currently at? *
- ○ Schematic Design Documentation and Cost Plan
- ○ Detailed Design Documentation and Cost Plan
- ○ Contract Documentation / Tender Ready

What is the current status of this stage? *
- ○ Not commenced
- ○ In progress
- ○ Complete

Please detail any identified issues or risks? *

Have any significant latent conditions been identified during this phase of design? *
- ○ Yes
- ○ No

Explain the latent conditions identified at this stage. *

Have any significant decant issues been identified during this phase of design? *
- ○ Yes
- ○ No

Detail the decant issues identified at this stage. *

Has it been identified during this phase of design that the proposed works will create operational issues including partial or complete closure of services? *
- ○ Yes
- ○ No

Explain the operational issues identified at this stage. *

Have any significant site wide engineering service issues been identified during this phase of design? *
- ○ Yes
- ○ No

Explain the site wide engineering service issues identified at this stage. *

Documentation Checklist for Schematic Design

Mandatory Documentation for schematic Design Completion:

1. Milestone 1 claim for the engagement of consultants including fee proposal and purchase order.
2. Architectural Schematic Design Documentation
3. Schematic Design Report from Principal Consultant
4. Quantity Surveyor Cost Plan C1
5. Agency schematic design endorsement statement or Project Control Group minutes of approval
6. Service Engineer preliminary report
7. Schedule of Accommodation Table

Additional documentation that will be accepted at this point:

1. Relevant Building Surveyor Preliminary Report
2. Town Planning Submission (if relevant)

3. Additional reports from specialist consultants i.e., acoustic engineer, DDA, fire engineer, traffic engineer, geo-tech reports, hazardous material reports, FRV reports, BAL reports, Clinical Health Planner reports

Documentation Checklist for Detailed Design

Mandatory Documentation for Detailed Design Completion:

1. Architectural Detailed Design Documentation
2. Detailed Design Report from Principal Consultant
3. Quantity Surveyor Cost Plan C2
4. Agency detailed design endorsement statement or Project Control Group minutes of approval
5. Service Engineer documentation
6. Relevant Building Surveyors preliminary report
7. Town Planning Submission (if relevant)
8. Furniture, Fitting & Equipment Registers (if relevant)

Additional documentation that will be accepted at this point:

1. Additional reports from specialist consultants i.e., acoustic engineer, DDA, fire engineer, traffic engineer, geo-tech reports, hazardous material reports, FRV reports, BAL reports, Clinical Health Planner reports

Documentation Checklist for Tender Documentation

Mandatory Documentation for Contract Documentation:

1. Architectural Detailed Design Documentation and material specifications
2. Quantity Surveyor Cost Plan D
3. Agency detailed design endorsement statement or Project Control Group minutes of approval
4. Service Engineer documentation and specifications
5. Relevant Building Surveyors sign off Contract documentation drawings
6. Town Planning Approval (if relevant)
7. Additional reports from specialist consultants i.e., acoustic engineer, DDA, fire engineer, traffic engineer, geo-tech reports, hazardous material reports, FRV reports, BAL reports, Clinical Health Planner reports

Additional documentation that will be accepted at this point:

1. Procurement Evaluation Plan
2. Probity Plan (for projects >$10M)
3. Procurement Exemption Approval Forms

Have you completed all the above listed documenation? *

- ○ Yes
- ○ No

What is pending and why? *

Supporting documentation

Please attach documentation as listed above.

Attach Supporting Documentation *
Attach a file:

Please ensure that all files are clearly named so as to be easily identifiable. Individual file size cannot be more than 25 MB.

Cost Estimates and Financial Details

* indicates a required field

Project Costs

Total End Project Cost (excluding GST) *

$

What is the total estimated cost of your project? This includes but not limited to building costs, consultant costs, Authority costs, FFE etc. If you are applying for Stream 2 funding, include the estimated total end project cost here (not the estimate for initial planning).

Total amount of RHIF funding requested (excluding GST) *

$

If you are applying for Stream 2 funding, please specify the estimated cost of planning being requested.

Are you receiving funding from another source for this project? *

- ○ Yes
- ○ No

Please identify source(s) of additional funding *

Please specify amount of additional funding *

$

Has the Total End Project Cost changed since the RHIF 22-23 submission? *

- ○ Yes
- ○ No

Explain where the cost variances are and the reason for the variance *

Have you provided an independent Quantity Surveyor's cost estimates for this proposal? *

- ○ Yes - attached
- ○ No

Please attach quotes and/or supporting documentation below. For construction / refurbishment projects > $0.5m, an independent (of architects or planners) quantity surveyor cost estimate is required.

How has the project cost been estimated? *

Confirm that all installation, and associated infrastructure services and connection / upgrade costs are included? *

- ○ Yes - attached
- ○ No

Please attach quotes and/or supporting documentation below. For construction and refurbishments, include confirmation (preferably from consultant) that building services (power, water, Heating Ventilation Air Conditioning (HVAC) services, ICT) have sufficient capacity to cater for the new demand.

What other costs are expected and how will they be funded? *

Please confirm the below are considered in the cost estimates

Decant of patients, services or staff *

- ○ Yes
- ○ No

Provide details *

If yes, provide details of decant plan. If no, provide details of why it is not applicable.

Operational impacts / staging requirements *

- ○ Yes
- ○ No

Provide details *

If yes, provide details of staging plan. If no, provide details of why it is not applicable.

Requirements for temporary / rental facilities (e.g. temporary CSSD, temporary staff accommodation, staff amenities / facilities etc) *
- ○ Yes
- ○ No

Provide details *

If yes, provide details of planned arrangements. If no, provide details of why it is not applicable.

Hazardous materials *
- ○ Yes
- ○ No

Provide details *

If yes, provide details of the hazardous materials. If no, provide details of why it is not applicable.

Have you included a make good allowance *
- ○ Yes
- ○ No

Provide details. *

If yes, provide details of what is included.

Are you seeking funding for External Consultant / External Project Management cost in your Total Project Cost Estimate? *
- ○ Yes
- ○ No

If yes, what is the cost estimate that is included in your Total Project Cost Estimate? *

$

Must be a dollar amount.

Provide details. *

Contingency

Please advise the total contingency amount included in your Total Project Cost Estimate *

$

Please provide the amount of contingency allowance, and attach supporting documentation below. Ensure this is included in your overall project cost.

Please tick all the levels of contingencies included in your cost estimate *

☐ Design Contingency
☐ Construction contingency allowance
☐ Escalation allowance
☐ Other:

Design Contingency (%) *

Must be a number and between 0 and 100.

Please describe why you have included Design Contingency and how it will be managed *

Word count:
Must be no more than 100 words.

Construction contingency allowance (%) *

Must be a number and between 0 and 100.

Please describe why you have included Construction Contingency allowance and how it will be managed *

Word count:
Must be no more than 100 words.

Escalation allowance (% or $ amount) *

Please use % after the number if you are providing a percentage and $ before the number if you are providing the contingency amount.

Please describe the Escalation allowance, timeframe and how it will be managed *

Word count:
Must be no more than 100 words.
Please also specify the duration of the escalation allowance included.

Any other contingencies, risks or allowances *

Please use % after the number if you are providing a percentage and $ before the number if you are providing the contingency amount.

Please describe why you have included these contingencies, risks or allowances and how they will be managed *

Word count:
Must be no more than 100 words.

Supporting documentation

Please attach independent quotes and/or Cost Plan, quantity surveyor reports, consultancy estimates, and any other documentation to support the financial information provided above. Refer to 'Submission Requirements' on the RHIF Guidelines here.

Please attach evidence, quotes, and any supporting documentation *
Attach a file:

Please ensure that all files are clearly named so as to be easily identifiable. Individual file size cannot be more than 25 MB.

Project Schedule

* indicates a required field

Assuming an indicative funding announcement by 31 January 2024, please provide a project schedule, listing estimated dates for key milestones such as procurement, contact award, practical completion.

Please attach a Gantt chart or project timeline if available. Please estimate all Milestones.

For Stream 2 funded projects from RHIF 22-23 reapplying, some of these milestones could have already been completed. In that case, the milestones can be back-dated.

Anticipated completion date for Milestone 2 – Timeframe to Submit Project Plan *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 3 – Completion of Schematic Design and Cost plan C2 *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 4 – Completion of Detailed Design and Cost plan D *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 5 – Construction contract (or purchase order) signed *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 6 – Construction completed *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 7 – Operations Commence *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 8 – Submit final Project Completion report *

Must be a date and no earlier than 31/1/2024.

Assuming an indicative funding announcement by 31 January 2024, please provide a project schedule, listing estimated dates for key milestones such as procurement, contact award, practical completion.

Please attach a Gantt chart or project timeline if available. Please estimate all milestones.

For Stream 2 funded projects from RHIF 22-23 reapplying, some of these milestones could have already been completed. In that case, the milestones can be back-dated.

Anticipated completion date for Milestone 2 – Completion of procurement of scoped works *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 3 – Executed contract/laying of purchase order and estimated date of delivery *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 4 – Installation/Commissioning and fully operational *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 5 – Final report and acquittal *

Must be a date and no earlier than 31/1/2024.

Assuming an indicative funding announcement by 31 January 2024, please provide a project schedule, listing estimated dates for key milestones such as procurement, contact award, practical completion.

Anticipated completion date for Milestone 1 – Executed contract/laying of purchase order (engagement of consultants) *

Must be a date and no earlier than 31/1/2024.

Anticipated completion date for Milestone 2 – Final report and acquittal *

Must be a date and no earlier than 31/1/2024.

Assessment Criteria

* indicates a required field

1: Improved patient experience quality of care *

Word count:
Must be no more than 250 words.
Provide a short description of how this proposal will result in improved patient experience & quality of care (eg. Improved access to care, Reduced incidence of patient harm, Increased patient satisfaction).

2: Increased system efficiency and enhanced service capacity *

Word count:
Must be no more than 250 words.
Provide a description of how this proposal will increase system efficiency (eg. Increased system throughput, Reduction in reactive maintenance expenditure).

3: Improved workforce experience and safety *

Word count:
Must be no more than 250 words.
Provide a description of how this proposal will improve workforce experience and safety (eg. Increased workforce satisfaction, Reduction in health sector job vacancies). Provide evidence of safety, quality, regulatory issues or standards non-compliance. Provide copies of PIN notices or adverse audits to support the case for the proposal, if applicable.

4: Improved regional communities and economies *

Word count:
Must be no more than 250 words.
Provide a description of how this proposal will strengthen regional communities and economies (eg. Decreased distance to treatment, Increased employment in health sector). Include supporting data to summarise current problems and predicted improvements where possible.

Responses to the following questions will not be scored but will form part of the formal assessment.

5: Project risks, mitigation and dependencies *

Word count:
Must be no more than 250 words.
Describe key risks and mitigation activities to ensure you meet project milestones and delivery, e.g., technical difficulties, procurement, local supply issues, consultants, etc. Please describe any key dependencies that may impact upon the delivery of this project. Attach additional documentation as required.

6: Governance and project oversight - Please describe the governance framework, including oversight bodies and meeting regimes that you will establish to support the delivery of the project. *

Word count:
Must be no more than 250 words.
This should include details of your Executive Steering Committee, Project Control Group, Working team, etc. to oversee proposed project development, implementation, monitoring and reporting.

7: Resourcing, roles and responsibilities - Have you assigned a person to manage this project? *
- ○ Yes
- ○ No

Please provide Full Name of the Project Lead *

This person will be the key contact and will be responsible to successfully deliver the project. Please note management fees (internal staff) cannot exceed 1.5% of the total build cost.

Email address of the Project Lead *

Must be an email address.

Please provide details of the Project Lead's experience similar to this proposal (e.g successful delivery of similar projects - details, dates, duration, budgets, scope, etc.) *

Word count:
Must be no more than 250 words.

What is your plan to manage this project? *

Supporting documentation

- Please attach Project Management Plan for projects above $0.5m
- Supporting documents for assessment criteria 1-7

Refer to 'Submission Requirements' on the RHIF Guidelines here.

Attach supporting documents *
Attach a file:

File names should clearly indicate criterion number and document title. Individual file size cannot be more than 25MB.

Supporting documentation

- Supporting documents for assessment criteria 1-7

Refer to 'Submission Requirements' on the RHIF Guidelines here.

Attach supporting documents

Attach a file:

File names should clearly indicate criterion number and document title. Individual file size cannot be more than 25MB.

Aboriginal Community Controlled Health Organisation

* indicates a required field

Details of submission

Please explain the project as answers to the below questions. Once this application has been submitted, the RHIF Team will work with you to understand the project in more detail. Please reach out to us via RHIF.Applications@health.vic.gov.au for any assistance.

Project Title *

What is the issue or problem, and why is funding required? *

Word count:
Must be no more than 50 words.
Succinct description to characterise the nature of the project. Examples: "Replace CT scanner to reduce waitlist times and enhance service delivery" // "Construct a new Community Health Centre to deliver primary care services, including GP, dental, physio, OT, and other Allied Health and Clinical services" // "Renovate reception and waiting area, and install swipe entry doors to improve safety and amenity for patients and staff" // "Upgrade of essential facilities and equipment including nurse call system, fire detection system, ICT server, floor coverings, patient beds, theatre suction system, and washer disinfector."

What existing infrastructure will be fixed/repaired/replaced? *

Word count:
Must be no more than 150 words.
What will this funding be used for? Examples: roof repair, air-conditioning upgrade, consulting room upgrades, dental facility upgrade.

What is the risk and impact to the health service if funding is not provided? *

Word count:
Must be no more than 150 words.
Risk to or impact on clients, delivery of health services, delivery of quality care, accreditation, health and safety, staff wellbeing and/or productivity etc.

Indicative Total End Project Cost (excluding GST) *

$

Must be a dollar amount.
What is the total estimated cost of your project? This includes but not limited to building costs, consultant costs, Authority costs, FFE etc.

Project Timeline: Indicative dates for the delivery of the project

Project Commencement Date *

Must be a date and between 31/1/2024 and 30/6/2024.

Project Completion Date *

Must be a date and no earlier than 31/1/2024.

Other commentary

Use this section to provide any further commentary to support your submission.

Supporting documentation

Please attach documentation to support your proposal. Valid supporting documentation include:

- Detailed Design Drawings.
- Project Management Plan (mandatory requirement for construction or refurbishment projects in excess of $0.5 million)
- Quantity Surveyor Plan
- Builder Quotation / Supplier Quotation
- Schedule of specialist medical equipment (including cost estimates for individual items)
- Procurement framework plan for purchases
- Photographs of existing conditions and non-compliance where appropriate
- Independent Review, Audit or Noncompliance Reports, if appropriate.

Please refer to the RHIF Guidelines and FAQs here.

Attach supporting documents
Attach a file:

Approval Certification

* indicates a required field

Applicant Checklist

Please check that all relevant items below have been completed. Individual file size cannot be more than 25MB. *

☐ Project Management Plan attached for proposals over $0.5 million. The PMP should include where appropriate links demonstrating alignment with regional and Health Service strategic plans, including Health Campus Master Plans. It needs to clearly set out Scope, Deliverables, Benefits, Timelines, Cost Plans, Procurement Strategy, Project Governance Structure (project organisation charts) and Risk Assessments.
☐ Applications less than $0.5 million should include information on scope, governance structure, timelines, deliverables, benefits (attach Project plan if available).
☐ Design drawings, Master Plans, Functional Plans, elevations.
☐ Photographs of existing conditions and computer drafted imagery or artists impressions of future state.
☐ Independent quotes and cost plans attached.
☐ Independent reports (audits, non-compliance reports or improvement notices) highlighting risk and / or compliance issues including recommendations and proposed solutions.
☐ Responses to the Weighted Evaluation Criteria attached.
☐ Independent audits, non-compliance reports risk reports recommendations and proposed solutions.
☐ Risk registers.
☐ Confirmation of support from Regional CSI.

Certification

Privacy

We pledge to respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*. Our privacy statement is available for viewing.

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

I certify that the Chief Executive Officer (or equivalent) has endorsed this application and the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I Agree *
○ Yes

CEO / Head of Organisation *
Title | First Name | Last Name

Position title *

Email *

Phone Number *

Must be an Australian phone number.
Use area code e.g. (03) 9999 6666 or +61 for mobile.

Is somebody other than the CEO submitting this application? *

- ○ Yes
- ○ No

Please provide details of the person authorised by the CEO to submit this application.

Name of person authorised to submit application *

Title | First Name | Last Name

We may contact you to verify that this application is authorised by the applicant organisation.

Position title *

Email *

Must be an email address.

Primary Phone Number *

Must be an Australian phone number.
Use area code e.g. (03) 9999 6666 or +61 for mobile.

Applicant Feedback

Before you review your application and click the SUBMIT button, please take a few moments to provide some feedback.

Please indicate how you found the online application process:

- ○ Very Easy
- ○ Easy
- ○ Neutral
- ○ Difficult
- ○ Very Difficult

Approximately how many hours in total did it take to complete this application?

Do you have any suggestions for improvements and/or additions to the application process/form that you think we should consider?