



Australian Government

Department of Health and Ageing

**Council of Australian Governments' (COAG)
Telephone Counselling, Self Help and Web-based
Support Programmes measure**

2012-13 to 2014-15

Grant Guidelines

**for the expansion of the Telephone Counselling, Self
Help and Web-based Support Programmes measure**

and

**Information for Applicants wishing to apply for
funding under this measure**

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1. Introduction

1.1 Programme Background

Essentially, e-mental health involves the delivery of mental health services by telephone, mobile phone and through online applications that utilise technology to extend the reach of mental health service support. E-mental health services can range from provision of health information, virtual therapy applications and games, and real-time interaction with clinicians trained to assist people experiencing mental ill health.

The Australian Government has provided \$70.4 million over six years from 2006-07 to 30 June 2012 under the Council of Australian Government's (COAG's) *Telephone Counselling, Self Help and Web-Based Support Programmes (Teleweb)* measure to non government organisations to provide mental health support services. It includes funding for general psycho-social telephone helplines, online counselling, web-based self help, peer support resources, self-directed online treatment modules and therapist-assisted treatment services. These services supplement or substitute for existing face-to-face services for individuals with common mental health disorders or those in psycho-social crisis.

The Teleweb Programme is fundamental to the establishment of e-mental health as a legitimate service option under Australia's primary mental health system. An independent evaluation of Teleweb projects provided to the department in December 2010 indicated that ongoing support for the programme would provide an evidence base to build clinician and consumer confidence in e-health interventions, establish effective approaches to support uptake of these types of tools and provide an opportunity to test the funding, policy and service implications of e-health interventions as the range of programmes expands.¹

The following organisations currently receive funding under the Teleweb measure: Lifeline Australia (Lifeline); Boystown (for Kids Helpline); Inspire Foundation; Australian National University's Centre for Mental Health Research; Swinburne University's National e-Therapy Centre; Saint Vincent's Hospital's Clinical Research Unit for Anxiety and Depression and the Black Dog Institute. Further information about current projects can be found at:

<http://www.health.gov.au/internet/mentalhealth/publishing.nsf/Content/funding-telephone-counselling-self-help-web-based-support-programs-1>

Available funding

Approximately \$15.4 million (GST Exclusive) over the three years, 2012-13 to 2014-15 (as indicated in the table below) has been allocated for this one-off open competitive funding round.

2012-2013	2013-2014	2014-2015
\$5.1 million	\$5.1 million	\$5.2 million

¹ Healthcare Planning & Evaluation Pty Ltd, Evaluation of the Council of Australian Governments' (COAG) Mental Health Initiatives: Telephone Counselling, Self Help and Web-based Support Programme

This funding round will enable the Australian Government to support appropriate and innovative projects that keep pace with advances in technology in this field. It is expected that there will be variety in scope of project activities and the funding amounts requested. Projects may include, for example, crisis counselling, peer support initiatives and projects that complement or fill a gap in existing online mental health services.

This funding round does not preclude applications from organisations already funded under this measure.

1.2 Programme Purpose, Scope, Rationale, Benefits, Objectives & Outcomes

The purpose of the Teleweb Programme is to provide evidence-based e-mental health support, including peer support projects and telephone crisis counselling to Australians with high prevalence, low severity disorders who are not accessing support or treatment, and those who are experiencing psycho-social crisis. This group is over-represented in a broader group comprising the two thirds of Australians with a mental health disorder who currently do not access services.

Rationale

Web-based Teleweb services are available ‘en masse’ and are disseminated easily via the Internet in contrast to face to face services. They are able to deliver confidential, flexible, individually tailored mental health support that may not be achievable in the same time frame via other treatment modalities. Access to these services will be greatly enabled by the roll out of the National Broadband Network through increased access to the internet and faster speeds allowing for greater linkages and real time interactive online communication.

The internet is increasingly becoming an accepted medium for mental health service delivery and the efficacy of online mental health interventions has been well supported and is increasingly being recognised as an important and powerful complement to traditional phone based and face-to-face services.

According to Christensen et al, e-mental health can address non-use of existing mental health services in several ways²:

- E-mental health services offer consumers confidentiality and enable contact with services and support in ways that are less threatening or difficult (something that is important because of the perceived stigma associated with contacting mental health services). Contact with e-mental health services can occur at a pace set by the consumer, and consumers can explore information and service options in a self-directed way.
- E-mental health services enable consumers more flexible access to services through preferred methods of contact, i.e. contact can be made from home, and in ways that do not require disclosure to friends or family members.
- Immediacy of access is especially important for delivery of services to people

² Christensen, H., Proudfoot, J., Andrews, G., Klein, B., Kavanagh, D., O’Neil, D., Woodward, A., Young, L., Graham, K. (2009) E-Mental Health: A 2020 vision & Strategy for Australia

from rural and remote locations, and this feature will have substantially increased impact as broadband becomes universally available.

- Access at low cost and in flexible, non-stigmatising ways is particularly important for people with high-prevalence, low-severity disorders, who are over-represented in the group who currently are not receiving treatment.
- E-mental health services can also be used as an adjunct to face-to-face treatment or as a guide for treatment sessions, ensuring high-fidelity, evidence-based care, and building the capacity of practitioners. E-mental health services can reach consumers in rural, regional and remote locations who are often severely underserved.

Benefits for consumers

As Teleweb services can be accessed without referral from a GP or other health professionals, the Programme has the potential to improve access for harder to reach groups such as those living in rural and remote areas, young people, and people currently not accessing services due to anonymity concerns, chronic illness, carer responsibilities and/or financial or transport barriers. There are considerable benefits for consumers who prefer to manage their mental health problems in a self-directed way, and for those who wish to learn more about mental health and well-being for themselves and others. Additionally, these services are offered at low or no cost to consumers.

Primary health care benefits

Teleweb services are contributing to the development of a stepped model of primary mental health care in which consumers are able to access a range of integrated services from prevention through to referral to specialist or hospital services. They enable better targeting of face-to-face psychological support to those with the greatest need, and provide the additional option of using e-mental health services as an adjunct in the professional care of those requiring face-to-face support. The Teleweb Programme also responds to the needs of health professionals and clinicians seeking to refer their patients to appropriate support. In cases of serious disorders such as psychosis or severe depression, Teleweb services refer individuals to other more appropriate treatment options such as face-to-face professional treatment.

Objectives & Outcomes

The funding is being provided to further objectives of the Teleweb Programme. In particular, the Programme will support activities which aim to:

- improve mental health outcomes for Australians;
- improve the reach and utilisation of e-mental health supports, particularly in rural/remote areas and with other hard to reach groups such as young men and Aboriginal and Torres Strait Islander people;
- provide cost-effective, high quality, effective, safe and ethically sound services that protect the privacy of consumers;
- provide evidence-based services that respond to current need, and build consumer confidence in e-mental health support;
- increase ‘mental health literacy’ including knowledge about mental health conditions and how to access services;

- utilise advances in technology to support innovative approaches to mental health care;
- respond to the needs of health professionals/clinicians seeking to refer their patients;
- establish closer links with primary care, and build GP confidence in the benefits of e-mental health;
- reduce the need for expensive mental health treatments in the future by promoting prevention and early intervention approaches;
- generate data to assess the usage and effectiveness of Teleweb projects for the purposes of review and subsequent planning for future Programme directions.

1.3 Policy context

Mental health in Australia

The 2007 Australian Bureau of Statistics' *National Survey of Mental Health and Wellbeing (the ABS Survey)* indicates that almost half (45% or 7.3 million Australians) experience a mental disorder at some time during their lives. One in five people aged 16 to 85 years experiences one of the common forms of mental illness (such as anxiety or a depressive disorder) in any one year. Prevalence rates vary across the lifespan, with the highest rates in the early adult years. This is where e-mental health is expected to make a difference.

E-mental health services are primarily aimed at people experiencing mild to moderate mental ill-health, particularly those who are experiencing anxiety or depression. The ABS Survey can be accessed via

<http://www.health.gov.au/internet/mentalhealth/publishing.nsf/content/national-surveys-1>

Current mental health statistics³

17% or 3.8 million Australians are estimated to be affected by mental illness in any one year—meaning that they experience symptoms at diagnostic levels for either brief or extended periods. This excludes dementia and alcohol/drug –related disorders, except where these are concurrent with a mental disorder.

A further 15% of the population has experienced a mental disorder previously in their lives but not had symptoms over the past 12 months at a level that would warrant a diagnosis.

Anxiety disorders and depression are the most common mental health disorders, affecting approximately 9% and 7%, respectively, of the adult population each year (note—these disorders often occur in combination with other disorders). These 'high prevalence' illnesses include diverse conditions, for example, post traumatic stress disorder, panic disorder, agoraphobia, obsessive compulsive disorder and depression. These conditions have different treatment requirements and outcomes.

About 680,000 Australians are affected by severe mental illness. Of this group, 41% is made up of people with severely disabling forms of anxiety and depression. Other

³ 'Supplementary DoHA analysis of the 2007 National Survey of Mental Health and Wellbeing' (ABS cat: 4326.0)

disabling disorders such as anorexia nervosa are also included as severe mental illnesses. Mental illness includes other less common conditions such as schizophrenia and bipolar disorder (sometimes referred to as ‘manic depression’). Together these severe disorders affect about 1% of the adult population in any one year, and 2% over the course of a lifetime.

There is a high level of co-morbidity with alcohol and illicit drug misuse in adults with severe mental illness. 39% of adults, who have a severe mental illness, or about 260,000 individuals, are also affected by an alcohol or drug-related mental disorder.

Prevalence rates vary across the lifespan and are highest in the early adult years, the period during which people are usually establishing families and independent working lives.

The Health Reform Agenda

E-mental health services operate in a wider health system which is undergoing change. The *National Health Reform Agreement 2011* provides for a range of important reforms in public hospital funding and a strengthened primary health care system. The Government is also committed to further investment under *National Mental Health Reform* in the 2011-12 budget. This investment provides additional services including a range of services for people with complex mental health needs. The e-mental health sector is expected to take account of these changes in a system that is moving to become closely integrated with new and expanded primary care and specialist mental health services, as well as with the existing network of providers who come in contact with people experiencing mental ill health—general practitioners (GPs), not-for-profit mental health and substance abuse services and home support service providers, amongst others. Establishing links with these services will ensure that health professionals and others include e-mental health in their thinking and refer people to e-mental health options, whilst at the same time ensuring that consumers can readily find their way to the face-to-face services they need.

National e-Mental Health Strategy

E-mental health is a rapidly growing area that will benefit from a planned and organised expansion. The National e-Mental Health Strategy (the Strategy), is currently being developed with advice from the department’s e-Mental Health Expert Advisory Committee. This Strategy will provide guidance in scaling up existing services and new technologies so that a mature e-mental health service system is built and maintained, offering high quality services to consumers and carers in an online environment.

The e-mental health system envisaged will also be closely integrated with wider e-health initiatives including, in the future, personally controlled electronic health records as an option for consumers. The e-mental health environment will be consumer centred and responsive to input from users to ensure that ultimately it helps and supports the well-being of individual users. Under the Strategy it is expected that services will be innovative and take advantage of the National Broadband Network and the convergences of various platforms (fixed line, mobile and wireless).

Measures to improve e-mental health services

In addition to the Teleweb Programme, there are currently three specific Government measures that will result in significant improvement in access to evidence based e-mental health information, services, and support: a National Mental Health Portal (the Portal); an e-mental health Virtual Clinic (the Virtual Clinic); and a related Central Support Centre.

Mental Health Portal

The Australian Government has provided funds to the National Health Call Centre Network (NHCCN) Ltd for mental health activities and has agreed \$12 million will be allocated to develop a national online e-mental health portal (the Portal). The Portal will provide a single gateway for users to the existing teleweb services and provide a platform for new programs as they are developed and are able to demonstrate their effectiveness. These online psychological therapy programs range from self-directed programs to those with real time therapist assistance. The portal will be well signposted and provide a user friendly entry point to these programs and phone based crisis support services as well as information. Development of the Portal is being progressed with advice from the Department's e-Mental Health Expert Advisory Committee. It is expected to commence operations on 1 July 2012. Development of the Portal will continue beyond that date and will include new functionality, programs and information.

Virtual Clinic

Under the Australian Government's 2010 election commitment – *Mental Health: Taking Action To Tackle Suicide* funding is being provided to 'Expand Online Mental Health Counselling Services' by establishing a Virtual Clinic. The Virtual Clinic services will complement face-to-face mental health support. Therapists will be supported by allied mental health workers and psychologists, and will have the capacity to escalate care in high needs cases. In addition to self help support, clinician assisted online counselling will be delivered to people with high prevalence mental disorders via online cognitive behavioural therapy (CBT) programs, which can be self-directed, therapist-assisted, or a mixture of both. The Virtual Clinic is expected to commence operations in July 2012. Further information on the e-mental health strategy, including the Virtual Clinic, is available at <http://www.health.gov.au/internet/ministers/publishing.nsf/Content/mr-yr11-mb-mb103.htm>

Central Support Centre

An e-Mental Health Central Support Centre (CSC) will offer advice on clinical governance and play an advisory role in respect of the services available through the Portal. The CSC will provide advice on:

- quality assurance on services and information that will be available through the portal;
- the promotion of online mental health therapy services within primary mental health care; and
- e-based specialised mental health training and support for Aboriginal Health Workers and clinicians working with Aboriginal and Torres Strait Islander people.

Teleweb Linkages with e-Mental Health measures

In this context, it is evident that the Teleweb projects provide a suitable foundation for the suite of services to be linked to the Portal, which is scheduled to commence on 1 July 2012.

It will be important for funded Teleweb organisations to plan to allow consumers the option of linking their Teleweb program activities to their PCEHRs in the future.

Further information on PCEHRs is available at

<http://www.health.gov.au/internet/budget/publishing.nsf/Content/budget2010-hmedia09.htm>

Other relevant Telephone and Web-based Supports

eheadspace is a telephone and web-based support service that provides free, confidential and anonymous counselling services to young people between the ages of 12 and 25 years with, or at risk of developing, a mild to moderate mental illness. The service also provides referrals to other appropriate services, including mental health, alcohol and drug, social and vocational services.

The service commenced in the second half of 2011, and is an alternative approach for young people to access support and help. The service uses innovative online communication tools that many young people have indicated is a preferred way of communication and accessing support services. This program provides greater access to young people in harder to reach areas, such as more regional and remote parts of Australia. Further information on **eheadspace** is available at

<http://www.eheadspace.org.au/>

The Australian Government, through the department, also funds telephone and web-based services with a specific focus on drug and/or alcohol issues. For example, the Turning Point Alcohol and Drug Centre operates a web-based counselling service which provides 24 hour, seven day a week (24/7) online interventions, *CounsellingOnline* and *JustAskUs*, for illicit drug users, their families, areas and members of the community, particularly those in rural and regional areas of Australia. Further information about these interventions can be found at:

<http://www.counsellingonline.org.au/en/> (*CounsellingOnline*), and <http://www.justaskus.org.au/> (*JustAskUs*).

The Australian Drug Information Network (ADIN) is a web-based national alcohol and other drugs information service that disseminates drug information to the general community, including parents, schools, health professionals and health care facilities. Further information on this service can be found on the ADIN website at:

<http://www.adin.com.au/>

1.4 Roles and responsibilities

The *Grant Program Process Flowchart* on page 26 of these guidelines outlines the roles and responsibilities of each party. Crucial roles and responsibilities in this funding process are described, as follows:

Applicants

Organisations applying for funding under the Teleweb Programme must be prepared to meet the costs associated with developing and lodging their applications. Applicants should ensure that all information they provide is accurate.

The department encourages applications from individual organisations, partnerships or consortia to deliver activities under the Teleweb Programme. However, the department will only enter into contractual arrangements with a single legal entity under this Programme. Where two or more entities seek funding as a consortium, a member entity or a newly created entity must be appointed as the lead member, and only that organisation will enter into any subsequent contractual relationship with the department. The lead entity must be identified in any application for funding and that application should identify all members of the proposed consortium.

Department of Health and Ageing Project Team

The Department of Health and Ageing Project Team will be responsible for the development and dissemination of all application documentation under the Teleweb Programme and for ensuring that documentation is in accordance with Programme aims, objectives and outcomes. The Project Team will be responsible for notifying Applicants of the outcomes of the funding process, responding to queries in relation to the process, and resolving any uncertainties that may arise in relation to application requirements.

The Project Team will undertake all assessment processes and funding arrangements. Specifically, this will include activities such as:

- Making clear recommendations to the Delegate:
- developing funding agreements;
- monitoring the performance of projects to ensure the conditions of the contractual arrangements are met;
- assessing performance and financial reports and undertaking follow up activity, as necessary;
- making payments on acceptance of milestone reports as specified in the contractual arrangements;
- arranging an overall review of the Teleweb Programme in the final year of this funding (2015); and
- providing feedback to funded organisations on the overall project performance following conclusion of activities.

Department of Health and Ageing Assessment Panel

All applications will be assessed by a Department of Health and Ageing Assessment Panel. The panel will consist of officers from the Mental Health Promotion Section. Further information on the assessment criteria to be used in this process is available at Section 6 of these guidelines.

Funding Approver

The funding Approver for the Teleweb Programme is the Assistant Secretary, Mental Health Early Intervention and Prevention Branch of the Department of Health and Ageing.

Funded Applicants

Successful Applicants are responsible for the efficient and effective delivery of services in accordance with the obligations contained in funding agreements entered into under the Teleweb Programme. Specifically, they are responsible for:

- ensuring they meet the specifications of their funding agreements;
- ensuring the project is managed in a cost effective and efficient manner;
- maintaining contact with the department and advising of any emerging issues that may impact on the success of the project;
- identifying and documenting risks and the appropriate control strategies;
- reporting on project performance and expenditure in accordance with contractual obligations; and
- assisting with overall programme evaluation activities, as necessary.

1.5 Anticipated key dates

The following table outlines the anticipated timeline for the programme:

Milestones	Anticipated Dates
Guidelines Published	26 March 2012
Applications Open	26 March 2012
Applications Close	15 May 2012
Assessment and Decision	12 June 2012
Funding agreements executed	22 June 2012
Mandatory reporting (Minchin/Murray)	June 2012
Programme Ends	30 June 2015

2 Eligibility**2.1 Who is eligible to apply for funding?**

The following organisations are eligible to apply for funding:

- Existing service providers under the Teleweb Programme;
- University Faculties of Mental Health;
- Mental health research institutions;
- Mental Health provider organisations with the infrastructure and capacity to translate appropriate programs into an online environment—including organisations representing the mental health of Aboriginal and Torres Strait Islander people or other cultural minorities; and
- Collaborations including at least one of the above categories.

2.2 What is eligible for funding?

Applicants for funding under the programme will be considered for funding if project activities:

- provide services to help prevent or treat people with high prevalence, low intensity mental health disorders or psycho-social crisis using telephone counselling or web-based projects;
- have a demonstrable link to the evidence of current mental health research;
- fill gaps in relation to services already being implemented to support people with high prevalence mental health disorders or those experiencing psycho-social crisis;
- build on or complement, rather than duplicate, the activities of existing Teleweb services;
- engage a specific population group in an innovative way that is not being utilised by existing Teleweb services;
- have a high probability of improving mental health outcomes by addressing the long term impacts of mental health problems at an early intervention stage; and
- are able to demonstrate value for money.

2.3 What is not eligible for funding?

Applications for funding should not include the following kinds of project activities:

- activities that duplicate existing resources or initiatives funded under the Teleweb programme or other Australian Government funded online programs;
- activities with no demonstrable link to the evidence of current research into mental health treatment and support;
- primary research activities; and
- activities that require Commonwealth investment in capital works, assets and infrastructure.

Potential applicants are advised that, for this Programme, the Commonwealth will not fund capital works nor assets such as cars.

2.4 Funding limits

Within the available funding envelope there are no funding limits for individual proposals. Applicants are nevertheless expected to develop budgets realistically, with a view to demonstrating value for money, and avoiding the extremes of both over-budgeting and under-budgeting. Any service charges to be passed on to consumers should be also documented in terms of value for money for both the Commonwealth and consumers.

2.5 Partnerships/consortia

If more than one organisation is to be involved in the project, the contact details of the proposed partners must be provided, together with appropriate letters of consent. In this case, one organisation must be identified as the lead organisation and an authorised representative of the lead organisation must sign the Application Form.

2.6 Time frame

All projects for this one-off open round should be completed within three financial years (2012-13 to 2014-15). Funding will be available from 1 July 2012 and is to be expended by 30 June 2015.

Please note that retrospective items/activities will not be funded under the Teleweb Programme.

3 Probity

The Australian Government is committed to ensuring that the process for providing funding under the Teleweb Programme is transparent and in accordance with published Guidelines.

3.1 Conflict of interest

A conflict of interest may exist, for example, if the Applicant or any of its personnel:

- has a relationship (whether professional, commercial or personal) with a party who is able to influence the application assessment process, such as a department staff member;
- has a relationship with, or interest in, an organisation, which is likely to interfere with or restrict the Applicant in carrying out the proposed activities fairly and independently; or
- has a relationship with, or interest in, an organisation from which they will receive personal gain as a result of the granting of funding under the Teleweb programme.

Each Applicant will be required to declare, as part of their application, existing conflicts of interest or that to the best of their knowledge there is no conflict of interest, including in relation to the examples above, that would impact on or prevent the Applicant from proceeding with the project or any funding agreement it may enter into with the Australian Government.

Where an Applicant subsequently identifies that an actual, apparent, or potential conflict of interest exists or might arise in relation to this application for funding, the Applicant must inform the department in writing immediately.

The department will ensure that all members of the Departmental Assessment Panel for the Teleweb Programme provide a statement detailing any relationship they may have with Applicants. All panel members will be required to sign a Deed of Confidentiality/Conflict of Interest form.

3.2

Confidentiality and Protection of Personal Information

Each Applicant will be required to declare as part of their application, their ability to comply with the proposed contractual arrangement to be entered into with the Australian Government.

The Protection of Personal Information Clause requires the Participant to:

- comply with the *Privacy Act (1988)* ('the Privacy Act'), including the 11 Information Privacy Principles (IPPs), as if it were an agency under the Privacy Act, and the National Privacy Principles (NPPs);
- refrain from engaging in direct marketing (s 16F of the Privacy Act), to the extent that the NPP and/or s 16F apply to the Participant; and
- impose the same privacy obligations on any subcontractors it engages to assist with the Project.

The Confidentiality Clause imposes obligations on the Participant with respect to special categories of information collected, created or held under the Agreement. The Participant is required to seek the Commonwealth's consent in writing before disclosing Confidential Information.

Further information can be found in the Standard Funding Agreement as an attachment to the Invitation To Apply.

4 Grant Application Processes

Access to funding under the Teleweb Programme will be available via an open competitive funding round to be advertised on the department's website at www.health.gov.au in early 2012. Eligible applications will be assessed against the selection criteria set down for the Programme and then prioritised against competing, eligible applications for the available funding.

Potential Applicants can seek clarification regarding the application process by emailing the departmental Project Officer at teleweb@health.gov.au.

4.1 How to Apply

Obtaining an application

Applicants may obtain an application form for an open competitive grant round for projects to support the Teleweb Programme, from the Tenders and Grants webpage of the department's website at

<http://www.health.gov.au/internet/main/publishing.nsf/Content/Listing+of+Tenders+and+Grants-1>

Interested parties are advised to formally register on the department's website and immediately download funding documentation, rather than obtaining them via a third party. The online registration process ensures that interested parties can be notified if an addendum is issued by the department.

The full suite of application documents to be downloaded from the department's website will include:

Programme Guidelines; Application Form for this grant funding round; the department's Standard Funding Agreement; and IT Security Audit form.

Potential Applicants will be given five weeks between advertising the competitive funding round and the closing date for applications.

4.2 Application requirements

Applications for funding under the Teleweb Programme must be submitted by courier or hand delivered to the department's Approach to Market Inbox by 2.00pm Local Canberra Time (AEST) on Tuesday 15 May 2012.

All Applications are required to:

- Meet eligibility requirements outlined in Section 6 of these Guidelines
- Provide details and responses in all required fields in the application form including:
 - Applicant's Details;
 - Address all selection criteria;
 - Acknowledgements; and
 - Declaration.

To assist with the assessment of an application, clarifying information may be requested by the department. Applicants will be contacted by the department and notified by email where this is required.

Applications should include:

- One (1) A4 signed original Application;
- Three (3) A4 copies of the Application; and
- One (1) copy of the Application in Word 3 format on a USB drive.

There is no limit on the number of applications that may be submitted by an individual organisation.

Address details

Applications must be submitted by courier or hand-delivered to:

**Telephone Counselling, Self Help and Web-based Support Programmes
measure - funding round 2012-13 to 2014-15 - Invitation To Apply**

Department of Health and Ageing
Approach to Market Inbox
Sirius Building
Foyer, Ground Floor
23 Furzer Street
WODEN ACT 2606

Note: The Approach to Market Inbox is accessible for deliveries between the hours of 8.30 am and 5.00 pm Monday to Friday (public holidays excepted). Applications

must not be hand delivered to the Security Guards. Applications **MUST** be lodged in the Approach to Market Inbox, which is situated in the foyer of the department's Sirius Building, by the Applicant or authorised representative.

4.3 Late Applications

The department will accept your application if it is late as a direct result of mishandling by the department. In all other circumstances, in the interests of fairness, the department will take into account the degree of lateness, whether the cause of the lateness was beyond the Applicant's control and such other facts that it considers relevant. The department may also ask the Applicant to provide evidence to support any claims regarding the reasons for late submittal.

Applications received after the closing date will not be accepted for assessment without written agreement from:

Director
Mental Health Promotion Section
Mental Health Early Intervention and Prevention Branch
Mental Health and Drug Treatment Division

4.4 Contact Officer

All enquiries relating to the Invitation to Apply for Funding should be directed in writing to:

The Project Manager
Teleweb Funding Round 2012-13 to 2014-15
Email: teleweb@health.gov.au

5 Assessment

5.1 Assessment process

Those applications which do not satisfy the eligibility criteria may not be assessed. Based on the information provided, the Departmental Assessment Panel will undertake an evaluation of eligible applications against the selection criteria outlined below.

6 Assessment Criteria

6.1 Criteria

The selection criteria are the criteria against which all eligible, compliant applications will be assessed in order to determine their merits against the Teleweb Programme objectives. It is important that applications succinctly address all of the selection criteria and that evidence is provided to support any assertions made, including any current implementation of these methods within the organisation. Applications should address all of the selection criteria to be considered for funding.

CRITERION 1: DEMONSTRATED NEED

Applicants should demonstrate, through providing a justified business case, that the project addresses areas of significant need in relation to high prevalence/low severity mental health problems or psycho-social crisis. The project must be consistent with, and seek to draw on the findings of existing research into mental health.

Responses to Criterion 1 should refer to:

- the evidence base to support the project;
- how the project will fill an important gap in relation to existing early intervention or prevention projects in the area of e-mental health;
- how the project is expected to have a high probability of improving mental health outcomes of Australians with high prevalence, low severity mental health problems, or those with psycho-social issues.

CRITERION 2: THE PROJECT

This criterion has two components: Background/scope of the project (2A); and Project Methodology (2B).

2A: BACKGROUND/SCOPE OF THE PROJECT

For Criterion 2A Background/scope of the project, Applicants have the opportunity to demonstrate preparatory work undertaken prior to the development of the project plan and to describe the target group and scope of the project. Applicants are expected to demonstrate knowledge and awareness of other relevant services in the field of e-mental health and explain how the project will create linkages with primary health care.

Responses to Criterion 2A should include in the project plan:

- a description of the target population (including age-group, numbers expected to be involved in the project and other defining characteristics of the group);
- how the project takes into account and/or complements other existing projects;
- details of project collaboration (where relevant); and
- details of stakeholder consultation and stakeholder support for the project, or proposed stakeholder consultation.

Please note the following advice in relation to Criterion 2A—Background/scope of the project:

The proposed intervention should offer something new and highly relevant to supporting people with high prevalence mental health disorders or those experiencing psycho-social crisis. It should not duplicate previous or current activities.

It is important to acknowledge existing work that is relevant to your proposal; and to identify the potential for building on or complementing this work. Projects should not be expected to operate in isolation, and the development of appropriate collaborations and linkages to primary health care is encouraged.

2B: METHODOLOGY

For Criterion 2B Project Methodology, the vision and clarity of the methodology underpinning the project will be assessed with regard to clear explanation of the aim, objectives and supporting activities for the project within the nominated time frame. Sustainability beyond the period of grant funding is an important element of this assessment criterion.

The Project Methodology should include:

- an executive summary including project aim and objectives;
- a clear explanation of the proposed methodology and how this will be implemented in the project;
- a description of project activities and deliverables as designed to meet objectives and achieve outcomes;
- a table demonstrating coordinated activities within the proposed time frame;
- proposed arrangements for clinical governance within the project (where appropriate);
- a description of referral processes including the specific roles of relevant project personnel;
- proposed arrangements for an external evaluation;
- arrangements for promotion of the project and dissemination of project outcomes; and
- a plan for sustainability beyond the period of funding.

Please note the following advice in relation to Criterion 2B—Project Methodology:

The outcomes of the project should be measurable so that an external evaluation can establish whether the project has improved mental health outcomes for the target group. This may involve, for example, establishing base-line statistical information related to the target group before an intervention has been implemented, and comparing this with corresponding information which has been gathered after the intervention has been completed.

The evaluation of the project must be undertaken by an appropriate independent individual or organisation, and the proposed budget should include a costed item for this expenditure. The evaluation should not be interpreted as being equivalent to periodic internal reviews of staff and processes.

Responses to Criterion 2 should be consistent with the funding objectives of the Programme and with broader departmental and Governmental priorities, in particular the *Fourth National Mental Health Plan* which can be accessed at <http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-pubs-f-plan09>

CRITERION 3—ORGANISATIONAL CAPACITY

Applicants will be assessed according to their capacity to conduct the project to a high standard within the required time frame. As participation in the Government’s national online mental health portal is important and a key factor for the Teleweb Programme, Applicants will need to explain their capacity and commitment to provide relevant infrastructure and take all reasonable steps to support and facilitate this link with the Portal once it is established. Additionally, as it will be important to provide consumers of this project with the option of using their personally controlled electronic health record, Applicants should address how they intend to develop their capacity to provide this functionality over the project period (where it is appropriate to the proposed service).

Responses to Criterion 3 should include:

- name, address and curriculum vitae of Project Manager;
- two referee reports for the Project Manager (the individual **not** the organisation), in accordance with the template attached to the Funding Application document;
- names, addresses and curricula vitae of key project personnel;
- clear descriptions of proposed roles for all project personnel;
- strategies to replace key personnel who are unable to continue work on the project;
- details of project collaboration (where relevant) and proposed subcontracting arrangements;
- letters of support for the project from personnel nominated in the submission;
- evidence of satisfactory completion of comparable projects (including publication records) by the lead organisation;
- a statement indicating understanding of cultural, community and organisational sensitivities relevant to the target group of the project;
- a statement indicating the lead organisation’s ability and commitment to participating in, and contributing to, the implementation of the national e-Mental Health Portal which will commence operations in July 2012; and
- a statement indicating the lead organisation’s capacity to develop the infrastructure for linking consumers’ Teleweb records to their personally controlled electronic health records.

Please note the following advice in relation to Criterion 3 – Organisational Capacity

It is important to name and provide additional information on the person responsible for the overall management of the project (Project Manager). Information on the lead organisation should not be used to substitute for information on the Project Manager.

Strategies to replace key personnel may include arrangements to re-allocate roles to specific individuals, arrangements for succession training and specific recruitment activities.

The statement of cultural understanding should clearly refer to the group targeted in the proposal (e.g. young men who might prefer to ‘tough it out’ rather than seek help

for mental health problems or women with post natal depression who have anxieties specific to their situation). Cultural understanding may be derived, for example, from contact and work with the targeted group, involvement in relevant research or an understanding of relevant research.

Note: In order for the department to assess an organisation’s financial viability, all non-government and private sector organisations should provide one copy of an audited financial statement for the previous financial year OR an audited profit/loss statement for the previous financial year.

CRITERION 4 –VALUE FOR MONEY

Applicants should demonstrate that the cost of the project is justified by the budgetary requirements for its implementation, and its overall potential to provide services to support those with high prevalence mental health disorders or those in psycho-social crisis.

Please note the following advice in relation to Criterion 4—Value for Money

The proposal will be assessed in relation to its capacity to deliver important outcomes in a cost-effective way. Applicants are advised to cost budget items realistically, avoiding both under-budgeting and over-budgeting for individual items.

Broad Budget categories such as ‘Staffing costs’ and ‘Administrative costs’ should include clearly presented; separately costed items. The assessment panel is not able to make assumptions about what might be included in proposals with broad categories that lack budget break downs, and can only make an assessment based on the limited information provided.

Items in the proposed budgets should be consistent with the details provided in the Project Plan.

All figures for budget items should be GST Exclusive.

Please use the following advice to complete the budget table provided in the Funding Application document:

Staffing costs

Please provide separate line item for individual staff to be employed. Include their job title, award rate (if applicable) and all on-costs (workers’ compensation, superannuation, and leave) and the percentage of salary to be allocated for project purposes.

Administrative costs

Administrative costs may include the following categories and should include additional information to justify the funding amounts requested (e.g. cost per unit, amount required).

- Training for project staff
- Costs for meetings/Seminars/Workshops
- Accounting and auditing costs
- Stationery, printing
- Postage
- Travel

Asset costs

Small office assets, such as mobile phones or computers required for exclusive use by project personnel may be included here. However, alternative arrangements such as leasing should also be considered for these items. Significant assets such as clinical equipment and vehicles will not be accepted as part of the proposal.

External Evaluation costs—include the cost of engaging an appropriate individual or organisation outside your organisation to evaluate the effectiveness of the project in meeting its objectives and expected outcomes.

Financial Year

Your project may be funded over three (3) years. In each column write the total amount needed within each financial year to cover project costs.

Total funds required

Identify the total funds required for each line item.

TOTAL TELEWEB PROGRAMME FUNDING

Identify the contribution you are seeking from the Commonwealth.

Goods and Services Tax (GST)

Identify the amount of GST relevant to the amount of funding you are seeking (10% of the total GST exclusive amount).

TOTAL PROJECT COST

Finally, add all totals and the GST calculated, and enter this amount at the bottom of the table.

TOTAL other funding sources

Identify the contribution from your organisation or other funding sources towards project costs. Your organisation may contribute staff time, telephone or postage costs etc. You may also receive funding from other sources. Identify each source and how much it is contributing.

Please use the template available in the application document to develop your budget, inserting additional lines where necessary.

7 Decisions

7.1 Approval of funding

Following an assessment of the applications by the Assessment Panel, an Assessment Report with clear recommendations will be provided to the Funding Approver on the merits of the applications.

The Approver will consider whether the recommendations make efficient, effective, economical and ethical use of Commonwealth resources, as required by Commonwealth legislation, and whether any specific requirements will need to be imposed as a condition of funding.

Funding approval is at the discretion of the Approver.

7.2 Advice to Applicants

Applicants will be advised by letter of the outcome of their application. Letters to successful Applicants will contain details of any specific conditions attached to the funding. Funding approvals will also be listed on the department's website. The department will notify all unsuccessful Applicants, in writing, after execution of the agreements.

7.3 Complaint handling

DoHA's Procurement and Funding Complaints Handling Policy applies to complaints that arise in relation to a procurement or funding process. It covers events that occur between the time the request documentation is released publicly and the date of contract execution, regardless of when the actual complaint is made. DoHA requires that all complaints relating to procurement or funding process be lodged in writing. Further details of the policy are available page on the department's internet site at <http://www.health.gov.au/internet/main/publishing.nsf/content/pfps-complaintsprocedures>

Any enquiries relating to funding decisions for this Programme, should be directed to the Programme Manager via email: teleweb@health.gov.au

8 Conditions of Funding

8.1 Funding Agreement

The successful Applicants for funding will be required to sign a Funding Agreement with the Commonwealth, represented by the Department of Health and Ageing, before receiving any funding.

The Schedule attached to the Funding Agreement will provide a detailed description of the project based on the application. The funding will be paid in instalments throughout the project. The payment of funding is generally based on the funding recipient's achievement of outcomes and provision of deliverables (such as progress reports) and the demonstration of need for the payment.

Applicants should note that, if they are successful, some details of their project (including a project outline, their name and the amount of funding awarded) will be posted on the department's website as part of department's legislative reporting obligations.

8.2 Specific conditions

There may be specific conditions attached to the funding approval required as a result of the assessment process or imposed by the Approver. These will be identified in the offer of funding or during funding agreement negotiations.

8.3 Insurance

All Applicants should ensure that they have in place, or if successful are able to obtain, sufficient insurance to comply with the requirements for insurance specified below.

- Workers Compensation to an amount required by law,
- \$20,000,000.00 Public Liability per claim, and
- \$10,000,000.00 Professional Indemnity per claim.

A Funding Agreement with the successful Applicants will not be executed until the required insurances have been obtained and copies of certificates of currency for the required insurances provided to the department.

8.4 Taxation and Payment Methods

Successful Applicants will need to consider taxation arrangements surrounding invoices and method of payment. Organisations that have an Australian Business Number (ABN), and are registered to pay GST are required to submit a tax invoice (including GST component) before payments can be made. Organisations that have an ABN but are not registered for GST are required to submit an invoice to receive payment.

8.5 Payment arrangements

Payments will be made on achievement of agreed milestones.

Before any payment can be made, funding recipients will be required to provide:

- a tax invoice for the amount of the payment;
- evidence of meeting the obligations of the funding agreement; and
- satisfactory progress reporting, income and expenditure statements as per agreement, or any other documentation required by the funding agreement

Where payments are linked to the achievement of specific milestones, payments will only be made after the department is satisfied that those milestones and associated obligations of the funding agreement have been met.

8.6 Reporting requirements

Funding recipients will be required to provide progress reports on the agreed milestones. These progress reports may include funding acquittal requirements. The timing of progress reports will be negotiated as part of the funding agreement.

8.7 Monitoring

The funding recipient will be required to actively manage the delivery of the project. The department will monitor progress against the funding agreement through assessment of progress reports and by conducting site visits as necessary.

8.8 False or Misleading Information

Applications that are knowingly false or misleading will not be considered and may be subject to criminal prosecution. In addition, the Commonwealth may, at its absolute discretion, terminate the funding of a successful applicant, if the applicant has submitted false or misleading information.

8.9 Evaluation

An evaluation by the department will determine how the funding contributed to the objectives of the programme. Funding recipients will be required to provide information to assist in this evaluation for a period of time, as stipulated in the funding agreement, after funding has been provided.

8.10 Branding

Funding agreements will specify details of any branding/signage requirements with which funding recipients will need to comply.

9. Checklist

It is recommended that Applicants refer to the following check list before submitting their applications.

Before you begin

- Read all information in these Application Guidelines and ensure that your application is consistent with the advice provided in this document.
- Ensure you understand the Assessment Criteria for the Telephone Counselling, Self Help and Web-based Support Programmes measure.
- Read the Department of Health and Ageing's Standard Funding Agreement. This is available to be downloaded with this information package, and it is important to understand that by submitting an application your organisation is agreeing to abide by the terms of this Agreement, should you receive funding.

Completing your application

- Ensure that in completing your application you have:
- Named the organisation applying for funding AND the proposed Project Manager;
 - Nominated a contact officer in this organisation;
 - All documentation/information to address and support your claims against the Assessment Criteria in accordance with Section 6 of these Guidelines; and
 - Completed and signed the Application Form in accordance with Section 4.2 of these Guidelines.

Submitting your application

- For non-government organisations -
- Include one (1) copy of a Certificate of Incorporation.
 - Include one (1) copy of an audited financial statement for the previous financial year OR an audited profit/loss statement for the previous financial year.
- For organisations submitting a joint application -
- Include Letters of Support from the other organisation/s actively supporting this proposal.
- For all organisations -
- Check that ALL relevant sections of the Application Form are complete.
 - Include two (2) written references.
These must be on the Referee Template provided at Attachment A to the Application Form.

Grant Program Process Flowchart