

**GUIDELINES AND APPLICATION FORM - OVER $5,000**

Our **Healthy Communities Program** works in partnership with organisations to create a healthy and more active Western Australia.

Our funding is prioritised by the health issues and population groups outlined in our Strategic Plan, [*Active Healthy People: 2018-2023*](https://www.healthway.wa.gov.au/our-priorities/active-healthy-people-2018-2023/).

**Applications must be received by Healthway at least five (5) calendar months before the commencement of your project.**

Healthy Communities

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These Guidelines provide an outline of Healthway’s Healthy Communities Program, including details around eligibility requirements, the application and assessment process.

Please contact the Health Promotion and Research Team at Healthway to discuss your ideas prior to developing your proposal on 133 777 or email [healthway@healthway.wa.gov.au](mailto:healthway@healthway.wa.gov.au).

### Healthy Communities Over $5,000

The objectives of this program are to:

* Fund activities related to the promotion of good health in general, with particular emphasis on young people
* Provide grants to organisations engaged in health promotion programs.

Applications for Healthy Communities grants should aim to increase individual knowledge and skills, change behaviour and implement community and organisational policies to create environments that support good health.

Healthway Strategic Priorities

Healthway’s Strategic Plan: [*Active Healthy People: 2018-2023*](https://www.healthway.wa.gov.au/our-priorities/active-healthy-people-2018-2023/)details our priorities across five strategic health areas:

* Increasing healthy eating
* Increasing physical activity
* Improving mental health
* Preventing harm from alcohol
* Creating a smoke-free WA.

*Active Healthy People: 2018-2023* reflects current evidence and complements both state and national health promotion plans, strategies and policies.

We acknowledge many people in our community face barriers to good health and we remain committed to working with a range of partners to find new and innovative ways to achieve better health for Western Australians that need it the most. We prioritise:

* Children (12 years and under) and young people (aged 13-17 years)
* Aboriginal and Torres Strait Islander people
* People from Culturally and Linguistically Diverse communities
* People living in rural and remote communities
* People experiencing disadvantage.

Eligibility

* Incorporated associations under the Associations Incorporation Act 2015 (WA).
* Indigenous organisations under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI).
* Companies registered under the Corporations Act 2001 (Cth).
* Statutory Bodies (e.g. State government school, Public Health Unit, Local Government Association).
* Trusts, operating via a Trustee.

In addition, to be eligible to for funding you must:

* Be ABN registered or provide an ATO ‘Statement by Supplier’ form
* Have fulfilled all previous acquittal requirements for Healthway funded programs
* Maintain a general public liability insurance policy of a least $10,000,000 for the term of the project
* Have appropriate Health and Safety and Risk Management policies and practices in place to deliver the project
* Comply with all State and Commonwealth Laws which apply to the project.

Funding Cannot be Used for

* Any activity or event that does not occur in Western Australia.
* Overseas and interstate travel, camps, conferences, trade exhibitions, events, workshops, catering and food.
* Capital works, equipment, fundraising, purchase of infrastructure or costs associated with running an organisation.
* The advancement or promotion of religion, religious outlook or faith-based activities.
* The advancement or promotion of a political organisation or political outlook.
* School activities that form part of the core curriculum.
* Activities that are already established, have been previously trialled or duplicate existing activities.
* Ongoing projects that require continuing support.
* Programs that are the responsibility of State or Federal Government. However, this may not preclude corporate ventures.
* The production of films, videos, books, pamphlets and publications that are not part of a broader program.
* Treatment/rehabilitation/counselling/therapy and direct health service delivery or the provision of food and welfare assistance.
* Projects that are not based on best practice in health promotion.

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### Requirements for Funding

**Co-Supporters Policy**

* Organisations and their affiliates cannot accept any form of funding from tobacco companies or their related foundations or have any direct or indirect arrangements, connections or dealings with the tobacco industry.
* Organisations may not be eligible for funding if they receive funding or have an association with unhealthy brands or companies (Food and drinks, alcohol, and gambling). Please review our [Co-Supporters Policy](https://www.healthway.wa.gov.au/our-funding/our-policies/) for more information.
* If applicable, please complete the declaration form relating to supporters that use unhealthy brands (monetary or product) either directly or through a third party. The Co-Supporter Declaration Form will need to be attached to your application when it is submitted.

**Working with Children**

* Organisations that receive Healthway funding are required to comply with the Working with Children (Criminal Records Checking) Act 2004 and conduct criminal record checks for employees and volunteers as required. More information is available [here](https://workingwithchildren.wa.gov.au).

### Application and assessment process

To be considered for funding, applicants are required to complete an application form which is available from Healthway’s [website](https://www.healthway.wa.gov.au/our-funding/healthy-communities-program/). All applications are assessed by Heathway and recommendations are approved by the Board and Minister for Health. During the assessment process we may liaise with other relevant stakeholders including Lotterywest and/or funding partners.

We are looking to fund projects that:

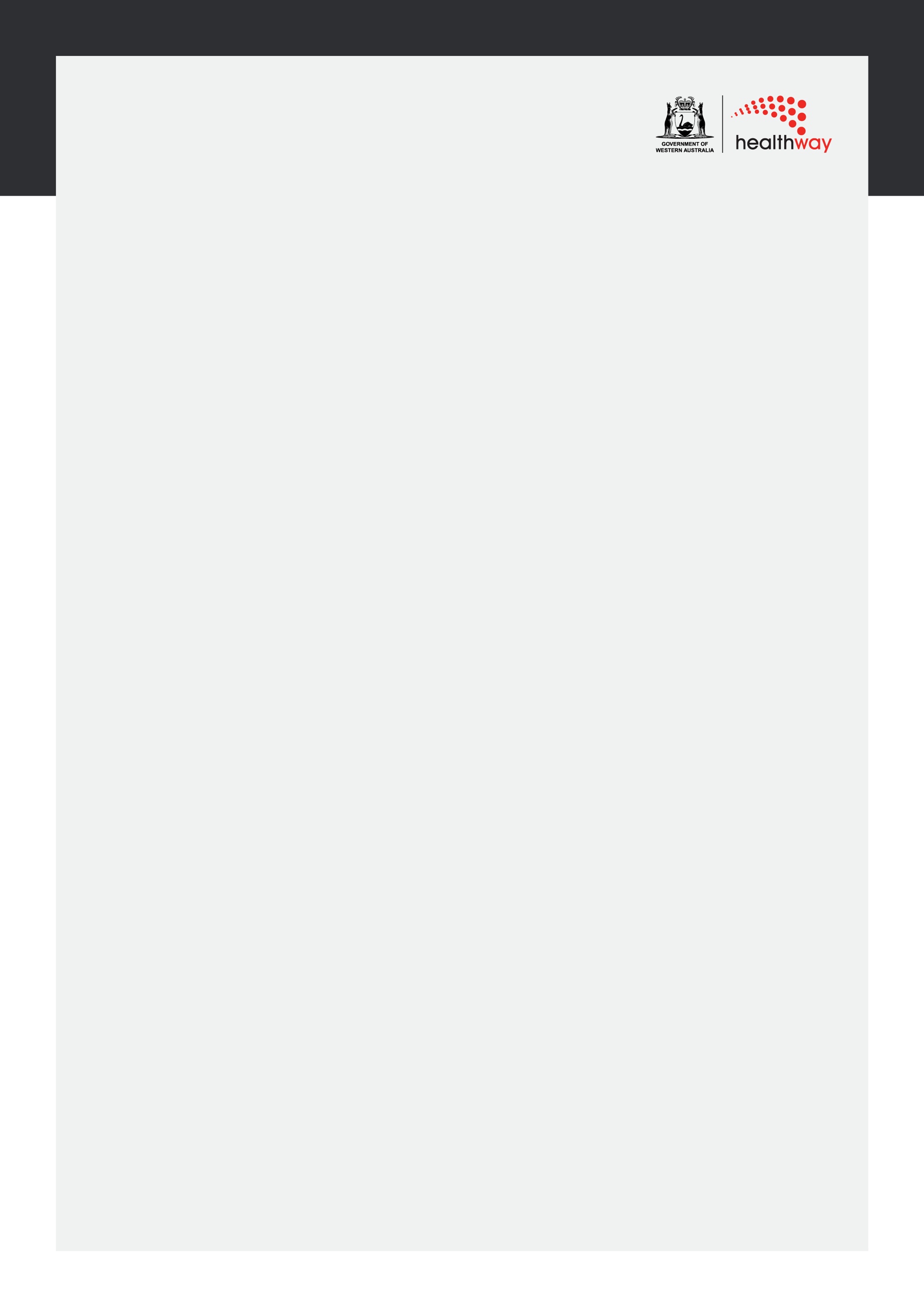
* Promote health or prevent illness in the community.
* Can be run as a pilot and can be used as a model in other communities.
* Use population or community-based approaches (rather than one to one interventions) which address strategic priorities and target population groups identified on page one.
* Address health inequalities based on gender, age, Aboriginality, ethnicity, disability, geographical location or socio-economic status.
* Aim to improve health in community settings and actively involve the formation of partnerships with groups or organisations working in those settings.

Your application will be assessed using a number of criteria including:

* Its focus on health promotion or the prevention of illness or injury using a population or community-based approach.
* The potential of the project to increase knowledge, change attitudes or behaviours to improve health.
* The ability of the project to address Healthway’s strategic priorities or priority population groups.
* The ability of the project or some of the activities to be ongoing after Healthway’s initial funding.
* If the project represents good value for money.
* If the project addresses a gap in current health promotion activity.

### Ready to Apply

1. Check that your organisation and project are eligible to apply.
2. Discuss your proposal with **Healthway** prior to submitting an application. Call the Health Promotion Team on 133 777.
3. Ensure your organisation can enter into a Healthy Communities Project Agreement, meet the requirements of funding and comply with the Program guidelines and the Co-Supporters Policy.
4. Use the **Healthy Communities Grant - Over $5,000** application form following this section. All sections of the application form must be completed and the submission must include information on each of the areas requested.
5. Ensure you submit the required attachments being:
   1. Recent bank statement (from your main operating account)
   2. Two most recent financial statements
   3. Constituent document (e.g. Constitution, Rules of Association, Trust Deed)
   4. List of current Directors/Board or Management Committee members
   5. Co-supporter Declaration Form (only if applicable)
6. Make a copy of the application for your own records and send the original with all required attachments to Healthway via email: [healthway@healthway.wa.gov.au](mailto:healthway@healthway.wa.gov.au) **at least five (5) calendar months before** the commencement of your project.



**APPLICATION FORM – OVER $5,000**

Healthy Communities

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| --- | --- |
| Organisation details | Name:  Address for correspondence:  Telephone:  Website: |
| Contact Person | Full Name (incl title):  Position:  Email:  Primary contact number:  Secondary contact number: |
| Legal Signatory | Full Name (incl title):  Position:  Email:  Primary contact number:  Secondary contact number: |
| 2nd Legal Signatory  *If by law your organisation requires more than one signatory for authorisation, please complete this section.* | Full Name (incl title):  Position:  Email:  Primary contact number:  Secondary contact number: |

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| GST Information | Australian Business Number (ABN):  *(If no ABN please complete and attach an ATO 'Statement by Supplier Form’)*  Is the organisation registered for GST?  Yes No | |
| Organisation Status  *Please select the one that best describes your entity type* | Incorporated Association under the Associations Incorporation Act 2015 (WA)  Indigenous organisation under the Corporations (Aboriginal and Torres Strait Islander) Act 2006  Company registered under the Corporations Act 2001 (Cth)  Statutory Body (e.g. State government school, Public Health Unit, Local Government)  Trust operating via its Trustee(s) | |  | | --- | |  | |  | |  | |  | |  | |
| Details of financial institution:  *A bank statement is required to be attachment to verify bank details.* | |  |  |  |  | | --- | --- | --- | --- | | Name of Main Operating Account |  | | | | Name of Institution  (include address) |  | | | | Account Number |  | BSB |  | | |

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| --- | --- | --- | --- |
| Budget  *Note: Do not include GST.* |  | **Total Cost of Project** | **Total Requested from Healthway** |
| **Year 1** |  |  |
| **Year 2** |  |  |
| **Year 3** |  |  |
| **Total** | **$** | **$** |
| Timeframes  Note: *Remember your application must arrive at Healthway with all required attachments at least five (5) calendar months prior to commencement* | Actual project commencement date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Completion date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

### Project Details

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| Project Title |  |

**Description of the project**

Give the project title and a clear overview of the project. This section should include a brief rationale for the project as well as a concise summary of what the project will entail.

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**Health Issue**

Define and explain the relative importance of the specific health issue to be addressed. Justify with supporting data where possible. Outline the opportunities the project will provide to address Healthway’s strategic priorities. *This section should be no longer than one page.*

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**Target Group/ Participants**

Healthway is seeking to have a greater impact on those population groups that are most likely to experience poorer health or engage in less healthy lifestyles and behaviours (see page 1). We therefore encourage you to consider targeting these groups where appropriate.

Define the priority population that the project seeks to target using demographic information such as age, gender, ethnicity and the percentage of the population or number of people who will be reached by this project. More details on the numbers of people involved in the project will need to be entered under Statistical Data.

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**Consultation and Partnerships**

Describe consultations that have taken place with other key health and community organisations and with participants to develop the project. Healthway generally requires applicants to form partnerships with appropriate groups or organisations, particularly where the applying organisation does not possess health promotion skills. Please list those groups that are partners in this program, and details of budget and ‘in-kind’ support provided. Include letters of support where possible.

If your project intends to work with Aboriginal people and/or communities, please refer to our policy on [Aboriginal engagement](https://staging.www.healthway.wa.gov.au/our-funding/our-policies/).

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### Planning a Health Promotion Project

### Objectives

List specific health promotion **objectives** which are “SMART” i.e. Specific, Measurable, Achievable, Relevant, Time Specific.

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### Strategies

Provide detailed information on the project **strategies** or activities and how these will support the objectives, health content, and project implementation. In doing so consider the following:

* Have the strategies selected been shown to be effective in achieving the desired outcomes?
* Have they proved to be effective with the specific target groups, e.g. culturally sensitive, in an appropriate language?
* Do they suit the current level of resources in terms of time, money, staff and equipment?
* Have they the potential to reach the largest proportion of the target group?

This section should explain in detail what you plan to do and should be the largest section of your application.

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### Evaluation

Provide detailed information on the level or types of outcomes that will with be evaluated as part of this program. The evaluation should correspond to the program’s objectives, amount of money, time and staff invested in the project.

Please describe how you will **evaluate** your project, noting the measures you will focus on, and the collection methods proposed.

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### Timeline

Include start and finish dates, a timetable and list of activities for the project. This can be outlined using a spreadsheet if required.

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### Staffing and management

* Outline proposed staff, salary award and management structure, reporting and recruitment arrangements, where applicable.
* For major applications above $50,000, provide a brief summary of relevant skills for the key people involved, including their experience and credentials in relation to the identified health issues(s) and target group(s).
* Include a list of the proposed project management committee members and structure, including names, positions and previous experience with project management (if applicable). Where appropriate, representatives from the target groups should be consulted.
* Include other expertise that may be involved.

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### Budget

* State the amount of funding sought from Healthway, including a detailed budget breakdown for all items required for the project, including staffing, resources etc. If staffing costs are requested please indicate the FTE and salary scale and identify the salary on-costs separately.
* Healthway’s budget proforma is below. Applicants can use this and add additional rows as necessary **or** create an original budget and submit it as an attachment to the application.
* Please do not include GST. If your organisation is registered for GST, then Healthway will gross up the approved grant for the GST liability upon the issue of a Recipient Created Tax Invoice (RCTI).
* Identify all other sources that have been approached to fund the project and whether funding has been confirmed.
* List any ‘in-kind’ or funding support from other sources/partners.

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| Budget items | Amount Requested from Healthway | In kind or other confirmed funding source\* |
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| Total (exclusive of GST) |  |  |

* Include costs to participants (if any).

Sustainability

How will the activities continue beyond Healthway funding? Describe plans to ensure that the key project activities will be sustainable.

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### Statistical data

Healthway will consider how many people will be exposed to health promotion activities through your project. Please estimate the numbers of people involved at each level identified in the table below. Note: Organisations are reminded of the need to ensure compliance, as applicable, in respect to the Working with Children (Criminal Records Checking) Act 2004.

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| **Estimated Numbers** | | | | | | | | |
| Age Group | Active  Participants:  # people who are actively involved in a project | | Volunteers/  Organisers:  # people involved in delivery of a project | | Other Participants:  # people not actively engaged but may come into contact | | Totals | |
| Male | Female | Male | Female | Male | Female | Male | Female |
| Children 12 and under |  |  |  |  |  |  |  |  |
| Young People 13-17 |  |  |  |  |  |  |  |  |
| Adults 18-54 |  |  |  |  |  |  |  |  |
| Seniors 55+ years |  |  |  |  |  |  |  |  |

A number of population groups have been identified as those most likely to experience poor health and a higher prevalence of risk factors for premature death and disease. Healthway will consider which of these groups is being targeted or may be reached through your project. Please indicate in the table below the estimated numbers in each population group that may be reached through the project. These figures may be less than the totals identified above:

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| **Estimated Numbers of Priority Populations Targeted by the Project** | | | |
| ATSI People | Regional Centres | Rural and Remote Communities | Disadvantaged Groups or Other Groups |
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### Declarations

Healthway is collecting information in this Application Form (including all attachments) for the purposes of assessing and awarding applications for Funding. Information collected will be accessed and used by Healthway for this purpose, as outlined below and in the Healthway Privacy Policy.

Healthway may disclose details of:

1. funding applications and information provided in the Application Form, including contact details of officers of the applicant organisation (Customer);
2. all information relating to any funding provided to the Customer; and
3. any of the Customer’s previous funding and acquittal history with Healthway,
4. to referees, members and employees of the Western Australian Health Promotion Foundation, Members of Parliament, other Government agencies or departments or other Western Australian statutory authorities for the purpose of advising on, processing, analysing, evaluating, promoting or reporting the application or the funding or enabling the other government entity to process and assess any other grant applications submitted by the Customer and otherwise in accordance with the Healthway Privacy Policy.

Details of application requests and approved funding may be made available on the Healthway website, in Healthway annual reports, to Members of Parliament and other Government agencies or departments or Western Australian statutory authorities, to members of the Western Australian Health Promotion Foundation, to others for research and work purposes and in the media and other publications, as deemed appropriate by Healthway (collectively Other Sources). Customer information provided via this Application Form will be available to other authorised representatives of the Customer and Healthway staff.

Terms and Conditions

The Customer and I acknowledge and agree to the following:

1. I am authorised to act on behalf of the Customer to make funding applications.
2. I warrant that all information made or given in relation or preparatory to the Funding is true, correct, complete and in no way misleading or deceptive.
3. I have obtained the necessary consent from the Customer to ensure that I can agree to the information being disclosed and used by Healthway as outlined in these Terms and Conditions.
4. I have read, understood and obtained the necessary consent from the Customer to agree to and meet the requirements of the Healthway Health Promotion Project Guidelines for all projects and/or activities for which the Funding is to be used.
5. I understand and have obtained the necessary consent from the Customer that in relation to the Funded project/activity, the Customer must not enter into, perform or participate in any dealings, arrangement or contract whereby the Customer is promoting, advertising or endorsing, or allowing the advertising, promoting or endorsing of, any alcohol, food and beverages, the promotion of gambling products to underage audiences and tobacco products (which is or is likely to impinge upon or conflict with the philosophy or objectives of Healthway) without Healthway’s prior written consent.
6. Where Healthway approves Funding, Healthway may make available, disclose or publish the Customer’s name, amount of the approved Funding and the Project to the Other Sources.

The applicant declares that the information provided in this application is true and correct.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_