THRF Group - Improving Palliative Care in the Community v1.0
Form Preview

Eligible Administering Organisation Details

* indicates a required field

Before you begin

Before proceeding with this application, please ensure you have read and understood the Guidelines for this round, including **all eligibility and application requirements**.

Please also note that this form uses conditional logic with the answers to some questions influencing which questions subsequently appear later in the form. We strongly recommend working through the form in sequence well before the deadline to ensure you understand all of the information that will be required to complete the submission.

1.1 Which organisation will be the Eligible Administering Organisation for this proposal? If the organisation does not appear in the list, please select 'Other'. *

- ☐ Adelaide University
- ☐ Barossa Hills Fleurieu Local Health Network
- ☐ CALHN (Central Adelaide Local Health Network)
- ☐ Eyre and Far North Local Health Network
- ☐ Flinders and Upper North Local Health Network
- ☐ Flinders University
- ☐ Limestone Coast Local Health Network
- ☐ NALHN (Northern Adelaide Local Health Network)
- ☐ Riverland Mallee Coorong Local Health Network
- ☐ Rural Support Services
- ☐ SAHMRI (South Australia Health and Medical Research Institute)
- ☐ SALHN (Southern Adelaide Local Health Network)
- ☐ WCHN (Women's and Children's Health Network)
- ☐ Yorke and Northern Local Health Network
- ☐ Other:

No more than 1 choice may be selected.
As per the round Guidelines, the Administering Organisation should correspond with the employing organisation of the Project Leader.

1.2 Enter the ABN for your chosen Eligible Administering Organisation *

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

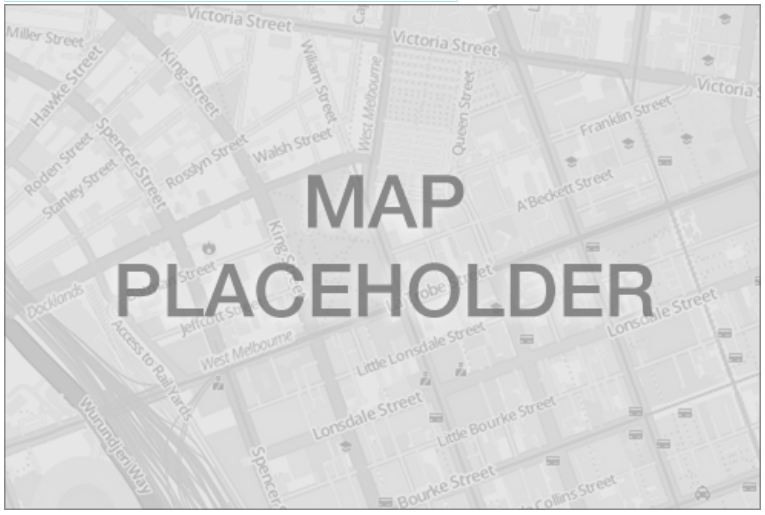
Information from the Australian Business Register
ABN
Entity Name
ABN Status
Entity Type
Goods & Services Tax (GST)
DGR Endorsed

ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main Business Location	

Must be an ABN.

1.3 Please indicate the address for the primary base of service operations in South Australia for the Eligible Administering Organisation below. If street address unavailable, refer to hint text for further instruction. *

Address



Full street address preferred, if available. Pin may be moved to approximate location if street address not available. Alternatively, enter the name of the nearest town.

Project Proposal

* indicates a required field

2.1 Project summary

2.1.1 Project title *

2.1.2 Length of the project in number of months *

Must be a whole number (no decimal place) and no more than 12.

2.1.3 Project Summary: Provide a lay-language summary of the project and its expected benefits for the South Australian community accessing palliative care services *

Word count:
Must be no more than 60 words.

2.2 Project proposal

Important guidance on this section

- Please consider the wording and weighting of the relevant Assessment Criteria in the Guidelines when preparing your answers below.
- The appropriate and meaningful inclusion of consumer engagement and the consumer voice in the project is required.
- If using references, please keep in-text citations minimal in style and in number. List all references (maximum of 20) at 2.5.1**.**

2.2.1 Background & Rationale

Outline the unmet need the proposal is seeking to address below, with a particular focus on (i) the importance of the unmet need in palliative care services in South Australia, and (ii) its significance for the community, particularly in underserved populations.

*

Word count:
Must be no more than 300 words.
Include description of any consumer engagement undertaken in defining the unmet need.

2.2.2 Objective & Aims

Outline the main objective/goal of the project and its core aims.

*

Word count:
Must be no more than 300 words.

2.2.3 Approach, Innovation & Feasibility

Outline the proposed approach (i.e. what activities are you going to undertake) to address the unmet need outlined above, including the details of the consumer engagement to be undertaken, and justifying the proposal's innovation, feasibility and cost effectiveness.

*

Word count:
Must be no more than 1200 words.

2.3 Proposed project progress milestones

Should this proposal be successful in obtaining THRF Group funding, you will be required to report against an agreed set of progress measures (AKA milestones), demonstrating their successful and timely completion. With that in mind, and noting the following guidance, outline your proposed project milestones below.

All project milestones **must**:

- Be provided in **chronological order** of expected completion, with **at least one** (1) milestone falling due **every 6 months.**
- Clearly reflect **unambiguous completion or achievement** of a key project task or deliverable, e.g. pilot program implementation *completed*, 50% patient enrolment target *achieved*.
- Be **tangible**, **specific** and **measurable.** Consider breaking complex or lengthy activities across multiple milestones to aid the demonstration of tangible progress over time.

DO NOT include:

- **Reporting to THRF Group** as a milestone. If your application is successful, all reporting requirements will be stipulated by us.
- Milestones about **tasks being started/commenced**, e.g. Session deliverey *commenced*, patient enrolment *begun*.
- Events occurring **before** or **after** the project term, or that may be considered "business as usual", e.g. project "wrap up".

2.3.1 Milestone	2.3.2 Time to expected completion in months from project start
Must be no more than 20 words.	Must be a whole number (no decimal place) and between 1 and 12.

2.4 Impact and sustainability

In this section "outcomes" refers to the immediate results following (successful) completion of the project, with respect to its main goal/objective and core aims.

Outcomes should be specific, measurable/verifiable, and be meaningful to the relevant community/ies.

(Outcomes are not to be confused with the ***outputs*** such as reports, media attention, number of people serviced, etc.)

2.4.1 Expected Outcomes & Impact

Indicate the expected outcomes upon successful completion of the project, and describe the expected beneficial impacts for the target community. Indicate how these will be measured/ verified.

*

Word count:
Must be no more than 300 words.

2.4.2 Future sustainability

Outline how the initiative and its impact within the service/community will be sustained following completion of the funded project.

*

Word count:
Must be no more than 300 words.

2.5 References and supporting figures (Optional)

2.5.1 List any references used throughout this proposal (maximum of 20)

Word count:
Must be no more than 400 words.

2.5.2 Upload (as one PDF file) up to 2 A4 pages of supporting graphs/images/ tables where required for clarity of project concepts, rationale, methodology, timing, etc. (Optional)
Attach a file:

Please avoid further textual description of the project. Material that does not accord with this question will be considered extraneous and removed from assessment.

Project Budget

* indicates a required field

3.1 Planned expenditure of THRF Group funds

Detail the anticipated spending of funds requested from THRF Group below. Please ensure all requested funding complies with the round Guidelines.

Salary support requests: Use the relevant salary scale of the organisation through which the person is to be employed, ensuring the following details are clearly provided in the description at **Details 3.1.2** in the table below:

- position
- intended employer
- salary scale level
- per annum base salary amount (or hourly rate for casual staff)
- percentage of direct on-costs applied
- appointment fraction (FTE) and duration (or total number of hours for casual staff)

Equipment requests: Refer to the round Guidelines for limits on funded equipment.

Multiple sources of funds: Where a budget item (including salary) is to be funded from multiple sources, please add a row for the THRF Group-funded portion here as well as in 3.2 for the remaining funds.

3.1.1 Expenditure type	3.1.2 Details (** note required inclusions for salaries outlined above)	3.1.3 Units	3.1.4 Unit cost	3.1.5 Total cost
		FTE / hours of salary or number of items	Salary rate (incl. on-costs) or cost of each item	(Unit x Unit cost) This number/ amount is calculated.
Other:			$	$

3.2 Contributions from other sources

3.2.1 Will any additional resources (cash or in-kind) from other sources be used towards the proposed activity? *

○ Yes ○ No

In line with the guidance provided at 3.1, detail expenditure of all other additional resources to be contributed (as cash or in-kind) towards the project by year.

Any further details needed to understand the commitments made by others should also be provided in Section 3.4.

3.2.2 Expenditure type	3.2.3 Details (**note required inclusions for salaries	3.2.4 Units	3.2.5 Unit value	3.2.6 Total value	3.2.7 Type of commitment

outlined at 3. 1 above)

		FTE / hours of salary or number of items Must be a number.	Salary rate (incl. on-costs) or cost of each item Must be a dollar amount.	(Units x Unit value) This number/ amount is calculated.	
Other:			$	$	

3.3 Budget summary

3.3.1 Total funding requested from THRF Group

$

MUST be less than or equal to $50,000

3.3.2 Total contributions from other sources

$

This number/amount is calculated.

3.3.3 Total project cost

$

This number/amount is calculated.

3.4 Budget justification and clarification

For each requested item, clearly explain the costing calculation and reason why it is needed, especially in relation to any salary requests. Items with insufficient justification may not be considered for funding. Also provide any further information required to clarify budget items, such as the source of any cash and/or in-kind commitments listed in 3.2. *

Word count:

Must be no more than 400 words.

Project Team

* indicates a required field

Please note: It is the Project Leader's responsibility to ensure that all team members are willing to participate, their organisations support their involvement, and that the team has the appropriate mix and level of expertise for the proposed project prior to submission of this application.

4.1 Project Leader

4.1.1 Project Leader's name *

Title | First Name | Last Name

4.1.2 Project Leader's current position title (at the Eligible Administering Organisation, as their employer) *

4.1.3 Project Leader's professional email address *

Must be an email address.

4.1.4 Project Leader's preferred phone number *

Must be an Australian phone number.

4.1.5 What time commitment (in FTE) is the Project Leader committing to this project? (e.g. full time = 1.0 FTE, 1 day/week = 0.2 FTE) *

Must be a number between 0 and 1 with 1 decimal.

4.1.6 Describe how your career/lived experience to date has prepared you to contribute to this project *

Word count:
Must be no more than 200 words.

4.1.7 Briefly describe your role and contribution to the proposed project, and how these will contribute to its successful delivery *

Word count:
Must be no more than 200 words.

4.2 Other team members (incl. named consumer representatives)

List any other key contributors on the project team (including consumers) and **briefly** describe the capacity in which they will be participating.

4.2.1 Name	**4.2.2 Organisation (or consumer group they are representing)**	**4.3.3 Nature of participation**	**4.2.4 Time commitment to the project (FTE)**
		e.g. Provision of expertise, essential materials or access to key resources etc.	Must be a number and between 0 and 1.

		Must be no more than 60 words.	

4.3 Project roles and management

The question below seeks to understand the role and contribution of the individuals involved in the project, as well as how the project team will function as a whole, to successfully achieve the project goals. Your answer should:

(i) describe the specific roles, skills and expertise each person will provide to the project, with reference to the project's aims/tasks;

(ii) describe the arrangements for coordinating and managing the project team during the project; and

(iii) clearly define the role of consumers and describe how they will be engaged throughout the project and beyond.

*

Word count:
Must be no more than 400 words.

Declaration & Endorsement

* indicates a required field

Privacy notice

The Hospital Research Foundation Group (THRF Group) collects personal information in order to assess, verify and manage applications. Further information about how THRF Group collects and manages personal information is set out in THRF Group's Privacy Policy. By completing this application you agree to THRF Group collecting, using and disclosing your personal information for these purposes and in accordance with its Privacy Policy. If you provide personal information about other individuals in the application you agree to notify those individuals of THRF Group's Privacy Policy.

5.1 Use of Generative Artificial Intelligence (GenAI)

5.1.1 Was GenAI used in the preparation or development of any content to be submitted at part of this proposal? *

○ Yes ○ No

5.1.2 Please declare all GenAI tools used in preparation of this proposal and the nature of their use (e.g. to check grammar) *

Word count:
Must be no more than 50 words.

5.2 Project Leader Declaration

As Project Leader

- I certify that to the best of my knowledge the statements made in this application are true.
- I understand the eligibility requirements of this competitive grant round as described in the Guidelines, and acknowledge an application may be ruled ineligible if it breaches any such requirements.
- I understand that if awarded, the approved application will form part of the contractual agreement with THRF Group, and I agree to lead and carry out the project as so described.
- I have obtained the consent of any named participants to be included in this application.
- I agree to THRF Group collecting, using and disclosing personal information provided in this application in accordance with its Privacy Policy and have notified the other individuals involved in the application of THRF Group's Privacy Policy.
- I understand and agree that if an Award is granted, that no further claim will be made on THRF Group to cover any expenditure beyond the approved budget.

5.2.1 Project Leader's full name *

5.2.2 Date of submission *

Must be a date.

5.2.3 (Optional) Do you have any comments or feedback on the application process that you wish to share with us?

Word count:
Must be no more than 100 words.

5.3 Administering Organisation Endorsement

To be considered complete at time of submission the application **must** include a complete and correctly signed Administering Organisation Endorsement form uploaded below.

No exceptions or extensions for the purposes of obtaining this certification will be granted.

Please note the following instructions:

- Use the prescribed endorsement template.
- ALL signatures are required on the uploaded certification form for your application to be accepted.

- Sign-off by an authorised delegate on behalf of the Administering Organisation is commonly sought by contacting the office of the CEO or equivalent. At universities, it may be via the Research Office.

Upload the complete and signed Administering Organisation Endorsement form (link to download template provided above). Please name file using the convention 'AO-Endorsement-ProjectLeader'sSurname.pdf'. *
Attach a file:

Check your file is compliant with the instructions above before uploading, please.