

# Rural Health Continuing Education Sub-Program (RHCE) Stream One



## Project Funding Application Guidelines 2015

The information contained in this document outlines the principles and guidelines for accessing funding for project grants under the RHCE Sub-Program Stream One. This document should be read in conjunction with the relevant application form.

*RHCE Stream One is an initiative of the Department of Health and managed by the Committee of Presidents of Medical Colleges.*

## Contents

### The Rural Health and Continuing Education Sub-Program (RHCE)

#### Stream One Guidelines

	<b>Page</b>
1. Background	3
2. Objectives of the RHCE Stream One Program	3
3. RHCE Funding Opportunities – General Information	4
Eligibility	
Applications & Assessment	
RHCE Program Management Committee and Program Management Unit	
4. RHCE Individual Grants	5
5. RHCE Project Grants	5
Application Guidelines	
Budget Guidelines	
Collaborative Projects	
6. Selection Criteria	9
7. RHCE Program Further Information	9
Complaints Process	
Evaluation Process	
Further Information	
8. Specialist Medical College contact details for application verification	10

## 1. Background

- 1.1 RHCE is an Australian Government funded initiative, to support health professionals in rural and remote Australia in accessing continuing education and training.
- 1.2 RHCE is divided into two funding streams:
  - **Stream One supports medical specialists (with the exception of general practitioners); and**
  - Stream Two supports allied health providers, nurses, general practitioners and Aboriginal and Torres Strait Islander Health Workers.
- 1.3 **These guidelines apply to Stream One of the Program, which is managed by the Committee of Presidents of Medical Colleges (CPMC).**
- 1.4 RHCE Stream Two (RHCE2) is managed separately by the National Rural Health Alliance. For information visit <http://rhce.ruralhealth.org.au>
- 1.5 For the purposes of these guidelines, RHCE Stream One is simply referred to as RHCE, or the RHCE Program.
- 1.6 The RHCE Program is currently funded until 31 December 2015.
- 1.7 Round 7 Projects will run between 13 March and 15 November 2015.

## 2. Objectives of the RHCE Program

- 2.1 The objectives of the RHCE Program are to:
  - identify, develop and deliver suitable Continuing Professional Development (CPD) and Multi-Disciplinary Team (MDT) -based training activities, and peer support programs to medical specialists in rural and remote areas of Australia;
  - encourage increased collaboration between stakeholder groups and foster MDT-based education and joint continuing education projects; and
  - assist in building inter-college and stakeholder capacity to deliver these activities to medical specialists practicing in rural and remote areas of Australia.
- 2.2 Meeting the above objectives will enable to Program to fulfill its intended outcomes:
  - to enhance the delivery of quality clinical care in rural and remote Australia by improving the skill and competence of specialists working in these areas; and
  - to increase the retention of health professionals in rural and remote areas.

This second outcome can be addressed through the RHCE program because in rural and remote areas, CPD is vital to:

  - providing clinicians with relevant professional education systems and networks to maintain clinical and professional standards;
  - reducing professional isolation; and
  - addressing the specific challenges of life-long learning in rural and remote settings.

- 2.3 RHCE funding is divided into two distinct components:
1. Individual grants for specialists to participate in CPD activities; and
  2. Project grants for Specialist Medical Colleges to develop and enhance CPD initiatives for medical specialists in rural and remote locations.

### 3. RHCE Funding Opportunities – General Information

#### 3.1 Eligibility:

- 3.1.1 RHCE funding is available to rural and remote medical specialists, and Specialist Medical Colleges to support activities for specialists working in RA2 (inner regional) to RA5 (very remote) as defined by the Australian Standard Geographical Classification – Remoteness Areas (ASGC-RA) system. Visit the [Doctorconnect website](#) for more information about ASGC-RA categories.
- 3.1.2 Applications must address every section of the Application Form for New Projects, (with the exception of sections 3 and 8 when not applicable to the proposal) or every section of the Application Form for Additional Funding for projects previously funded under RHCE.
- 3.1.3 Any training providers involved in the project must be nationally accredited, nationally recognised or an accredited/professional private educational provider. Training providers may include but are not confined to universities, registered training organisations or professional bodies such as medical colleges and their equivalents.

#### 3.2 Applications & Assessment

- 3.2.1 Applications for RHCE Project Funding must be based on the relevant Guidelines and Application Forms and submitted in the prescribed format.
- 3.2.2 All eligible applications will be assessed by an Assessment Panel appointed by the RHCE Program Management Committee (PMC).
- The objective of the assessment process is to select projects/activities that best represent value for money in the context of the objectives and outcomes of the grant activity.
  - The project selection process will be transparent, with applications assessed according to the published selection criteria. Members of any project assessment panel will abstain from voting on proposals put forward by their respective College.
  - Where appropriate, the panel has the right to ask the applicant to revise the proposal in accordance with the panel's suggestions for improvement.

#### 3.3 RHCE Program Management Committee and the Program Management Unit

- 3.3.1 The RHCE Program Management Committee (PMC) was established in consultation with the member Colleges of the CPMC and the Department of Health to provide oversight and expert advice over the life of the Program.
- 3.3.2 The RHCE Program Management Unit (PMU) is currently located within The Royal Australasian College of Physicians and is contracted by the CPMC to administer the RHCE Program.

3.3.3 The contact details for program staff are:

RHCE Program Manager: [admin@ruralspecialist.org.au](mailto:admin@ruralspecialist.org.au)

Telephone: (02) 9256 5419

3.4.3 Further information about RHCE can be found at: [www.ruralspecialist.org.au](http://www.ruralspecialist.org.au)

## 4. RHCE Individual Grants

Separate guidelines and application forms are available via:

<http://www.ruralspecialist.org.au/application-forms-and-guidelines/>

## 5. RHCE Project Grants

5.1 Grants to support CPD activities for specialists and / or multi-disciplinary teams (MDTs) are available. Applications must be supported by the relevant Specialist Medical College/s and be considered by the assessment panel to have addressed the objectives of the Program.

### 5.2 Application Guidelines

5.2.1 Projects to develop and deliver CPD activities may include, but are not limited to:

- |                                    |                                     |
|------------------------------------|-------------------------------------|
| - e-Learning modules               | - Peer Review and Quality Assurance |
| - Face-to-face workshops           | - Practice review                   |
| - Journal clubs / case discussions | - Train the trainer courses         |
| - Clinical audit                   | - Interactive tutorials             |
|                                    | - Virtual meetings                  |

A full list of the types of current RHCE Projects and examples is available in Section 6 (p22) of the [RHCE Project Evaluation Toolkit](#).

5.2.2 The following should be taken into account in the preparation of any project submission.

- Projects should aim to reduce professional isolation through facilitation of learning opportunities that meet the needs of medical specialists living and working in rural and remote areas of Australia. They should improve the skills and competence of rural and remote specialists, thereby helping to improve the standard of health care and help to retain health professionals in rural and remote locations.
- In recognition of the importance of professional networks in rural and remote areas, applications should, wherever possible, incorporate follow-up elements, which ensure that the training provider and the participants have opportunities for ongoing interaction to improve support for health professionals in the field.

- Where possible, applications should foster collaboration with specialists of different Colleges and include opportunities for inter-professional learning to build links and support multi-disciplinary teams (i.e. nursing, allied health, Indigenous health workers, GPs etc) involved with specialist service delivery.
- Education should, wherever possible, be delivered in the participants' own working environment and local areas. There may, for example, be limited use in attending CPD in a metropolitan area and being trained in the use of equipment and systems that are not available in or relevant to the participants' usual place of work.
- Multi-disciplinary teams should be encouraged to identify their own learning needs and priorities. Relevant education can then be delivered at the team's usual premises or working environment, using their own equipment.
- Projects funded to promote MDT must include a focus on the delivery of additional skills and systems to health professionals that are likely to result in improved team based care arrangements. MDT projects must also promote, and preferably include, enduring materials, systems, processes, procedures, guidelines and skills and knowledge transfer components (such as train-the-trainer elements and/or best practice) and be based on evidence of effectiveness.

5.2.3 Applicants may wish to tackle issues such as chronic diseases, preventative health and injury prevention through practical as well as clinical education. For example education could include issues such as communications skills, team management, orientation to rural and remote environments (particularly location specific), Indigenous health and cultural safety.

5.2.4 The RHCE Program supports the participation of other health professionals within projects, in conjunction with their specialist colleagues and where the cost of participation is met by external funding.

5.2.5 Applications should not duplicate existing programs and must demonstrate value for money based on one or more combinations of: need, the number of specialists who may benefit, local capacity building, transferability to other settings, and sustainability.

5.2.6 Additionally, the following should be taken into account in the preparation of a funding submission.

- Applications for funding will only be considered if all eligibility criteria are met, and selection criteria addressed.
- Colleges with more than one application must rank the applications in order of priority on the application form.
- Colleges are strongly encouraged to collaborate on proposals and individual specialists are encouraged to assist their Colleges in the development of proposals based on their CPD needs.
- Project applications must demonstrate support of the relevant College(s) and the College's involvement in the development and implementation of the Project.

Please contact the PMU for further information regarding:

- *contractual obligations;*
  - *subcontracting terms and conditions;*
  - *Intellectual Property;*
  - *funding arrangements and reporting requirements.*
- Applications must include a needs assessment, identifying both the need for the Project and evidence of the target audience's intent to participate. Needs assessments should include, but are not limited to:
    - What are the CPD needs of the intended population?
    - Consultation with the target specialist audience.
    - What time period is appropriate for the delivery of the CPD?
    - What are the best delivery systems for the activity (location, method)?
  - Each project must develop an evaluation plan to determine whether or not the objectives of the project have been and are being met. RHCE has developed a [Project Evaluation Toolkit](#) to guide project managers through evaluation of RHCE projects. Applicants are encouraged to use the Toolkit to assist with project applications. The PMU team can assist in providing feedback and finalising an appropriate evaluation plan.

### **5.3 Budget Guidelines**

- 5.3.1 Applications must include a detailed budget for the project taking into consideration the budget guidelines outlined below.
- 5.3.2 The typical budget range is expected to be between \$50,000 and \$100,000.
- 5.3.3 The maximum amount allocated per application will be determined by the PMC, taking into account the specific details of the individual project and other applications against the overall objectives and priorities of the RHCE Program.
- 5.3.4 The RHCE Program supports the inclusion of funds from additional sources to expand or build on the original project. Any funds received from other sources will not affect the amount of RHCE funding allocated to the Project. However, any additional funding must be identified in the project application form.
- 5.3.5 Administrative costs will be drawn from the overall budget allocations for each application.
- 5.3.6 Overheads will not be considered above 15% of the total project costs.
- 5.3.7 Specialists leading RHCE Projects and/or providing education activities for other specialists can expect reimbursement for their time and associated travel and accommodation costs. Specialists can be paid at an hourly rate which is consistent with the sessional fee for service rates for specialists that are paid by relevant state or territory government (depending on the organisational level at which these payments are established).

5.3.8 The PMC has the right to:

- o modify the funding priorities, in consultation with the Department, as appropriate;
- o request project applicants to modify their budget as appropriate for the project; or
- o request project applicants to modify their budget as appropriate, should a large number of applications be received, which the Project Assessment Panel deem appropriate to support.

5.3.9 The RHCE Program will not support budget items relating to:

- o Content developed under previously funded projects, unless it is being refined to fit the RHCE guidelines.
- o Content development for projects delivered by subcontractors where the content or material has already been developed (for either RHCE or non-RHCE activities).
- o Costs of purchasing (as distinct from developing) surgical, clinical or computer hardware or software.

5.3.10 The budget must clearly identify the costs for different items (for example labour, consultancy and design fees, materials, equipment, audit costs, contingency costs etc.). The onus is on the applicant to identify the relevant costs and adequately provide for them in the budget. These costs should be itemised, where possible, according to the key stages and milestones in the project schedule.

5.3.11 Budget costs must include GST in the overall final budget figure and provide for all relevant state, territory and Commonwealth taxes, surcharges and fees.

## **5.4 Collaborative Projects**

5.4.1 If this application is for a new RHCE project and is an inter-college collaborative project please state this in section 8 of the application form. Please also include with the application written agreement from all participating Colleges. In this written agreement please state in what capacity they are collaborating, who the contact person is, and an agreed budget between both parties of expenditure of the collaborating College(s). This written agreement can be in the form of an email or letter.

5.4.2 If this application is successful then a sub-contract must be drawn up between both parties.

## 6. Selection Criteria

The following criteria will be applied to applications for funding of CPD activities submitted by specialist Colleges and their Fellows, including MDT-based activities.

- Demonstration of identified need at 'local' level with respect to improved healthcare needs in organisational context.
- Location; rural and remote focus. The aim of the RHCE program is to provide CPD opportunities for eligible medical specialists and MDTs in rural and remote areas of Australia.\*
- Ability to involve interdisciplinary and inter-professional health professionals (multidisciplinary teams)
- Ability to contribute to retention of workforce at relevant site(s).
- Ability to reduce isolation and promote rural and remote practice through development of appropriate professional health networks.
- Demonstration of appropriate educational principles to enable key knowledge / skills attainment and transfer.
- Ability to demonstrate sustainable changes in practice leading to improvement in healthcare outcomes.
- Identification of suitable evaluation methodology.
- Demonstration of involvement of interdisciplinary stakeholders (multiple Colleges specialties).
- Ability to assist with building stakeholder (College) capacity to deliver sustainable outcomes.
- Ability to translate changes to multiple sites.
- Relative 'cost effectiveness' / 'value'.

\* *Weighting will be given to rural and remote prioritisation, as well as the multidisciplinary nature of activities.*

## 7. RHCE Program Further Information

For further information on the RHCE Stream One Program and Guidelines for accessing project funding, please contact the **RHCE Program Manager** on (02) 9256 5419 or at [admin@ruralspecialist.org.au](mailto:admin@ruralspecialist.org.au).

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