



An Australian Government Initiative

Personal Helpers and Mentors Program – Round 3

Please indicate whether
this is the original of this
form or Copy 1 or 2

ORIGINAL
(unbound)

COPY 1

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Application Form

Applications must be postmarked on or before Friday 25 July 2008.

Please return your completed hard copy application to:

Personal Helpers and Mentors Program – Round 3
PO Box 7442
CANBERRA BC
ACT 2610

Important Information

Before completing this form, please ensure that you are familiar with the purpose of the Personal Helpers and Mentors Program and the application pack which includes:

- Application Guidelines (and Application Form);
- Program Guidelines;
- Draft Terms & Conditions for the FaHCSIA Funding Agreement;
- Sites for Round 3.

Applications will be assessed according to the assessment process outlined in the Application Guidelines.

Privacy

You have been asked to provide personal information about contact persons at your organisation. This information may be used for:

- contacting the organisation about your application; and/or
- the purposes of conducting surveys and reviews of the Personal Helpers and Mentors (PHaMs) Program by the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) or organisations on behalf of FaHCSIA.

Individuals should be aware that their information is being provided to FaHCSIA. FaHCSIA may give that personal information to someone else in special circumstances (eg to the Police, Parliament or Parliamentary Committees), where Commonwealth legislation allows or requires, or where the person gives permission.

The names of successful applicants may be published on the FaHCSIA website or included in media announcements made by FaHCSIA or the Australian Government.

Enquiries

All enquiries about the Application Form and Application Guidelines should be directed to the PHaMs program application hotline on **1800 665 986** or to the PHaMs program email address at phams@nationalmailing.com.au.

The hotline will operate from Monday to Friday between 9am-5pm Australian Eastern Standard Time (AEST) commencing on Monday, 16 June 2008. A message bank service will be available after hours.

How to complete the Application Form

- Please keep your answers concise. To facilitate the assessment process, please list and respond separately to each question in the order presented in the Application Form.
- Page limits have been identified for each question. Information that exceeds the specified page limits **will not** be assessed.
- Please number the pages of your application.
- Please **do not** provide supporting financial information other than the information that is requested in Part 3, Financial Viability. Any other financial information provided **will not** be considered.
- Please **do not** provide referee reports. Referee reports **will not** be considered.

Additional information for sub-contracting arrangements

- FaHCSIA will only contract with individual providers. However, applicants may determine that efficient or effective service delivery is best achieved through the use of a network of providers through a sub-contracting arrangement. A successful provider who utilises an authorised sub-contracting arrangement will be held liable for all obligations contained in the terms and conditions of the funding agreement. This includes monitoring, management, financial performance, service outcomes, and specifically insurance coverage. For those applicants who intend to use sub-contracting arrangements, these arrangements must be clearly discussed in the response to Selection Criteria 3.

Mandatory compliance requirements

Applications that **do not meet** the following mandatory compliance requirements will be marked as **non-compliant** and **will not** proceed in the assessment process:

- applications **must** be postmarked on or before Friday 25 July 2008.
- applicants **must** apply for a nominated site as per the document identifying Round 3 sites;
- applications **must** address all criteria in Part 2 Selection Criteria 1 - 5. All criteria will be individually assessed;
- applications **must be** typewritten in Arial 12 point;
- applications **must be** submitted in hard copy – original copy (unbound) **plus** two copies;
- applications **must be** provided electronically on CD;
- **all** the information requested at Part 3, Financial Viability **must be** provided;
- Part 4 – Statutory Declaration **must be** completed, signed and dated.

Notes: FaHCSIA **will not** follow-up missing information with applicants.

A limit of 2 pages has been identified for each selection criterion. Information that exceeds the specified page limits **will not** be assessed.

Advice for applicants applying for funding in more than one site

- applicants can submit applications for more than one site;
- applicants who wish to submit applications for more than one site **must** provide a separate Application Form for each site;
- applicants submitting applications for more than one site can provide the **same** responses against Selection Criteria 1 - 2 for all their applications; and
- Selection Criteria 3 - 5, which seek information about local knowledge and linkages, are **expected to vary** across each application.

The Application Form is divided into 5 parts:

Part 1 – Applicant Details

Part 2 – Addressing Selection Criteria 1 - 5

Part 3 – Financial Viability

Part 4 – Statutory Declaration

Part 5 – Checklist

Part 1 Applicant details

1 What is the site for which the organisation is applying for funding?

State/Territory

NOTE: refer to document identifying Round 3 sites for specific site names and metropolitan or non-metropolitan status.

Site Name

Metropolitan or Non-metropolitan

2 Are you intending to use a sub-contracting arrangement?

Yes

NOTE: refer to the additional information for sub-contracting arrangements on page 2 of this Application Form.

No

If your application is successful you will be asked to provide the names and addresses of the other organisations that you will sub-contract to.

3 What is the legal name of the organisation?

4 What is the short name and/or trading name of the organisation (if applicable)?

5 What is the Australian Business Number (ABN) of the organisation?

6 Date of incorporation

NOTE: please provide a copy of your certificate of incorporation.

7 Is the organisation GST registered?	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

8 What is the postal address of the organisation's head office?

PO Box	<input type="text"/>		
Number and street name	<input type="text"/>		
Suburb/Town/Locality	<input type="text"/>		
City	<input type="text"/>		
State/Territory	<input type="text"/>	Postcode	<input type="text"/>

9 What is the physical address of the organisation's head office?

Number and street name	<input type="text"/>		
Suburb/Town/Locality	<input type="text"/>		
City	<input type="text"/>		
State/Territory	<input type="text"/>	Postcode	<input type="text"/>

10 What is the physical address from which Personal Helpers and Mentors services will be delivered?

Note: If you do not have an office in the site your answer should be 'Not Yet Known'

Number and street name	<input type="text"/>		
Suburb/Town/Locality	<input type="text"/>		
City	<input type="text"/>		
State/Territory	<input type="text"/>	Postcode	<input type="text"/>

11 What is the organisation's email and website address?

Email	<input type="text"/>
Website	<input type="text"/>

12 Who is the nominated contact person for the application?

Title (eg Mr, Mrs, Ms, Dr)	<input style="width: 100%;" type="text"/>
First name	<input style="width: 100%;" type="text"/>
Family name	<input style="width: 100%;" type="text"/>
Position in organisation	<input style="width: 100%;" type="text"/>
Phone number (include area code)	<input style="width: 100%;" type="text"/>
Mobile Phone number	<input style="width: 100%;" type="text"/>
Fax number	<input style="width: 100%;" type="text"/>
Email address	<input style="width: 100%;" type="text"/>

13 Who is the alternate contact person for the Application?

Title (eg Mr, Mrs, Ms, Dr)	<input style="width: 100%;" type="text"/>
First name	<input style="width: 100%;" type="text"/>
Family name	<input style="width: 100%;" type="text"/>
Position in organisation	<input style="width: 100%;" type="text"/>
Phone number (include area code)	<input style="width: 100%;" type="text"/>
Mobile Phone number	<input style="width: 100%;" type="text"/>
Fax number	<input style="width: 100%;" type="text"/>
Email address	<input style="width: 100%;" type="text"/>

14 Does the organisation have the minimum amount of Public Liability Insurance for not less than \$10 million for each and every claim and Professional Indemnity Insurance for not less than \$5 million per claim and in the aggregate, in a year as required by FaHCSIA?

Yes	<input style="width: 40px; height: 20px;" type="checkbox"/>
No	<input style="width: 40px; height: 20px;" type="checkbox"/>

NOTE: Please provide copies of your certificates of currency for Public Liability and Professional Indemnity insurance

15 Please provide a brief summary of your organisation, including your history of working with people with mental illness.

Your response should not exceed 1 single-sided A4 page typewritten in Arial 12 point.

NOTES:

- Your response to this question will not be assessed;
 - The information you provide may be used publicly by FaHCSIA or the Australian Government eg. in media announcements or on the FaHCSIA website.
-

Part 2 Addressing Selection Criteria 1 - 5

Please note the following when addressing selection criteria 1 - 5:

- Each selection criterion will be separately assessed;
- Number each selection criterion according to their order in the Application Form;
- Start a separate page for each selection criterion;
- A limit of 2 pages has been specified for each criterion – information provided that exceeds the specified page limit will not be assessed;
- For the purposes of this application a “page” is a single-sided A4 page, typewritten in Arial 12 point;
- In total, your responses to selection criteria 1 – 5 should be no more than 10 pages. Responses in excess of this limit will not be considered.

Selection Criteria 1 - 5

NOTE: Refer to the notes on page 8 before addressing these criteria.

Organisational Experience

1. Describe how your experience in delivering programs and services to people with mental illness will support the delivery of the Personal Helpers and Mentors Program.
 - Please provide examples of your experience that reflects your capacity to deliver the program in line with the Personal Helpers and Mentors service delivery approach that includes:
 - the principles of the Personal Helpers and Mentors Program;
 - strengths-based and recovery focussed approach; and
 - outreach and community based service delivery.

Management Capability

2. Demonstrate your organisation's ability to manage the Personal Helpers and Mentors Program.
 - Please include details about your organisation's internal infrastructure supports, including policies and procedures that will support the delivery of the Personal Helpers and Mentors Program.

Service Delivery Model

3. Describe how you plan to deliver the Personal Helpers and Mentors Program to the site. If you already deliver similar services in the site or, in particular, the Personal Helpers and Mentors Program in another site, you may like to use this experience to describe how you will deliver the program in this site.
 - Please include details about:
 - team structure and any organisational changes required to deliver the program;
 - the model you propose to implement including how you will deliver it,
 - specific target group(s) where applicable;
 - geographic coverage and the issues this may present for service delivery;
 - managing caseloads and ongoing demands for service;
 - attracting referrals;
 - involving participants, families, carers and friends in the design and delivery of the program; and
 - working with individuals in the broader social context.

Local Knowledge and Linkages

4. Provide evidence of your knowledge of, and familiarity with the nominated site and how the proposed service will be tailored to the site.
 - Please include details about:
 - local issues and need in the nominated site and their impact on service delivery;
 - demographics of the site, including the mental health population;
 - complementary services, including both clinical and non-clinical community services, available in the site; and
 - how you will work with local networks and other services to deliver outcomes for PHaMs participants. Include examples or evidence of your organisation's experience in this area.

Working with Special Needs Participants

5. Describe how you will tailor the services of the Personal Helpers and Mentors Program for participants from special needs groups in the site, for example, people from culturally and linguistically diverse backgrounds (CALD) and Indigenous Australians. Please include evidence of your current experience in delivering services to special needs groups.

Part 3 Financial Viability

Applicants are to provide sufficient information to satisfy FaHCSIA that the applicant has the necessary financial capacity to deliver the Personal Helpers and Mentors Program.

Applicants are required to provide:

- audited financial statements (including auditors' reports) for the last three financial years (2004-05, 2005-06, 2006-07) including profit and loss, balance sheet and notes to the account;
- an indicative annual budget; and
- the latest year to date financial reports (profit and loss and balance sheet).

Applicants are also required to:

1. Describe the financial management capability of the organisation including qualifications and experience of the Board and senior financial personnel in the organisation and strategic controls over finances (such as review by Board, audit or finance sub-committees, strategic planning).

NOTE: It is not expected that this would be in excess of a one page description.

2. Summarise other current contracts or funding agreements with any other bodies (Australian Government, State, Territory or Local Government).

In providing this information, applicants should summarise as per the following example:

"We have 27 funding agreements / contracts with 7 different bodies, 7 of which expire in June 2008, 15 expire in June 2009 and 5 expire in June 2010. The contracts total \$1.5 million in this financial year."

3. Provide details if any of the following apply to the organisation:

- significant litigation against the organisation (either current, pending or during the last three years);
- liquidation proceedings against the organisation (either current, pending or during the last three years) or any other formal charges;
- any outstanding tax liabilities; and/or
- future commitments or contingent liabilities which might affect the organisation.

Part 4 Statutory Declaration

Personal Helpers and Mentors Program 2006-2011

Australian Government Statutory Declaration

I,

(Full name of person making this declaration)

of

(Address of person making this declaration)

do solemnly and sincerely declare as follows:

AUTHORITY

that I am currently a

(Position/title (e.g. Proprietor, Director))

of

(Name of applicant,) [*Hereinafter referred to as applicant*]

and to the best of my knowledge the information given on this form is true and accurate.

STATEMENT OF COMPLIANCE

I confirm that I am a person authorised to make this statutory declaration on behalf of the applicant.

I confirm that the applicant:

1. Will regard all communications with FaHCSIA as confidential and not disclose their contents without FaHCSIA's prior written consent.
2. Has read the Application Guidelines.
3. Understands that the Application Guidelines are not an offer on the part of the Australian Government nor does it create any obligation on the part of the Australian Government to enter into a commercial or other relationship with any applicant.
4. Understands that FaHCSIA will have the right (but not be obliged) to act in reliance upon the contents of my response to the Application Guidelines, including its attachments, any statutory declarations and associated material.
5. Has read, understood and accepted the terms and conditions of the funding agreement and my organisation will be able to fully comply with those conditions.
6. Understands that incomplete applications **may not** be considered.

I am authorised to make this declaration on its behalf.

Authorisation

7. FaHCSIA is authorised to undertake the necessary steps to assess, (a) the financial viability of the organisation, and (b) the ability of the organisation to deliver the required Personal Helpers and Mentors Program Round 3 Service, by checking information contained within this application with, or obtaining additional information from:
- (a) FaHCSIA databases;
 - (b) Other Australian Government agencies such as the Australian Taxation Office, Australian Securities and Investments Commission;
 - (c) State or Territory agencies;
 - (d) Law enforcement agencies;
 - (e) Credit reference agencies;
 - (f) Courts or Tribunals;
 - (g) Referees; or
 - (h) Any other appropriate organisation or persons reasonably required as part of these checks.

No illegal activities

8. I confirm that:
- (a) The application to which this statutory declaration is appended has not been prepared with the benefit of:
 - (i) Information obtained from a current or former officer or employee of the Australian Government in circumstances that constitute a breach of confidentiality or fidelity on the part of that person or a breach of Section 70 of the Crimes Act 1914 (Cth), or regulation 2.1 of the Public Service Regulations Act 1999; or
 - (ii) Information otherwise improperly obtained from FaHCSIA or any other department or agency of the Australian Government.
 - (b) The applicant, through its officers, employees or agents, has not attempted and will not attempt, to influence improperly any officer or employee of the Australian Government in connection with the evaluation of the application;
 - (c) The applicant or any party proposed by the applicant to deliver any services to FaHCSIA has not been named under the Equal Opportunity for Women in the Workplace Act 1999 (Cth);
 - (d) The applicant understands and agrees to all conditions including without limitation the obligations and acknowledgments included in the Personal Helpers and Mentors Program Round 2 Application Guidelines.

Consents

9. The applicant:
- (a) Consents to and authorises the Australian Government, its officers, employees, agents or advisors to:
 - (i) Undertake confidential references, probity and credit checks regarding this application; and
 - (ii) Seek any financial or other relevant information required for the purpose of establishing the viability of the applicant;
 - (b) Agrees to promptly provide at the applicant's expense reasonable assistance to FaHCSIA to assist it in any checking it wishes to have undertaken under or in respect of this application.

I make this solemn declaration by virtue of the *Statutory Declaration Act 1959* and subject to the penalties provided by that Act for the making of a false statement in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

(Signature of person making this declaration)

Declared at

on

(Day/month)

(Year)

(Signature of person before whom this declaration is made)

(Printed name of person before whom the declaration is made)

(Qualifications of person before whom the declaration is made)

(Address of person before whom the declaration is made)

NOTE: A person who **wilfully** makes a false statement in a Statutory Declaration under the Statutory Declaration Act 1959 is guilty of an offence against that Act, the punishment for which is imprisonment for a term of up to four years.

Please read the notes on the next page

PERSONS BEFORE WHOM A STATUTORY DECLARATION CAN BE MADE

The Statutory Declarations Regulations provide that the following are persons before whom a statutory declaration can be made.

Members of the following professions

- Chiropractor.
- Dentist.
- Medical practitioner.
- Legal practitioner.
- Nurse.
- Patent Attorney.
- Pharmacist.
- Veterinary surgeon.

Other persons

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public.
- Australian Consular Officer, or Australian Diplomatic Officer, (within the meaning of the *Consular Fees Act 1985*).
- Bailiff.
- Bank officer with five or more continuous years of service.
- Building society officer with five or more years of continuous service.
- Chief executive officer of a Commonwealth court.
- Civil marriage celebrant.
- Clerk of a court.
- Commissioner for Affidavits.
- Commissioner for Declarations.
- Credit union officer with five or more years of continuous service.
- Holder of a statutory office not specified in another item in this list.
- Judge of a court.
- Justice of the Peace.
- Magistrate.
- Master of a court.
- Member of the Australian Defence Force who is:
 - (a) an officer; or
 - (b) a non-commissioned officer within the meaning of the *Defence Force Discipline Act 1982* with five or more years of continuous service;

(c) or a warrant officer within the meaning of that Act.

- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants.
- Member of the Institute of Corporate Managers, Secretaries and Administrators.
- Member of the Institution of Engineers, Australia, other than at the grade of student.
- Member of:
 - (a) the Parliament of the Commonwealth; or
 - (b) the parliament of a State; or
 - (c) a Territory legislature; or
 - (d) a local government authority of a State or Territory.
- Minister of religion registered under Division 1 of Part IV of the *Marriage Act 1961*.
- Notary public.
- Permanent employee of:
 - (a) the Commonwealth or of a Commonwealth authority; or
 - (b) a State or Territory or of a State or Territory authority; or
 - (c) a local government authority; with five or more years of continuous service who is not specified in another item in this list.
- Permanent employee of the Australian Postal Corporation with five or more years of continuous service who is employed in an office supplying postal services to the public.
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made.
- Police officer.
- Registrar, or Deputy Registrar, of a court.
- Senior Executive Officer of the Commonwealth, or of a State or Territory, or of a Commonwealth, State or Territory authority.
- Sheriff.
- Sheriff's officer.
- Teacher employed on a full-time basis at a school or tertiary education institute.

Part 5 Checklist

- Part 1** All questions answered.
- Brief summary of organisation attached
- Copies of the Certificate of Incorporation, Certificates of Currency for Public Liability and Professional Indemnity insurance attached.

Part 2 All Selection Criteria 1- 5 answered (noting page limit).

- Part 3** Audited financial statements (including auditors' reports) for the financial years 2004-05, 2005-06 and 2006-07, including profit and loss, balance sheet and notes to the account, attached.
- The latest year to date financial reports (profit and loss and balance sheet) attached.
- All questions answered.

Part 4 *Statutory Declaration* completed.

General The following original (unbound) and two copies have been completed and are attached:

- ORIGINAL
- COPY 1
- COPY 2
- Compact Disc