



NADA
network of alcohol and
other drugs agencies

NGO Service Development Grant Program

GRANT APPLICATION

Applications are to be submitted via email:

victoria@nada.org.au

Closing date for applications is:

5pm Wednesday 10 April 2019

It is recommended that applicants read the application guidelines prior to completing this application form.

SUBMISSION CHECKLIST

Please ensure you have completed the following before submitting this application:

- SDG Program Guidelines read
- Eligibility criteria met
- All fields completed [if you have left a field unanswered please indicate why in the text box]
- Application signed
- Application submitted on time

Questions about the guidelines or application process

For questions about the application process please contact Victoria Lopis, NADA Project Officer at victoria@nada.org.au or on 02 8113 1307.

The NSW Ministry of Health has contracted NADA to administer the Service Development Grant (SDG) Program. For any questions related to this funded program, please contact Eliza Quinert, Assistant Policy Officer, Clinical Safety and Quality, Ministry of Health at eliza.quinert@health.nsw.gov.au or on 02 9461 7747.

Please note that in the interest of equity all questions received about the SDG Program will be logged in the **FAQ document** and made available to any interested party through the NADA website www.nada.org.au.

Eligibility for assessment

Please note that your application will only be assessed by the Selection Panel if the following conditions are met:

- i. Your organisation meets the eligibility criteria, and
- ii. Your application is received on time (by 5pm on Wednesday 10 April 2019), and
- iii. You have completed all relevant fields in the form below. If you have not answered a question please explain why in the text box below the question. Incomplete application forms cannot be assessed.

SECTION A: ORGANISATIONAL DETAILS

Please complete organisational details for lead agency below.

Organisation Name/s		
Program/Service Name/s		
Service type e.g. withdrawal management		
Postal address		
Main contact person (Name and position)		
Contact details	Telephone:	Email:
Alternate contact (Name and position)		
Contact details	Telephone:	Email:
Registered Non-Government Organisation in line with the grant guidelines	<input type="checkbox"/> Yes <input type="checkbox"/> No	Attach evidence to this application e.g. certificate of registration as a registered non-government organisation.
Contracted by NSW Health to provide AOD treatment services	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please include a brief outline of NSW Health AOD funding arrangements (max 50 words).

SECTION B: PROJECT SUMMARY

Application type	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership			
Partnership details (Only applicable for partnership applications)	Organisation	NGO Y/N	Name and position title	Role & contribution to project
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Project Setting (Location, setting, treatment offered in setting, whether the setting is regional, metropolitan, remote, etc.)				

<p>Grant stream (Identify the grant stream that is the primary focus of the application).</p>	<p><input type="checkbox"/> Stream 1 – Align practices to the core treatment processes for AOD (outlined 1.3.1 of the grant guidelines) OR <input type="checkbox"/> Stream 2 – Improve client experience of orientation, navigation and/or access to AOD treatment services.</p>
<p>Project overview (max 200 words)</p> <p>A brief overview of the proposed project</p>	
<p>Total funding requested (excluding GST)</p>	<p>\$</p>
<p>Project timeline Please refer to the key dates in the grant guidelines for guidance.</p>	<p>Project to commence:</p> <p>Project finalised:</p> <p>Total timeframe:</p>

SECTION C: PROJECT DESIGN

Problem identification

Outline the specific problem/opportunity that the project aims to address (max 300 words).

Aim/s

Outline the project aim/s (max 200 words).

Objectives

Outline the objectives of the project (max 200 words).

Methods and approach

Describe how the project will be carried out and provide a brief rationale for the method chosen (max 300 words).

Scope

Outline the proposed scope of application of the project, including the geographic and service reach of the project, what is to be included and excluded, the number of sites or setting(s) and the workforce the project applies to (200 words max).

SECTION D: PROJECT RELEVANCE AND IMPACT**Outcomes**

Describe expected project outcomes (max 200 words).

Alignment to grant stream

Describe how the project aligns with the chosen grant stream (max 200 words).

Sector-wide applicability

Describe the extent to which the project has relevance and potential applicability to the NSW AOD treatment sector more broadly (max 200 words).

Principles of practice

Describe how the principles of AOD treatment practice will be considered and applied to achieve the desired project outcomes (max 200 words).

SECTION E: IMPLEMENTATION

Project Budget

Outline the project budget using the table provided. Refer to the application guidelines_information on funding caps. Please note that funding cannot be used for capital works, general maintenance costs, general telephone/communication systems (unless integral to the practice change), basic office equipment such as desks and chairs), rent and the cost of utilities.

Please provide sufficient and relevant detail to demonstrate how the funds support project implementation and achievement of stated outcomes.

Insert additional rows as required for individual budget line items

Expenditure item	Funding requested (GST exclusive)	In kind support
Personnel/salaries/consultant fees		
Administrative costs		
Materials/Equipment		
Other		
TOTAL		

Project timeline

Outline the key project milestones against timeframes. Insert additional rows as required. (max 200 words)

Milestone	Timeframe

Organisational capacity

Outline the governance and support structures to manage and implement the project, including process for identifying and managing specific project risk/s (max 200 words).

SECTION F: EVALUATION

Evaluation Plan

Outline how the project's outcomes will be measured and evaluated against the objectives (max 400 words).

SECTION G: DISSEMINATION

Findings and learning dissemination

Clearly outline how, and through what channels, findings and learnings from the project will be shared with the AOD treatment sector. Applicants should consider suitable and creative ways of disseminating this information. E.g. information may be presented at a relevant conference or forum, published in specific article, and/or distributed via relevant newsletter communications (max 300 words).

SECTION H: CERTIFICATION AND AGREEMENT

In submitting this application, I certify that:

- The organisation/s has/have the capacity to manage the project and will provide appropriate resources and support.
- I understand that successful applicants will be required to enter into a performance agreement.
- I understand that submitting this application does not guarantee funding.

If this application is successful, I agree that:

- NGO Service Development Grant funds will be quarantined for this specific project.
- The project will be completed **by 20 December 2019**.
- A brief progress report will be provided as documented in the performance agreement.
- A final report will be provided as documented in the performance agreement.
- Financial reporting will be provided as documented in the performance agreement.
- Reporting information will be used by NADA to report on outcomes of the Service Development Grant Program to the NSW Ministry of Health and its members.

Authorised by Chief Executive or nominated delegate (lead organisation)

Name and position	
Signature	
Date	