

Medical Practitioner Workforce Plan for Queensland

Phase Two Funding Opportunity Guidelines

These guidelines are intended to provide an overview of the funding opportunity application process to support the implementation of the second phase of the *Medical Practitioner Workforce Plan for Queensland* (MPWP4Q). In particular, this document sets out:

- the purpose of the funding opportunity;
- eligibility requirements and assessment criteria for the funding opportunity;
- how expressions of interest (EOI) and applications for funding will be considered and assessed;
- how funding recipients will be monitored and evaluated.

This document should be read prior to completing an EOI and funding application form and may be amended following the EOI process.

1. Overview of funding opportunity application process

Funding will be awarded following a two-part application process (please refer to Attachment 1 – Flowchart of the funding application process).

1.1 EXPRESSION OF INTEREST

An EOI template has been developed to gather information in relation to the eligibility of applicants and the suitability of their proposed activities and projects. The EOI template also contains the assessment criteria upon which EOIs will be assessed.

EOIs must be completed and submitted to the Medical Advisory and Prevocational Accreditation Unit (MAPAU) within the specified timeframe and in accordance with the requirements of the EOI. Please note that submitting an EOI does not guarantee funding.

1.2 INVITATION TO APPLY FOR FUNDING

An invitation to apply for funding will be issued to applicants assessed as suitable as a result of the EOI assessment process. This part of the application process will include an application form to gather further information about the applicant's proposed activities and contain the assessment criteria and additional requirements upon which applications will be assessed.

Applicants will be required to complete and return the application form together with all requested attachments to MAPAU. Please note that submitting an application does not guarantee funding.



Applications from those invited to apply for funding must be for the same activities and applicant entity type as specified in the EOI.

1.3 SCHEDULE OF APPLICATION PROCESS

The below dates are indicative only and subject to change:

Phase	Timeframe
<i>Timeframes are indicative only and may be subject to change</i>	
EOI period	27 May 2019 – 5 July 2019
Assessment of EOIs	8 July 2019 – 26 July 2019
Advice to EOI applicants	29 July 2019 – 2 August 2019
Invitation to apply for funding (successful EOIs only)	5 August 2019 – 13 September 2019
Assessment of applications	16 September 2019 – 4 October 2019
Funding decision	7 October 2019 – 11 October 2019
Confirmation of funding agreements; advice to unsuccessful applicants	14 October 2019 – 25 October 2019

2. Medical Practitioner Workforce Plan for Queensland

The MPWP4Q was developed and released in 2017 to support the delivery of a high quality and well distributed medical workforce through activities that increase training opportunities, assist retention and provide support to medical practitioners. The MPWP4Q aims to increase the number of Australian-trained medical graduates within specialties which have been reliant on international medical graduates and which have been projected to be in, or at risk of, undersupply. Furthermore, it aims to improve the health outcomes of people living in regional, rural and remote locations in Queensland by encouraging medical practitioners to live, train and work in these communities.

The MPWP4Q comprises the following linked strategic priorities:

Strategic priorities	Objectives of the MPWP4Q
Priority areas	<i>Invest in and support specialist workforces which are currently in or at risk of shortage.</i>
Shared data collection and analysis	<i>Enhance collaboration to enable shared identification and understanding of challenges that will need to be addressed by multi-faceted solutions.</i>
Strengthening the primary care medical workforce	<i>Support a skilled and distributed GP workforce to meet Queensland's primary health care needs, particularly in rural and remote areas.</i>
Support for the next generation	<i>Encourage graduates and junior doctors into specialties and locations where there is need.</i>
Securing a medical workforce to deliver services to regional and rural communities	<i>Leverage significant increases in the medical workforce to address shortages in current and projected staffing requirements to achieve greater distribution of the workforce into regional, rural and remote health services.</i>
Enabling sustainability	<i>Invest in Queensland's future medical leaders.</i>
Doctor wellness (incorporated at the end of 2017)	<i>Provide support to the medical practitioner workforce via targeted initiatives or interventions which address experienced wellness issues or that facilitate cultural change.</i>

Please refer to Attachment 2 for the intended outcomes of the MPWP4Q.

3. Phase One (2017 to 2019) funding deliverables

For the first phase of the MPWP4Q, Queensland Health committed significant funding to:

- Enable the creation of additional Director of Psychiatry Training positions and development of electronic resources for trainees and supervisors to augment the delivery of psychiatry training in regional, rural and remote communities.
- Increase training capacity in several specialties via additional registrar positions in paediatric anaesthesia, paediatric radiology, anatomical pathology, public health medicine and addiction psychiatry.
- Improve the collection and reporting of medical workforce data.
- Progress accreditation pilot programs for postgraduate year 2 (PGY2) doctors.
- Establish a Medical Workforce Advisory Group to enable broad stakeholder advice and input into workforce planning activities.
- Develop a medical careers website to inform medical student and junior doctor career trajectories.
- Develop a regional post fellowship transition scheme to support newly qualified specialists prior to regional practice.

- Increase leadership and management training opportunities for medical practitioners.
- Facilitate procedural skill upskilling opportunities for rural general practitioners and rural generalists within Queensland Health hospitals.
- Support events for junior doctors and Queensland's rural medical workforce.
- Facilitate resilience and mindfulness training for Queensland's medical intern workforce.
- Establish a collaborative working group to identify and address issues related to the health and wellbeing of the medical practitioner workforce.
- Map health and wellness resources currently available to medical practitioners working in Queensland.

4. Proposed Phase Two (2020 to 2022) funding deliverables

Key focus areas for the MPWP4Q project funding are:

- Increasing medical student and junior doctor interest in medical specialties and areas which are or have been in shortage.
- Improving the distribution of the prevocational, vocational and specialist medical workforces.
- Augmenting and supporting 'grow our own' sustainable workforce and regional training networks.
- Improving medical workforce data collection, projection, analysis and reporting to ensure continued efficacy of workforce modelling.
- Supporting the mental and physical wellness of the medical profession.

5. Funding amount and period

Queensland Health has committed up to \$9.9 million over three years for the second phase of the MPWP4Q over the 2020-21, 2021-22 and 2022-23 financial years.

Funding is intended to be transferred to funding recipients in Amendment Window 1 of each financial year (for HHSs).

The EOI and funding application processes will be administered by MAPAU with assistance from members of the Medical Workforce Advisory Group (please refer to Attachment 3 – Medical Workforce Advisory Group membership).

6. Funding eligibility criteria

6.1 WHO IS ELIGIBLE TO APPLY

To be eligible for funding, applicants must:

- have an ABN;
- be registered for the purposes of GST; and
- have an account with an Australian financial institution.

Applicants must also be one of the following entity types within Queensland:

- a hospital and health service;
- a company incorporated in Australia;
- a company incorporated by guarantee;
- an incorporated trustee on behalf of a trust;
- an incorporated association;
- a partnership;
- a joint (consortia) application with a lead organisation;
- a registered charity or not-for-profit organisation;
- an Australian local government body; or
- an Aboriginal and/or Torres Strait Islander Corporation registered under the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* (Cth).

Evidence of eligibility must be provided with an application for funding following an accepted EOI.

6.2 JOINT (CONSORTIA) APPLICATIONS

It is recognised that in delivering medical workforce initiatives, some organisations will need to make joint (consortia) arrangements, particularly those in regions where a public and/or private hospital cannot provide requisite training. In these circumstances, a consortia application for funding may be submitted. In such cases, the nominated lead entity must meet the above eligibility criteria and submit an application on behalf of the consortium that clearly identifies all other consortium members and includes letters of support from each member.

Letters of support should include:

- details of the partner organisation;
- an overview of how the partner organisation will work with the lead organisation (and any other partner organisations in the group) to successfully deliver the funded activity;
- an outline of the relevant experience and/or expertise the partner organisation will bring to the group;

- the roles/responsibility of the partner organisation and the resources they will contribute (if any); and
- details of a nominated management level contact officer.

A copy of a formal arrangement between all parties which confirms the above will need to be provided to MAPAU if such an application is approved for funding.

7. Funding principles

Funded activities must be consistent with the strategic priorities, objectives and intended outcomes of the MPWP4Q. Activities may encompass:

- Initiatives which improve the coordination, selection, training placement management and progression towards achieving endpoints within required timeframes of vocational trainees in rural, regional and remote communities.
- Enhanced marketing of, and/or increase placements to regional, rural and remote prevocational or vocational training positions.
- Development of system wide education, integration and support projects to enhance training networks which address geographic disparities and enable workforce sustainability.
- Additional training positions within specialties and/or communities which are currently in, or at risk of, undersupply.
- Generalist and specialist training and upskilling.
- Recruiting, retaining and supporting medical practitioners to work in regional, rural and remote communities.
- Development of data collection and maintenance mechanisms, workforce planning tools, labour force surveys, information technology systems development and infrastructure including websites to underpin evidence-based workforce program reform and implementation.
- Assistance with accreditation or facilitation of health services, other training facilities and supervisors against accreditation requirements for vocational training in rural, regional and remote communities.
- Facilitate training in Aboriginal and Torres Strait Islander health settings, and provide culturally safe and appropriate training and health service delivery.
- Support services and products to maintain and enhance the physical and mental wellbeing of medical practitioners.

Funding recipients may only spend the funds on eligible activities and associated additional expenditure which may include:

- Salaries and related costs of professional and administrative support staff to deliver the program.
- Administration and management functions integral to the support and overall achievement of the funded activities objectives and outcomes.
- Data and reporting activities as outlined in this document.
- Business processes to support delivery of the grant (development of operational and administrative guidelines, surveys, and data and reporting activities).

The Decision Maker makes the final decision on what is eligible expenditure and may provide additional guidance on eligible expenditure if required.

7.1 WHAT THE FUNDING CANNOT BE USED FOR

Items that are not eligible for funding include:

- Activities that are not agreed to by Queensland Health/the Department of Health prior to execution of the funding agreement.
- Activities that are already funded on an ongoing basis by other Australian, State or Local Government programs.
- Projects where the purchase of information systems is the main component of the project.
- Purchase of any equipment.
- Activities outside of Queensland and Australia.
- Activities which support political campaigns.
- Purchase of land or premises.
- Capital expenditure.
- Construction/capital works.
- The covering of retrospective costs.
- Costs incurred in the preparation of a funding application or related documentation.
- Ongoing operational costs such as electricity, telephone and rent.
- Ongoing annual fees for the use of computer software.
- The purchase of consumables.
- Leasing or purchasing of medical devices.
- Purchasing or leasing of motor vehicles.
- Tax liabilities associated with the receipt of receiving funding.
- Travel and accommodation costs associated with recruiting staff.
- Overseas travel.
- Elective surgery and outpatient funding.

- Clinical trials.
- Recurrent positions or non-sustainable initiatives.
- Conference registration fees or costs associated with attendance at conferences.

8. How to apply

EOI and applications for funding must be submitted on the templates available within the specified timeframes. The declaration included in the EOI and funding application form must be signed by a person authorised to act on behalf of the applicant. In the event of a consortium, only the lead organisation is required to sign the declaration.

Applicants are responsible for ensuring that their applications are complete and accurate when submitted to MAPAU. Applicants should contact MAPAU immediately if they discover an error in an application after submission. MAPAU at its discretion may request clarification or additional information from applicants that does not alter the substance of an application in response to an omission or error of form.

Submitting an EOI or application for funding does not guarantee funding.

8.1 EXPRESSION OF INTEREST

To submit an EOI, applicants must complete the EOI template application form and provide all requested information to MAPAU-MWP@health.qld.gov.au by the specified due date.

8.2 INVITATION TO APPLY FOR FUNDING

Applicants will be invited to apply for funding and complete an application form addressing all eligibility criteria (including proof of entity type) and assessment criteria.

9. Assessment criteria

Applications must address the assessment criteria detailed below. The amount of detail and supporting evidence provided with applications should be relative to the size, complexity and funding amount requested. The weightings identified below will be applied:

Assessment Criteria	Weighting
Criterion 1: Alignment with MPWP4Q strategic priorities objectives and outcomes	50%
Criterion 2: Capability and capacity to undertake the proposed activities	25%
Criterion 3: Efficient and effective use of funding	15%
Criterion 4: Risk and risk management	10%

9.1 CRITERION 1 – ALIGNMENT WITH MPWP4Q STRATEGIC PRIORITIES, OBJECTIVES AND OUTCOMES

Applications are to include a detailed description of the proposed model for delivering funded activities and how they will contribute to delivering one or more of the MPWP4Q strategic priorities, objectives and outcomes, particularly for specialties and regions of identified need or undersupply.

Applications must include an evidence base which underpins the proposed activities and is consistent with national, state, and/or regional medical workforce published data.

Applications should demonstrate an applicant's ability to link into existing and developing medical workforce initiatives without duplicating activities or causing disruption of existing activities.

Applications should also sufficiently detail the network of clinical providers who will be engaged in the implementation of the proposed activities.

Detailed activity work and implementation plans must also be included with an application.

9.2 CRITERION 2 – CAPACITY AND CAPABILITY

Applications are to demonstrate the applicant's ability to undertake the activities contained within the application.

Applications must provide evidence of support from their organisation's board, chief executive or equivalent.

Consortia applications must include evidence of support from each participating entity (please refer to 6.2 above).

9.3 CRITERION 3 – EFFICIENT AND EFFECTIVE USE OF FUNDING

Applications are to demonstrate that the proposed activities are affordable and present value for money.

Applications must be accompanied by a detailed cost breakdown of the activity costs.

As the funding is non-recurrent, applications are to demonstrate how the proposed initiative will be self-sustaining. In particular, applications should specify how the initiative will attract a sustainable funding based after the funding has ended.

Applications should also specify:

- Partnership arrangements with existing institutions (for example co-located facilities with other education/health providers, partnering with research institutes) which may be involved in the delivery of the proposed activity.
- Co-investment from local/state governments, the private sector, charitable organisations, medical specialist colleges, universities or other organisations.

9.4 CRITERION 4 – RISK MANAGEMENT

Applications are to detail anticipated key risks or issues associated with the proposed activities and provide a risk management plan for the anticipated risks including ownership of the risk, mitigation strategy(s) and prioritisation.

10. Assessment process

An Assessment Committee comprised of representatives from the Medical Workforce Advisory Group will assess each EOI and application on its merits.

10.1 EXPRESSION OF INTEREST ASSESSMENT

The Assessment Committee will review EOIs against the information provided and how they respond to the assessment criteria. EOIs will be rated as either 'suitable' or 'unsuitable' as per the table below:

Rating	Description
Suitable	Demonstrates a satisfactory understanding of the objectives and intended outcomes of the MPWP4Q and the assessment criteria and related issues. A capable response/solution, which demonstrates capacity and capability for delivery and potential to provide value for money. At a minimum, there may be a minor level of risk that the proposed outcomes are not achievable.
Not suitable	Application does not align with the objectives and intended outcomes of the MPWP4Q or is not supported as a priority for investment by MWAG.

The Assessment Committee will provide a recommendation to the decision maker as to which EOIs should be progressed to receive an invitation to apply for funding. Unsuitable EOIs will be notified accordingly.

10.2 APPLICATION ASSESSMENT

The Assessment Committee will assess applications against the assessment criteria:

- The overall objective/s to be achieved via the funding.
- The relative value of the funding sought.
- The extent to which the evidence in the application demonstrates that it will contribute to meeting the objectives and outcomes of the MPWP4Q.

- Links with medical education and training networks which demonstrates a commitment to a sustainable training pathway and capacity, particularly in regional, rural and/or remote communities.

A weighted classification scoring method has been selected as the most appropriate scoring methodology. Applications will be assessed against the following scoring method:

Rating scale for all assessment criteria	Score
Excellent quality – response to this criterion, including all sub-criteria exceeds expectations. Additional evidence is available and confirms consistent superior performance against this criterion.	9-10
Good quality – response to this criterion, addresses all or most sub-criteria to a higher than average standard. Some additional evidence is available and confirms good performance against this criterion.	7-8
Average quality – response against this criterion, meets most sub-criteria to an average but acceptable level. Some additional evidence is available and provides some support for claims against this criterion.	5-6
Poor quality – poor claims against this criterion but may meet some sub-criteria. Additional evidence available may be lacking detail and/or not directly relevant to the criterion.	2-4
Does not meet criterion – response to this criterion does not meet expectations or, insufficient or no information to assess this criterion. Little or no additional evidence available.	0-1

Applications are required to obtain a score of at least 5 or more for each criterion to be considered. The assessment scores for the criteria will be scaled according to the weighting indicated below to determine the final score. These weightings are based on a percentage allocation that totals 100 per cent across all assessment criteria, with the most important assessment criterion being allocated the highest percentage and the least important assessment criterion being allocated the lowest percentage as outlined below:

Assessment Criterion	Weighting
Criterion 1: Alignment with MPWP4Q objectives and outcomes	50%
Criterion 2: Capability and capacity to undertake the proposed activities	25%
Criterion 3: Efficient and effective use of funding	15%
Criterion 4: Risk and risk management	10%

The Chief Health Officer and Deputy Director-General, Prevention Division, Department of Health is the decision maker for this funding opportunity. Application outcomes will be advised in writing.

11. Funding agreement and activity reporting

MAPAU will liaise with successful applicants to confirm the quantum and schedule for funding including:

- The maximum funding amount to be paid.
- Any financial or in-kind contributions the funding recipient must make (if relevant).
- Any financial contribution provided by any third parties (if relevant).

Funding recipients will be responsible for:

- Ensuring that the terms and conditions of the funding are met and that funded activities are managed in an efficient and effective manner.
- Employing and managing staff required to deliver the activities.
- Maintaining contact with the department and advising of any emerging issues that may impact on the success of the activities.
- Identifying, documenting and managing risks and putting in place appropriate mitigation strategies.
- Meeting milestones and other specified timeframes.
- Ensuring that activity outputs and outcomes are in accordance with the funding agreement.
- Participating in activity evaluation as necessary.

An agreement will confirm the obligations and activities which are to be carried out, including progress/data reports at designated points throughout the funding period. These may include:

- Project and implementation plans.

- Progress reports which must include evidence of progress towards completion of agreed activities and show the total eligible expenditure incurred to date and any modifications to the project and implementation plans.
- Forward planning reports outlining the planned actions, objectives and milestones for the upcoming year.
- Input into time sensitive data requests.
- Ad hoc reports to inform policy decisions or identify any significant delays or difficulties in completing the funded activity.
- A final report at the completion of funded activity which includes agreed evidence demonstrating achievement of the activity as specified in the funding agreement and which confirms the total eligible expenditure incurred.

Queensland Health reserves the right to request an independently audited financial acquittal report to verify that funding recipients spent the funding in accordance with the funding agreement. Reporting templates will be provided by MAPAU.

12. Evaluation

MAPAU will evaluate the funded activities to measure how well the outcomes and objectives have been achieved. Information from applications and reports will inform this purpose.

Funding recipients will also be expected to provide any additional information to assist in evaluating how effective the program was in achieving its outcomes.

13. Conflicts of interest

A conflict of interest, or perceived conflict of interest, may arise if applicants:

- Have a professional, commercial or personal relationship with a party who is able to influence the application assessment selection process, such as a Queensland Government officer or member of the Assessment Committee;
- Has a relationship with, or interest in, an organisation which is likely to interfere with or restrict the applicant from carrying out the proposed activities fairly and independently;
or
- Has a relationship with, or interest in, an organisation from which they will receive personal gain because the organisation received funding via this opportunity.

Applicants will be asked to declare any perceived or existing conflicts of interest as part of an application for funding, or that to the best of their knowledge, there is no conflict of interest. If applicants later identify an actual, apparent, or perceived conflict of interest, they must inform MAPAU in writing immediately. The decision maker will make a final declaration in relation to any conflict of interest matters.

14. Privacy, confidentiality and protection of personal information

Personal information collected by the Department of Health is handled in accordance with the *Information Privacy Act 2009* (Qld). The Department of Health is collecting contact details (such as names, telephone numbers and email addresses), professional information (such as medical qualifications, position/s of employment) and corporate financial information as part of the EOI and funding application process. This information will primarily be used to assess suitability and merit for funding. All personal information will be securely stored and only accessible by MAPAU. Information provided as part of an EOI and application for funding may be given to members of the Assessment Committee and the broader Medical Workforce Advisory Group for the purpose of assessing suitability and merit of an EOI and an application for funding. Personal information will not be disclosed to other third parties without consent.

Attachment 1: Flowchart of the funding application process

Attachment 2: Intended outcomes of the MPWP4Q

Within two years	Within two to five years	By the end of the decade
<ul style="list-style-type: none"> • Integration of collaborative medical workforce data collection and planning activities. • Ready access by employers to medical workforce data sets. • Initial investments in small but critical workforces and specialties which have been in shortage. • Development of action plans for the most critical workforce shortages, inclusive of working with education providers to ensure adequate training availability. • Publication of resources to support career planning, including access to workforce reporting. • Existing mechanisms for collaboration between rural and metropolitan services and medical practitioners nourished and new ones established. • Implementation of a targeted upskilling and postgraduate fellowship program to support medical practitioners in regional, rural and remote locations. • Mechanisms for fostering “grown our own” and regional training networks have been developed, piloted and implemented. 	<ul style="list-style-type: none"> • Monitoring of workforce numbers to determine effectiveness of the MPWP4Q's implementation. • Review and adjust forecast to ensure continued efficacy of the outcomes of the workforce modelling. • Increase in medical student and junior doctor interest in medical specialties and areas which have been in shortage. • Evaluate the targeted upskilling and postgraduate fellowship programs to support medical practitioners in rural locations - Monitor and adjust fellowship positions to meet service need as required. • Significant growth and support of “grown our own” and regional training networks. • Use information from research to review and adjust programs and strategies to support generalist careers. • Significant growth and support of education and training programs to expand clinical, people management and leadership skills of effective medical managers and leaders. 	<ul style="list-style-type: none"> • The available supply of medical practitioners is aligned with service needs to meet patient care. • Medical practitioner workforce information is systematically used in service planning and local decision making. • Rural and regional medical practitioners are routinely able to access professional support from metropolitan network partners. • Regional and rural centres are viewed and valued as great providers of prevocational and vocational training and specialist practice. • Employers have structured succession planning and development initiatives for all medical managers and leaders. • Consideration of health and wellness of the medical practitioner workforce considered core business of medical workforce planning. • Continued review of the health and wellness indicators of the medical practitioner workforce.

Within two years	Within two to five years	By the end of the decade
<ul style="list-style-type: none"> • Generalist qualifications and programs for medical practitioners are promoted and expanded. • Undertake further research on the factors that have the greatest return on investment for attracting and retaining generalist medical practitioners. • Mechanisms to identify, develop and professionally nurture effective medical managers and leaders have been implemented. • Provide resilience and mindfulness training to all Queensland medical interns. 	<ul style="list-style-type: none"> • Baseline review of the health and wellbeing of the medical practitioner workforce in Queensland, including mental wellbeing, physical health and aspects of healthcare access. • Mapping of health and wellbeing resources currently provided by employers, training providers and professional organisations. • Further exploration of the feasibility of PGY2+ accreditation. • Establishment of collaborative body to identify and address issues associated with medical practitioner wellbeing. • Identify targeted interventions which address health and wellness issues experienced across Queensland facilities. 	<ul style="list-style-type: none"> • Queensland employs an engaged medical practitioner workforce, with employees feeling well supported by both their employers and their peers.

Attachment 3: Medical Workforce Advisory Group membership

Australian Medical Association Queensland

Australian Medical Association Queensland - Doctors in Training

Central Queensland, Wide Bay, Sunshine Coast Primary Health Network

Children's Health Queensland Hospital and Health Service

Clinical Excellence Queensland, Queensland Health

General Practice Training Queensland

Generalist Medical Training

Health Service Chief Executives' Forum, Queensland Health

Health Workforce Queensland

Healthcare Purchasing and System Performance Division, Queensland Health

Junior Medical Officer Forum of Queensland

Medical Schools Liaison Committee

Metro North Hospital and Health Service

North West Hospital and Health Service

Private Hospitals Association of Queensland

Queensland Committee of Medical Specialist Colleges

Queensland Medical Students' Council

Queensland Rural Medical Service, Queensland Health

Regional Training Hubs (James Cook University / University of Queensland)

Rural Doctors Association of Queensland

Strategy, Policy and Planning Division, Queensland Health

Townsville Hospital and Health Service