

F	\cap	rr	n	Δ

Community Wellness and Suicide Prevention Grants – Project Ready

Organisational information

Organisational details				
If successful, this is the organisation that will sign a contract with NQPHN.				
Trading name				
ABN				
Contact details (The person with the authority to submit this response on behalf of the organisation)		Name : Position : Phone : Email :		
Are you applying as an indivi	idual orga	anisation, or as part	of a formal partnership or aus	pice arrangement?
Individual organisation	As a partnership or auspice arrangement			
If applying as a partnership or auspice arrangement, the name and ABN of each partner organisation, and the intended responsibilities of each organisation.				
Location of project or initiative				
Location/s				
Relevant postcode/s				







Eligibility criteria

Aligns with TRISP guidance

All projects must align with guidance for Targeted Regional Initiatives in Suicide Prevention (TRISP). Please tick to indicate your project aligns. Guidance can be found here.

2 Aligns to a priority population group

All projects must relate to at least one priority population group. Please tick to indicate which of the following your project relates to.

project rolates to.		
Aboriginal and Torres Strait Islander peoples	LGBTQIA+SB people	
Culturally and linguistically diverse communities and refugees	People experiencing homelessness or housing instability	
Children and young people, including those in out-of-home care	Older Australians (over 65, or over 50 for Aboriginal and Torres Strait Islander peoples)	
People living in regional, rural, and remote areas of Australia	People experiencing or at risk of abuse and violence, including sexual abuse, neglect and family and domestic violence	
People with a disability	Australian Defence Force members and veterans	
People experiencing socioeconomic disadvantage	People who are (or were previously) in contact with the criminal justice system	

3 Willingness to work in partnership with NQPHN and Suicide Prevention Community Action Plans

NQPHN funds Suicide Prevention Community Action Planning (SPCAP) across northern Queensland. If you are successful, you will be required to engage with SPCAP committees and coordinators relevant to your region. Please tick this box to indicate you are willing to do this.

4	Existing preser	ce within the	northern (Queensland	d regior
---	-----------------	---------------	------------	------------	----------

All applicants must have an existing presence within the NQPHN region. Please provide the street address/es of where your organisation is located.

Assessable criteria

All applicants must respond to each of the following criteria, which will be assessed by a grants assessment panel.

1	Project proposal	
Please describe your proposed project or initiative, including the work to be undertaken, how it will be operationalised (eg. staff, volunteers, contractors), and proposed timeline for completion.		
Page limit		Up to 1 page

2	Rationale			
Describe the rationale for the project or initiative – why is this project or initiative important?				
Page	Page limit Up to 1 page			

3	Project readiness		
What preparation has been undertaken already, and how will your project or initiative will be ready to commence between July and September 2024?			
Page	Page limit Up to 1 page		

4	Lived experience engagement		
How have you consulted with people with a lived experience of suicide in designing your project or initiative? How do you plan to engage them whilst delivering your project or initiative?			
Page limit Up to 1 page			

5	Psychological wellbeing			
What initiat	What strategies will you have in place to support the psychological wellbeing of those undertaking the project or initiative?			
Page	limit	Up to ½ page		

6	Budget	
What initiat	is the total budget needed for your project or ive?	
What proportion of the budget relates to staff, contractors, and/or volunteers?		
	des staff/volunteers/contractors, what other costs nvolved?	
Are the providence of the prov	here any in-kind supports or funding being ded? If so, please provide details.	