

Funding Program 2019/20

Expression of Interest (EOI)

Instructions for Submission:

Each health service can submit a **maximum of two** EOIs. Speak to your nominated local representative (see Table 2 in attached funding guidelines) **before** completing this template as your idea may not fit with local priorities. All EOIs **must** be submitted via the nominated local representative.

Advice can be sought from Michael Barton (Quality & Performance Manager) on 03 8559 9062 or michael.barton@wcmics.org

Expressions of Interest are due for submission to WCMICS by **5pm on Monday 9 September** via contactus@wcmics.org

Project title: (Max. 350 Characters)

Please list health services to be included in this project:

	Djerriwarrh Health Services		Royal Women's Hospital
	Melbourne Health		St Vincent's Hospital Melbourne
	Peter MacCallum Cancer Centre		Werribee Mercy Hospital
	Royal Victorian Eye & Ear Hospital		Western Health
	Additional organisations:		

Please list tumour stream(s) to be included in this project:

	Breast		Central Nervous System
	Colorectal		Endocrine/Thyroid
	Genitourinary		Gynaecology
	Haematology		Head & Neck
	Lung		Skin/Melanoma
	Upper GI		All

Please indicate which *WCMICS 2019-20 Operational Plan* priority area/s is being addressed by this project:

	Better understand and address social and cultural barriers that may affect access to services
	Monitor and assess patients' experiences of care, both locally and statewide, and include quality of life and other patient-reported outcome measures to better understand treatment impacts.
	Continue to improve our service system through approaches that engage both public and private providers, and improve accessibility, coordination across the care pathway and outcomes of care.

Project Details

Please stay within the set word limits. Applicants will have the opportunity to further explain their project ideas in person at an evaluation panel Q&A session to be held after submission.

Problem statement – what issue will the project address? (Max. 500 Characters)

How would this project build on or link in with other existing known work? (Max. 500 Characters)

What benefits will the project bring for patients? (Max. 500 Characters)

Brief project summary: (Max. 2500 Characters.)

Optional - Links to external references to support you proposal. (Max. 1500 Characters)

Briefly describe on-going sustainability of project deliverables post funding. (Max. 1500 Characters)

Total Funding Requested (incl. GST):	\$
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Endorsements

Applicant declaration:

<i>I certify that the information in this Expression of Interest is accurate and has been compiled in accordance with the WCMICS Funding Program Guidelines 2019/20.</i> <i>The EOI has been discussed with relevant stakeholders, including my line manager and listed partner organisations.</i>	
Name:	
Position:	
Organisation:	
I understand that checking this box constitutes a signature confirming that I acknowledge and agree to the above declaration.	Date:

Nominated local representative declaration:

<i>I certify that this Expression Of Interest has organisational support and has been prioritised internally by this health service for the WCMICS Funding Program 2019/20.</i>	
Name:	
Position:	
Organisation:	
I understand that checking this box constitutes a signature confirming that I acknowledge and agree to the above declaration.	Date:

Partner organisation declaration:*

<i>I fully support my organisation's involvement in this potential project</i>	
Name:	
Position:	
Organisation:	
I understand that checking this box constitutes a signature confirming that I acknowledge and agree to the above declaration.	Date:

* Optional. Attach additional sheets if more than one partner organisation engaged.