**2024 NSW Health Infrastructure Arts and Health Award**  
  
**Guidelines and Application Form**

**Applications close: 5pm, Monday 9 September 2024**

**Amount awarded $10,000 (GST excl.)**

**Purpose**

The NSW Health Infrastructure Arts and Health Award is aimed at supporting cultural organisations working in partnership with the health sector to deliver positive health and wellbeing outcomes for the community through arts and cultural projects.

The Award aims to:

* Support cultural projects and activity that provide accepted health and wellbeing outcomes to community
* Build capacity for arts in health care across NSW Local Health Districts
* Encourage development of partnerships between a museum, gallery or Aboriginal cultural centres and their Local Health District
* The Award also acknowledges the cultural collections across health services that celebrate the contribution of NSW Health staff to caring for our communities for more than 200 years.

The successful award will go to one proposal and receive a cash award of $10,000 (GST Excl.) to support the project. The Award will be presented at the 2024 IMAGinE Awards and promoted online and via social media.

**Eligibility**

**Who can enter the Award?**

NSW based public museums, galleries, Aboriginal cultural centres, artist-run galleries, or volunteer-run museums or galleries that are open to the public are eligible to be the primary applicant for nominations.

Other cultural organisations, including RADOs, would need to partner with one of the above.

Local Health Districts and/or local catchment NSW Health Service must partner with the above listed cultural organisations as the applicant organisation.

**We are a cultural organisation. How do we know what our Local Health District (LHD) and/or local catchment NSW Health Service is?**

You can search for your [Local Health District](https://www.health.nsw.gov.au/lhd/Pages/default.aspx) on the NSW Health website.

**Can anyone help me create a partnership with our LHD or local catchment NSW Health Service?**   
For advice how to connect with your LHD please contact [HI-Arts@health.nsw.gov.au](mailto:HI-Arts@health.nsw.gov.au)

**We are a cultural facility within a public health organisation. Are we eligible to apply?**

Yes, on the provision that you clearly meet the Purpose of the Award. Please contact M&G NSW to discuss your project. <admin@mgnsw.org.au>

**Selection Process**

1. Submit your completed application form, making sure you have provided all information by 5pm, Monday 9 September 2024
2. Applications will be reviewed by a Selection panel comprising representatives of M&GNSW, NSW Health, Regional Public Galleries of NSW and Australian Museum and Galleries Association (NSW)
3. The successful applicant will be notified in early November and announced at the 2024 IMAGinE Awards ceremony.

**Selection Criteria**

Priority will be given to projects that demonstrate:

1. Partnership project/program between cultural and health institutions
2. Capacity for the project/program to relate to the Future Health Strategy to improve EITHER
   1. community wellbeing, patient and/or carer benefit through high quality arts experiences OR
   2. commitment to cultural asset management and improved access to health care collections
3. Sustainability – potential for the project/program to be viable *or* scalable beyond the life of the proposed program period.
4. Program - Projects MUST start between January 1 2025 – 31 December 2025

**Additional considerations**

1. Public health organisations, arts/health workers may apply, noting the nominee should be the museum, gallery, Aboriginal keeping place or cultural centre.
2. Commercial organisations, tourist centres and other non-health organisations are ineligible to apply.
3. Successful applicants will be awarded $10,000 +GST towards their project/program, payable upon tax invoice.
4. As a guide, The NSW Future Health Strategic Framework can be found here [*NSW Future Health: Strategic Framework (2022-2032)*](https://www.health.nsw.gov.au/about/nswhealth/Documents/future-health-strategic-framework.PDF)

**How to submit your Application**

The Award application form (contained below in this document) and support material must be submitted online by the closing date via the M&G NSW IMAGinE Awards webpage: <https://mgnsw.org.au/sector/support/imagine/>

To save your files for submission:

* Save the file with your organisation’s name and the category you are entering.
* Please use an underscore ( \_ ) to separate words e.g. OurMuseumGallery\_Art and Health Award.doc

Applications for the Award can be submitted by completing the form below and should include:

* A project outline (no more than 500 words)
* A simple budget outlining how you will use the $10,000 Award
* The name and contact person for the Local Health District Department or Facility that you will be working with
* Any artists, creatives or providers you are intending to work with
* Support material as detailed below in the application form.

For further information, visit the NSW Health Infrastructure Arts and Health Award [FAQ](https://mgnsw.org.au/sector/programs/nsw-health-infrastructure-arts-and-health-award/nsw-health-award-faq/) and [Case Studies](https://mgnsw.org.au/sector/programs/nsw-health-infrastructure-arts-and-health-award/case-studies-nsw-health-award/) page.

**Arts and Health Award Enquiries:**

**Jason Gee, Communications Manager**  
[jasong@mgnsw.org.au](mailto:jasong@mgnsw.org.au) / [0424 773 626](tel:0424%20773%20626)

***The NSW Health Infrastructure Arts and Health Awards is proudly supported by NSW Health Infrastructure***

**APPLICATION FORM**

Please complete and submit via the M&G NSW website here:

<https://mgnsw.org.au/sector/support/imagine/>

Contact details (Person to be contacted regarding this Award application)

**Organisation:**

**Contact person:**       **Position:**

**Phone:**       **Email:**      

**Street address:**       **Suburb:**

**State:**       **Postcode:**

**Postal address:**        **Suburb:**

**State:**       **Postcode:**

Project description

**Name of museum, gallery or Aboriginal cultural centre:**

**Local Health District (or** local catchment NSW Health Service**):**

**NSW Health Contact Person:**       **Position:**

**Phone:**       **Email:**      

**Title of project:**

**Proposed dates of project:**

**Provide an outline of the project** (max. 500 words)

This summary should give a clear, concise overview of the project and its impact on community.

Budget

Outlining the $10,000 Award allocation

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| --- | --- | --- | --- | --- | --- |
| Name of Item  or Service | Cost  including GST | Amount  Requested  (GST  EXCLUSIVE) | Amount  contributed by  applicant | Amount  provided by  other sources | Comments |
| **Project Costs** | | | | | |
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| TOTALS: |  |  |  |  |  |

\* Budget should be accurate and realistic. NSW Health Infrastructure funds provided as part of this Award should not be used to cover operational costs, existing staffing or infrastructure. All creative fees should be in line with the [NAVA Code of Practice.](https://code.visualarts.net.au/)

Support material

The following support material must be submitted with your nomination:

• Up to THREE pages (maximum) of documentation which supports the nomination. This can include images, suggested file formats are word doc, pdf or PowerPoint.

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| --- | --- |
|  | Support Material details (i.e. image details, name of document) |
| 1 | Click or tap here to enter text. |
| 2 | Click or tap here to enter text. |
| 3 | Click or tap here to enter text. |

AND

• TWO high quality images of the proposed project (300 dpi jpegs max. 2MB each). These images and supplied credits will be used in online and printed promotional material and at the awards presentation.

|  |  |  |
| --- | --- | --- |
| Image No. | Image file name | Image credit for promotional use |
| 1 | Click or tap here to enter text. | Click or tap here to enter text. |
| 2 | Click or tap here to enter text. | Click or tap here to enter text. |

Declaration

By checking this box, I agree that I have read the guidelines relating to the award. I certify that to the best of my knowledge, all the information in this application is correct and has been approved by the board or management or relevant authority, and that I have the delegated authority to sign this application.

Name: Click or tap here to enter text.

Date: Click or tap to enter a date.