

WELLBEING FIRST INNOVATION HUB APPLICATION FORM

Thank you for your interest in participating in the Queensland Alliance for Mental Health's Wellbeing First Innovation Hub. There are six (6) sections of criteria that apply towards your application. Please ensure Criteria 1-5 and the Declaration have been completed (noting that Criteria 5 has several parts and Criteria 6 does not require your response as this will be assessed by QAMH) before submitting your application.

How to submit?

Please submit your completed application form, letter of support and short answers to each question keeping within the word limits described to:

QAMH CEO, Jennifer Black

 jblack@qamh.org.au

Applications close: 9am Monday 22 August 2022.

For any questions, contact the QAMH office on 07 3394 8480 during business hours.

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APPLICATION INFORMATION

Organisation Name:

Organisation Address:

Applicant:

Email:

Phone:

CRITERIA 1 – Describe your role and how you will use your influence within your organisation to drive innovation throughout this project (10 points. Limit to 500 words)

CRITERIA 2 – What excites you about *Wellbeing First* and what potential value does this opportunity offer your organisation? (20 points. Limit to 500 words)

CRITERIA 3 – Outline the issue or problem you experience in your service, that *Wellbeing First* principles and approaches will help to innovate a new service response? (15 points. 500 word limit)

CRITERIA 4 – What could challenge your successful engagement in the project and how might you and your organisation overcome this, to ensure you get the most out of the *Wellbeing First* Innovation Hub? (15 points. Limit to 500 words)

CRITERIA 5 – Throughout the wellbeing first innovation hub the time commitment is likely to be up to 2 hours per week for training and mentoring with at least 2 extra hours per week to work internally with your team to design, test and implement innovation and design thinking. (20 points)

If successful I will commit to:

Eight-week intensive design thinking course (16 hours)

Monthly mentoring from Nov 22 to July 23 (16 hours)

Identification and implementation of a design project within organisation (40 – 60 hours)

Sharing information and showcasing innovation (1-2 days)

Who is your Executive Sponsor?

Name:

Position:

Email:

You will require a letter of support from your executive sponsor which should include:

- How the sponsor will support the applicant to participate fully in the program.
- How the organisation sees the value of *Wellbeing First*.
- How the organisation will stay involved and committed to the innovation process.
- What in-kind support can be offered by the organisation to the participant?
- The sponsors willingness to engage with QAMH throughout the life cycle of the project.
- The sponsors willingness to share organisational learning with the wider sector.

In addition, in less that 300 words describe how you will ensure that lived experience is at the heart of the design process within your organisation.

CRITERIA 6 – Length of membership with QAMH – this section needs no response and will be scored by QAMH (20 points).

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DECLARATIONS

Participant Declaration

I acknowledge the commitment involved in participating in the *Wellbeing First* Innovation Hub. I confirm that I will be able to meet the requirements and participate in at least 80% of the formal training and mentoring sessions and work within my service on a project using design thinking with the knowledge that this will be shared with the wider community mental wellbeing sector.

Signed:

Name:

Date:

Executive Sponsor

Please note a letter of support from your Executive Sponsor to participate in the project should be attached to this application.

I have attached my letter of support

I acknowledge that I have given full support to this application and will agree to support the participant to lead a service design project within the service. I understand that the value of this training is \$4500 and a deposit of \$1000 will be required to secure the position and that deposit will only be returned on completion of the program (min 80% attendance).

Signed:

Name:

Date:

Please note that an interview process may form part of the selection process.