NSW GOVERNMENT | HETI HEALTH EDUCATION & TRAINING

WHERE INNOVATION DRIVES
EXCELLENCE IN EDUCATION AND TRAINING
FOR IMPROVED HEALTH OUTCOMES

RURAL MEDICAL TRAINEE SCHOLARSHIP 2020/21

APPLICATION GUIDELINES

PURPOSE

HETI aims to support equity of access to education and training for NSW Health prevocational and vocational medical trainees working in rural or remote areas. Rural Medical Trainee Scholarships are offered to these trainees to provide financial support for costs directly incurred by accessing activities of continuing professional development (CPD) outside of their current locality.

ELIGIBILITY CRITERIA

In order to qualify for the Rural Medical Trainee Scholarship, applicants must be:

- ☐ Accessing a CPD activity requiring travel of a distance greater than 150 kilometres from current locality and;
- ☐ An Australian or New Zealand citizen or permanent resident and;
- ☐ Based in a NSW Health rural hospital site (MMM3-7) with a contract of nine months or greater and;
- ☐ Employed as a prevocational or vocational medical trainee (full-time or part-time) under the NSW Health Public Hospital Medical Officers (State) Award and;
- ☐ Supported by their Network Director of Training or Line Manager.

APPLICATION REQUIREMENTS

All scholarship applications must include the following:

- ☐ Completed Rural Medical Trainee Scholarship 2020/21 Application Form and;
- ☐ Proof of Australian / New Zealand citizenship or permanent residency and;
- ☐ Document confirming current employment at a rural training facility with a contract of 9 months or greater (e.g. Letter of Offer from employer) and;
- ☐ Evidence of CPD activity (e.g. information flyer or email from the event organiser noting the following details: payment receipt, date, location, purpose and intended attendees of activity/event) and;
- ☐ Evidence to support priority for funding (e.g. sample of the training program curriculum which outlines CPD activity as a mandatory activity) and;
- ☐ A letter from Network Director of Training or Line Manager on Health Service letterhead (template included on Page 4 for reference) containing the following:
  - Confirmation of their support for the nominated CPD activity
  - Priority of the nominated activity and;
- ☐ Quotes (minimum of two each) and/or receipts for any travel and/or accommodation expenses.

SCHOLARSHIP PRIORITISATION CATEGORIES

Scholarship amounts are capped at $4,500 (including GST) per applicant. Priority for scholarship will be given according to the following ranking:

Priority 1 (P1): Mandatory Requirement

- Completion of the CPD activity is a mandatory requirement for completion of current training program.

Priority 2 (P2): Essential Knowledge or Skill

- CPD activity addresses a knowledge or skill gap considered to be an essential requirement for current stage of training program;

Priority 3 (P3): Desirable Knowledge or Skill

- CPD activity may be a requirement for prospective entry onto a training program or rotation or;
- CPD activity addresses an individual or service skill gap but is a non-essential requirement for training program or current training rotation.

Priority 3-4 (P3-P4): Leadership and Management Development

- CPD activity develops skills in clinical teaching, supervision, leadership or management. Development in these areas for PGY3+ applicants will be granted Priority 3.

A summary chart of the prioritisation categories has been included below:

	PGY1	PGY2	PGY3	PGY4	PGY5+
Mandatory	P1	P1	P1	P1	P1
Essential	P2	P2	P2	P2	P2
Desirable	P3	P3	P3	P3	P3
Leadership	P4	P4	P3	P3	P3

All applicants will be required to provide evidence of their CPD activity prioritisation (e.g. copy of training program curriculum outlining CPD activity as a mandatory activity). Priority for funding must also be outlined in their Letter of Support provided by the applicant's Director of Training or Line Manager.

All applicants who identify as Aboriginal or Torres Strait Islander will be categorised as Priority 1 for scholarship.

OTHER GENERAL CONDITIONS AND GUIDELINES

1. Total scholarship funds are capped at $4,500 (incl. GST) per applicant. The $4,500 scholarship cap applies to the combined cost of the nominated CPD activity and the travel and accommodation expenses directly incurred by the activity.
2. Applicants must be required to travel of a distance greater than 150 kilometres from current locality to attend their nominated CPD activity, as calculated by the Australian Distance Calculator. https://distancecalculator.globefeed.com/Australia_Distance_Calculator.asp
3. Applicants must be working in rural or remote hospitals with classifications between MMM3 and MMM7 inclusive, as classified by the Modified Monash Model. http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator
4. Nominated CPD activities must take place between 1 July 2020 and 30 June 2021.
5. Scholarships will be awarded as a reimbursement of expenses. Please refer to Travel Policy (PD2016_010) for limits on travel and accommodation reimbursements. Expenses for petrol and meals will not be reimbursed. For use of a personal vehicle, travel allowances are calculated at 68c reimbursement per kilometre in line with ATO guidelines.
6. Applicants must provide evidence of attendance immediately after successful completion of the CPD activity. Scholarship funds will be released upon receipt of proof of attendance. Applicants may have

their scholarship offer revoked should they fail to attend and/or successfully complete the nominated educational and/or training activity/event.

7. CPD activities may include short-courses, long-courses, workshops, programs, exams, conferences and relevant tertiary study. College registration fees are not accepted as an activity of continuing professional development. Only CPD activities offered in Australia will be accepted for scholarship. Online CPD activities are not eligible for scholarship.
8. Only complete applications with all supporting documentation will be reviewed. Requests to follow-up any incomplete applications will be made via email. Applicants will be provided with 4 days to submit missing information or documentation. Failure to return requested information within 4 days will automatically annul the application.
9. Applicants must declare any other prior source of funding support received or to be received for the nominated activity/event.
10. Scholarship funding is not guaranteed. All applications are required to undergo an applications screening and assessment process to determine eligibility and priority for funding.
11. Scholarship funding amounts will be determined on an application-by-application basis according to the application criteria, total funding requested, total funding available, total number of CPD activities nominated and priority of the CPD activities nominated. Funds awarded may not cover all costs associated with the education and training activity.
12. HETI will email applicants to confirm receipt of their application. Applicants will be notified of their application outcome via email within 28 days of application closing date. Due to the high volume of applications received, applicants should follow-up if they not received correspondence from HETI within 28 days of submitting their application.
13. Applicants must notify HETI of any changes to information provided in their application. HETI reserves the right to rescind the scholarship if change of circumstances annuls eligibility for the scheme.
14. Funds granted to eligible trainees under this scheme does not negate any of the Trainees' State Award employment conditions.
15. Trainees are advised that the ATO may consider support received under the scheme to be an assessable allowance which may attract income tax obligations. Trainees are advised to seek independent taxation advice where required.
16. All applicants are bound by the NSW Health Code of Conduct (PD2015_049). Information supplied by the applicant will be taken in good faith to be true and accurate. If an applicant is found to have supplied misleading or false information, this may result in payment being withheld, or a scholarship refund requested.

APPENDIX 1: Template Letter of Support

<Agency/institution letterhead>

<Date>

Dear HETI Rural Medical Trainee Scholarship Applications Review Panel,

Re: Letter of Support for Dr <Applicant Name> to receive HETI Rural Medical Trainee Scholarship 2020/21

I am writing to provide my support for Dr <Applicant Name>'s application for the HETI Rural Medical Trainee Scholarship 2020/21.

Dr <Applicant Name> is currently employed at <Hospital> as a <Applicant Position (PGYx)> on a temporary contract commencing on the <Contract Commencement Date> and concluding on the <Contract Conclusion Date>.

I am aware that Dr <Applicant Name> has applied to receive a scholarship to complete the <CPD Activity Name> to be held on <CPD Activity Date>.

It is in my opinion that scholarship funding for this CPD activity should be categorised as a priority level (please select):

- ☐ **Priority 1 (P1): Mandatory Requirement**

  Completion of the CPD activity is a mandatory requirement for completion of current training program.

- ☐ **Priority 2 (P2): Essential Knowledge or Skill**

  CPD activity addresses a knowledge or skill gap considered to be an essential requirement for current stage of training program.

- ☐ **Priority 3 (P3): Desirable Knowledge or Skill**

  CPD activity may be a requirement for prospective entry onto a training program or rotation or;

  CPD activity addresses an individual or service skill gap but is a non-essential requirement for training program or current training rotation.

- ☐ **Priority 3-4 (P3-P4): Leadership and Management Development**

  CPD activity develops skills in clinical teaching, supervision, leadership or management. Development in these areas for PGY3+ applicants will be granted Priority 3.

<Enter any further information or character reference>

I fully support Dr <Applicant's Name> for a HETI Rural Medical Trainee Scholarship. Please do not hesitate to contact me should you need any further information.

Kind regards,

<Network Director of Training/Line Manager Signature>

<Network Director of Training/Line Manager Name>
<Position>
<Contact Email>
<Contact Phone>