



ASSURA COMMUNITY FUND GRANTS PROGRAMME CRITERIA

2020

GUIDANCE FOR APPLICANTS

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1. INTRODUCTION TO THE PROGRAMME

A note from Jonathan Murphy CEO, Assura Plc and Zoe Sheppard, CEO, Cheshire Community Foundation.

Thank you for considering applying for funding through the Assura Community Fund Grants Programme. This programme recognises that people's health is determined by a range of social, economic and environmental factors and that, alongside the valuable services provided by primary healthcare providers, the voluntary sector plays a vital, complementary role in addressing vulnerable people's needs in a holistic way, supporting individuals to take greater control of their own health and wellbeing. The combination of primary healthcare and non-medical interventions has been shown to have powerful emotional, cognitive and social benefits as a viable route to reducing social exclusion - both for disadvantaged, isolated and vulnerable people - and for people with mental health problems.

At the time of writing this introduction, the United Kingdom was still in covid-19 lockdown. It was therefore very important to us that our grants programme recognised the need for post covid-19 support and resilience.

We would welcome applications from UK charitable organisations, supporting vulnerable people who may have experienced bereavement, trauma or mental health issues arising from the pandemic, to help them to move forward positively with their lives.

Do take the time to read the full programme criteria. We look forward to receiving your application and seeing how this grants programme can make a difference to people's lives across the UK.

Jonathan Murphy
Assura Plc

Zoe Sheppard
Cheshire Community Foundation

2. PROGRAMME PARAMETERS

This programme wishes to strengthen the capacity of charitable/voluntary sector organisations to deliver a range of project activities which **must** take place: -

within 15 miles of an Assura healthcare building
(see further guidance in Section 5. Who can Apply?)

The programme aims to help support vulnerable people, referred to voluntary sector organisations either from primary care/health professionals or who have self-referred. It was felt that this support was particularly important to build resilience following on from the covid-19 pandemic, and also taking into consideration the appointment of NHS England-funded Link Workers across the UK, who will each be managing a caseload of people in need, provided with a “social prescription”, seeking appropriate activities to signpost and link to, for a range of non-medical interventions, support and activities.

Programme activities must be targeted towards improving mental and emotional health and wellbeing, gaining support for life challenges and providing increased activities and opportunities to learn new skills, to enable improved self-confidence, self-esteem and a strong sense of belonging.

The programme wishes to support people of all ages including:

- Vulnerable people affected by the covid-19 pandemic who are in need of support for their mental health and wellbeing post-covid-19.
- People with mild to moderate depression and anxiety.
- People with long-term and enduring mental health problems.
- People that frequently use primary care services.
- Vulnerable groups and people who are socially isolated (low-income single mothers, recently bereaved elderly people, people with chronic physical illness, those recently made redundant, those with caring responsibilities and newly arrived communities).
- People living in places with the highest levels of disadvantage (due to income deprivation, poorly paid jobs, lack of access to support) who are often at a much higher risk of experiencing mental health problems.
- The programme particularly recognises that many people living in deprivation and isolation often begin to experience physical decline or mental health deterioration in their 40's/50s and can find it difficult to secure or remain in employment. Equally, middle aged adults looking after young children at the same time as caring for older parents are often vulnerable to stress or mental health issues (many are starting families later and may have 'sandwich caring' responsibilities). Therefore increasingly, women in their 40s and 50s are more likely to face the mental health pressure of simultaneously shouldering responsibility for young and old.

- We welcome applications seeking to work with people who might not have appropriate support systems around them to access help - disabled people; people from Black and Minority Ethnic (BAME) groups; Lesbian, Gay, Bisexual and Transgendered (LGBT) young people; people from lower social economic groups; children and people who may experience chaotic lifestyles.

The grants will fund:

- **Staff costs** - Budget for staffing, including full-time staff, part time staff, sessional staff and other related expenses, e.g. a volunteer coordinator (but **not a Link Worker**, as this would duplicate NHS England funding).
- **Volunteer costs** - reimbursements of expenses, e.g. telephone calls, travel and subsistence.
- **Activity costs** - resources to facilitate a project/activity, e.g. catering, insurance, room hire.
- **Small capital items** - to enable activities to take place such as craft materials, sports/health and wellbeing equipment etc.
- **Transport costs** - for activities that may be short travel distances away, to ensure that these are accessible.

3. PROGRAMME PRIORITIES

The area where the project activities take place **must** be within a **15-mile radius** of an Assura healthcare building.

We would give priority to applications which:

- Can build **strong working relationships** with referral agencies – including GPs, other primary care/health professionals, NHS Link Workers.
- Can demonstrate good practice and a clear rationale as to why the project activity would be successful and be able to record and demonstrate the impact of the activity.
- Provide opportunities for beneficiaries to get involved in the planning, design, delivery, and evaluation (See also Section 12).
- Demonstrate innovative approaches designed to respond to clearly defined needs.

4. GRANT FUNDING AVAILABLE

- There is a **£550,000 available** in **2020** for one-year grants (further funds may be made available in future years).
- The minimum grant is **£1000**, maximum grant **£5000**.
- **C.100** grants are likely to be awarded overall.
- If you are considering submitting a strategic partnership proposal, we may consider a higher grant amount – prior to applying please in the first instance, email us at **assura@cheshirecommunityfoundation.org.uk** providing a brief outline of your proposal and how we may contact you to discuss it further. These applications will be developed in close association with Assura and Cheshire Community Foundation and, where possible, involve partnership working and linkages with primary care providers, where your project is being delivered.

5. WHO CAN APPLY

- Charitable organisations who can deliver activities and services in line with the programme criteria, **within 15 miles of an Assura healthcare building**
- The Programme is open to UK based registered charities, constituted community groups and other charitable organisations including Social Enterprises and CICs that are able to deliver mental health and wellbeing projects to vulnerable people - either referred to them by GPs and other health and social care providers, including Link Workers, or by self-referral.
- To check if the location of the majority of the people you will support is within 15 miles of an Assura owned healthcare building, click this link and enter a relevant postcode:- **<https://www.assurapl.com/our-buildings>**.
- Partnerships may apply but there must be a single organisation **as the lead applicant** - and all other partners must be eligible for funding.
- Organisations must operate within a recognised constitution, set of rules or written governing document.
- The programme will only consider National charitable organisations, if they can demonstrate that they are the best organisation to tackle a particular issue or need and there is no local organisation able to deliver activities of a similar nature.

Organisations need to have:

- Been running community activities, for a minimum of 12 months which health care professionals could make referrals to.
- Be able to acknowledge each referral made in a timely manner, informing the person supported when they can expect to receive service/more detailed contact from you.
- Have appropriate insurance in place for activities, staff and volunteers.
- Have robust information, governance, policies, and procedures (such as, Data Protection, Confidentiality and Information Security) that are appropriate for your organisation/activity - and comply with all current legislation.
- Have in place Safeguarding policies and procedures that are appropriate for your organisation/activity - and comply with all current legislation.
- Have in place DBS checks for eligible staff, trustee, and volunteer roles.
- Have the authority of your organisation to provide new services/increased services to accommodate increased social prescribing referrals.
- Have in place Health & Safety Policies, Risk Assessments and Procedures that are appropriate for your organisation/group/activity and comply with all current legislation.
- Have in place Equal Opportunities Policies and Procedures that are appropriate for your organisation/group/activity and comply with all current legislation.

6. OUTCOMES

We are looking to fund projects which can meet at least **one or more** of the outcomes below and be able to measure success against the qualitative and quantitative indicators of success:

Outcomes	Qualitative and Quantitative indicators
Improved access to services and support	Number of people reporting better access to services or support.
Improved aspirations for the future	Number of people reporting an increase in personal aspirations and goals. Number of people reporting increased self-esteem and confidence.
Improved mental health and wellbeing	Number of people reporting improved mental health or wellbeing. Number of people reporting a reduction of stress, anxiety and/or symptoms of depression. Number of people reporting increased resilience and/or self-care. Number of people reporting increased self-esteem and confidence. Number of people undertaking treatment/therapy to meet their needs. Number of people for whom the treatment/programme was successful or likely to be successful.
Improved physical health and wellbeing	Number of people reporting improved physical health or wellbeing. Number of people participating in sport, exercise and leisure activities. Number of people reporting that they are more physically active. Number of people undertaking treatment/therapy to meet their needs. Number of people reporting improvements in their diet, to be healthier and more balanced. Number of people for whom the treatment/programme was successful or likely to be successful.
Improved social networks	Number of people reporting improved social networks. Number of people reporting that they feel less lonely. Number of people reporting that they feel an increased sense of belonging in their community.
Increased interpersonal skills (social, communication and relationship skills)	Number of people reporting increased interpersonal (social, communication and relationship) skills. Number of people reporting improved social networks. Number of people reporting that they feel less lonely.
Reduced social isolation	Number of people attending activity sessions. Number of hours of community activity provided. Number of people reporting improved social networks.
Reduced levels of loneliness for individual people	Number of people reporting that they feel less lonely. Number of people reporting improved social networks. Number of people reporting improved mental health or wellbeing.

7. INELIGIBLE ORGANISATIONS AND ACTIVITIES

- Organisations generating private profit.
- Statutory organisations including schools, universities, or hospitals.
- National organisations, unless the application is submitted by a local office with a separate management committee, bank account and governing documents.
- Organisations promoting party political activity.
- Funding costs retrospectively, i.e. anything that has already been paid for or has already taken place or any costs incurred prior to receipt of a grant offer and signed terms and conditions.
- Applications from individuals.
- Applications seeking a contribution towards major building work, infrastructure, or capital refurbishment work.
- Any costs incurred when putting together the application.
- The programme is open to faith-based organisations. However, we cannot fund the practice of religion or any activities that actively promote a religion or belief systems (or the lack of belief). This is because these activities could exclude people from accessing an activity on religious grounds.

8. QUALITY PRINCIPLES TO CONSIDER

- Evidence of benchmarking/consultation with people for the activity which will be delivered.
- An understanding of relevant national best practice for the activity and how this might be relevant.
- A well costed budget which represents good value for money.
- Strong tools and techniques to measure and report on positive changes made.

9. WHEN TO APPLY

15th June 2020 – Programme Launch – online application is available.

14th September 2020 – Submission Deadline. We reserve the right to close the programme early **if we reach sufficient quantities and quality of applications sooner** than the deadline - therefore groups are encouraged to start the process as soon as possible and **apply early**.

28th September 2020 – All applications will have been first stage assessed. A maximum of **150 applications** will go through to full assessment (declined applications not progressing beyond the first stage will be notified).

2nd November 2020 – Up to **150** applications will have been fully assessed – this may include a telephone call, to clarify aspects of your application ready to be taken to a Panel for review.

15th November 2020 – **approximately 100 successful grantees awarded one-year grants. Grants must be able start as soon as possible after acceptance and by February 2021 at the latest**

10. TYPICAL EXAMPLES OF ELIGIBLE PROJECTS

The following activities are eligible:

- Arts and performance arts/music.
- Clubs/special interest.
- Community activities.
- Sports and recreation.
- Cookery/health eating.
- Cultural activities.
- Social action/volunteering.
- Gardening.
- Information advice and guidance support.
- Benefit claims/money matters/debt advice.

- Community transport initiatives eg for people discharged from hospital
- Support for people who are either in work or out of work for two years, with health conditions.
- Culturally sensitive activities which make activities more accessible and reach out to marginalised communities.

Other positive elements for people supported could include:

- Making new friends and feeling less isolated.
- Being better able to cope with the normal stresses of life and being more active, productive and having a sense of purpose.
- Being better able to talk about their mental health and wellbeing in new ways, with new people.
- Being better able to take positive action for themselves or others.

11. DOCUMENTS TO ACCOMPANY APPLICATION

- **A list of the names of your Management Committee/Board.**
- **A copy of your governing document (e.g. constitution, memorandum and articles or set of rules).**
- **A copy of your most recent annual accounts.**
- **A photocopy of a bank statement no more than 3 months old. The bank account must be in the name of the organisation applying.**
- **Copies of your safeguarding and equal opportunities policies.**

12. FINAL TIPS WHEN APPLYING

- Involve people in design, benchmarking, planning, delivery, and evaluation – ask people who you will be supporting for advice.
- Consider flexibility and responsiveness, which is considered key to great engagement. Regular activities held at the same time every week may work well but may not always be the right formula. Bite size events at key points in a timetable of activities could also be a possible option and help overcome clashes with other commitments and timing challenges, for example, for people who work or who have caring responsibilities.

13. FURTHER ADVICE

- For any enquiries about grant applications or the process of applying, please contact Cheshire Community Foundation on 01606 330 607 or email [**assura@cheshirecommunityfoundation.org.uk**](mailto:assura@cheshirecommunityfoundation.org.uk)
- Please also refer to the Programme's page on our website [**https://cheshirecommunityfoundation.org.uk/apply-for-funding/**](https://cheshirecommunityfoundation.org.uk/apply-for-funding/)

14. YOUR DATA WHEN APPLYING

By completing an application form for this programme, Cheshire Community Foundation will use the personal data about you and other individuals named in your application to assess and administer a grant application for the **Assura Community Fund Grants Programme**. Personal data about your Board or management committee may also be used for identification.

When necessary, personal data collected through the application process will be shared with Cheshire Community Foundation, Assura Plc, programme assessors and with other third parties, where the law permits or requires it.

Any photographs and commentary provided to support your application may include personal data relating to individuals supported by your project. These photos, logos and details may be used in promotional material created in relation to your application and may appear on our website and literature.

We will only use your information where we have a legal basis to do so, for example, to carry out our legitimate business interests to manage and promote our grants or to meet our legal or contractual obligations. By providing any personal data about another person, you are confirming that they understand how their data may be used and shared.

You have certain rights when it comes to your personal information. This includes rights to access and correct your information, and to erase, transfer, object to, restrict or take away consent around how we use your information. Please contact Cheshire Community Foundation if you or anyone named in your application has any concerns with the information being used publicly or if you wish to exercise any of these rights.

15. COMMUNICATIONS

For successful organisations we will be producing materials, press releases and social media posts to celebrate the grants awarded. We will always ask your permission before giving your contact details to the press or any third parties.

Organisations will also be able to produce their own literature; however, any public facing promotion will need to be signed off by Cheshire Community Foundation, including use of any programme or organisation's logos.

16. MONITORING AND EVALUATION

Successful organisations will be required to complete one formal End of Grant monitoring report at the end of the grant term but may be asked for a short interim update by email. We will be asking you how the grant was spent, as well as the difference the project has made (above and beyond measuring attendance and behaviour), what was achieved, any key issues and lessons learnt.

Before beginning the project, we suggest successful organisations take the time to read the End of Grant monitoring forms shared on award of grant, so that necessary information can be recorded from the outset. This should include:

- Sharing the evaluation form with staff in the organisation.
- Discussing and deciding specific goals based on the application.
- Deciding who will write the report.
- Collecting data from the outset.
- Quantitative data (numbers) – how many people are taking part or using the service, achieved goals (e.g. employment, improved health).
- Qualitative data (stories) – feedback from users and volunteers, observed increase in skills, confidence etc.
- Learning – feedback from project participants, what went well, what would you do differently etc.
- Build in time to complete the form.

Funded organisations should also be willing to discuss the progress of the project over the phone as and when necessary and to host visits that will assist with any interim monitoring, learning and best practice.