**Redbridge Social Prescribing Community Chest Small Grants Programme**

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| **Item** | **Question** | |
| **Eligibility checklist** | Your organisation has an annual income less than £250,000 and you are applying for a grant of less than £10,000 |  |
|  | a) Does your organisation/group operate on an entirely not-for-profit basis? |  |
|  | b) Will this request have at least 80% of its beneficiaries resident in the London Borough of Redbridge |  |
|  | c) Will the project run between 01/04/2023 and 31/07/2023 |  |
| **Organisation Details** |  |  |
| **TIP** | Section 1: In this section, you will be asked to provide information about your organisation. This section is important for the grants team to understand who you are, what you do and how this relates to the proposed project. If you are a structured group of residents without a legal status, please use the details of your lead contact here. |  |
| **1.1** | **What is your organisation's name?** |  |
|  | If your organisation is also known as something different to your legal name/an abbreviation, what is this? |  |
| **1.2** | **Organisation's registered address** |  |
| **Tip** | *This should match the address on your bank account, Charity Commission or other register* |  |
|  | City/Town |  |
|  | Postcode |  |
| **1.3** | **Main Contact** |  |
|  | Title |  |
|  | First Name |  |
|  | Last Name |  |
|  | Position in organisation |  |
|  | Email |  |
| **1.4** | **Secondary Contact** |  |
|  | Main Contact |  |
|  | Title |  |
|  | First Name |  |
|  | Last Name |  |
|  | Position in organisation |  |
|  | Email |  |
| **1.5** | **Organisation Type** |  |
| **Tip** | *Please select the status from the list that most closely describes your organisation and provide any registration numbers. If your organisation is both a registered charity and company, please select 'Registered Charity/CIO'. You can provide both registration numbers.* |  |
|  | Community Interest Company |  |
|  | Community Organisation/Club/Society/Group |  |
|  | Company limited by guarantee |  |
|  | Cooperative and Community Benefit Society |  |
|  | Registered Charity/CIO |  |
|  | Unincorporated association |  |
|  | Other |  |
|  | Charity/CIO number (if applicable) |  |
|  | Company/CIC number (if applicable) |  |
|  | Any other organisation type registered number (if applicable) |  |
|  | When was your organisation established |  |
| **Equity Questions** |  |  |
| **1.6** | **Are you a London Living Wage Employer?** |  |
| **TIP** | *We strongly encourage any organisations with staff to pay at least London Living Wage. We understand if you have other people delivering your work (e.g. volunteers), this may not be applicable.* |  |
| **1.7** | **Is your organisation led by any the following underserved communities:** |  |
|  | We define 'led by' as at least 51% of people running, managing, and/or delivering your work. These do not have to be paid staff members. |  |
|  | led by people of colour/ BAME communities/ underserved ethnic groups |  |
|  | led by d/Deaf or disabled people |  |
|  | led by LGBTQIA+ people |  |
|  | led by Women |  |
|  | led by Older people (55+) |  |
|  | led by Younger people |  |
|  | N/A |  |
| **1.8** | **What does your organisation do?**  Guided word limit (50 words) |  |
| **1.9** | **Have you ever worked with social prescribers in Redbridge?** |  |
| **Note** | Do not worry if you haven’t, we encourage applications from all organisations, whether you have worked with social prescribers before or not. The aim of this fund is to foster more collaborative working between your organisation and social prescribers. |  |
|  | If Yes - then how many referrals do you accept on average from social prescribers per month in total in the past year? |  |
|  | If Yes - what is the proportion of social prescribing referrals vs. overall residents using your service on average? |  |
|  | **If Yes - what is the number of social prescribing referrals you have declined and why?** |  |
|  | If No- then would you like to be part of the directory of services for social prescribers? Please give your confirmation for this. |  |
| **1.11** | **What is the typical waiting time for someone to be able to access your service?** |  |
| **2.0 Your Project** |  |  |
| **TIP** | In this section, we’re looking to gain a comprehensive understanding of the project you are requesting grant funding for. Your application will be assessed mainly on the information provided in this section, so make sure that your writing is straightforward and clear. We recommend finding someone who has little to no knowledge of the project and asking them to read over these next sections. |  |
| **2.1** | **Project Summary** |  |
|  | Please give a short summary of your project. This might be the name of your project as it would be promoted externally. (Word limit 50) |  |
| **2.2** | **How many beneficiaries do you aim to target with this project?** |  |
| **2.3** | **Where will the project be delivered?** |  |
|  | This is the physical location of your proposed project. If this is the same as the registered address, please leave blank. If there are multiple locations addresses, please list them and make sure your project description clearly links to the locations listed. |  |
|  | Postcode |  |
| **2.4** | **When will your project take place?** |  |
|  | Projects must start after 01/04/2023 and end no later than 31/07/2023 |  |
|  | Project Start Date |  |
|  | Project End date |  |
| **2.5** | **Project Priority** |  |
|  | Which **one** of our programme priorities does your project propose to deliver against? 1. Cost Of Living; 2. Learning Difficulties and Disabilities; 3. Mental Health; 4. Elderly People; 5. Asylum Seekers and Refugees |  |
| **2.6** | **Project description & how this links to the priority area selected** |  |
|  | Please describe what the project will achieve, how this will be achieved and how it will meet **one** of the strategic priorities as chosen above. Some guiding questions that may help you write this are below:   - What the project will achieve and how this fits in with the chosen objective - How the project will achieve this and how it will be specifically delivered - Who will benefit from the project - Why the project is needed and why your group is best placed to deliver it. (If the project targets a specific group, this should be linked back to why they specifically need this) - Describe the outcomes achieved and how they link to the core theme.  Word guide: up to 500 words (small grants 300 words) |  |
| **2.7** | **How will the project be run and managed?\*** |  |
|  | This question is asked to gauge your ability to deliver the project. Please tell us about:  Word guide: up to 500 words (small grants 300 words) |  |
|  | How you will effectively plan and manage the delivery of this project or event |  |
|  | The staff and/or volunteers who will be delivering the project. |  |
|  | Please include any particular skills or experience that are needed in order to deliver your project or event successfully. |  |
| **2.8** | **Project Risk** |  |
|  | Please tell us about:  Word guide: up to 200 words |  |
|  | Identify up to 3 risks that you have anticipated may arise when delivering your project that could prevent it from being a success. |  |
|  | Mitigations you have in place to minimise these risks. |  |
| **2.9** | **Project monitoring and outcomes** |  |
| **TIP** | If you are awarded a grant, you will be provided with a simple monitoring template that you will need to fill out when you complete your activities.  The types of questions asked in the grant M&E template will include a set of simple questions including:  1) who attended the activity? (demographics, geography) 2) where were they referred from? E.g. self-referred, social prescribing,  3) how many times did they attend?  4) would the beneficiary recommend this project to a friend/ family member?  5) did this activity improve the beneficiary’s health and wellbeing? |  |
|  | Please tell us how you will monitor and report on the project activities. Word guide: up to 250 words |  |
| **3.0 Project Budget** |  |  |
|  | In this section, we’re looking to gain a comprehensive understanding of how the project described above looks financially. This budget should also outline how this fits into your whole project - not just what is being requested from the Community Chest funding. This section is scored. |  |
| **3.1** | **How much funding are you requesting?** |  |
| **3.2** | **What is the total cost of your project?**  Please note, you are requested to submit a simple budget document via email to shaweb@redbridgecvs.net as part of your application. |  |
| **3.3** | **Budget**  Outline the total amount and any sub-amounts, this should match your budget document. |  |
|  | **Budget notes** |  |
|  | If there is anything further you want to tell us about your budget, you can do so here. |  |
| **3.4** | **If the total cost of the project is more than you are applying from the Community Chest, where will you source the remaining funds and are these secured?** |  |
|  | If you have indicated that funding from other sources will be used, please outline: |  |
|  | Where specifically the other funding will come from e.g group reserves, BBC Children in Need etc. |  |
|  | If this funding has been secured, and if not, how this could impact on the project. |  |
| **3.5** | **What was your annual income last year?** |  |
|  | This should match your Annual Accounts or Financial Statement |  |
| **4.0 Bank Account Details** | |  |
|  | Providing your bank account information will enable us to pay you swifty if successful for a grant. Please ensure you provide the correct information for the account you wish to be paid into. |  |
|  | Bank Account Name |  |
|  | Sort Code |  |
|  | Account Number |  |
|  | If your bank account is an individual rather than an organisational account (Groups of Residents only) please confirm the names of 3 Committee Members who are responsible for signing off all transactions. |  |
| **5.0 Attachments** |  |  |
|  | Please provide the following via email:   * A Constitution or set of rules * Health & Safety Policy * Equality Policy * Annual Accounts for organisations over 1 year or Financial Statement if less than 1 year * Insurance Documents * Bank Statement for the last 3 months * Relevant Safeguarding documents |  |