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**ICB Population Health Investment Fund 2024-25**

# Guidance for funding bids between £5,001 and £10,000

**This guidance should be used alongside the Application Form (between £5,001 and £10,000). Please read it carefully – an incomplete or incorrect form will mean that your application is delayed or even rejected.**

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| **Overview**  The Lancashire and South Cumbria Integrated Care Board (West Lancashire) (ICB) is investing in those voluntary and community organisations in West Lancashire that support our residents’ health. There are some changes from the previous grant programme so please read this guidance carefully.  As the trusted partner of the ICB, West Lancs CVS (WLCVS) is welcoming applications from organisations based in West Lancashire and operating in one or more of these areas:   * Skelmersdale and Upholland * Ormskirk and Aughton * Burscough and the Northern Parishes * or the whole of West Lancashire.   **We want to fund projects that:**   * Support residents to address factors that put their health at risk e.g. smoking, alcohol misuse, drug misuse, low physical activity * Support residents whose health is affected by others putting them at risk e.g. domestic abuse, sexual abuse * Support families to help them provide a healthy environment for pregnant women and children under five * Work with residents to improve their access to transportation, good quality housing and healthcare * Work with residents to improve their life chances by accessing learning & training and employment   Projects will be expected to be completed within 12 months of the project starting.  Groups that have previously received a grant from any WLCVS funding scheme must have met all conditions attached to that scheme, including completion of the final evaluation or monitoring form and received their final 10%, before applying to this fund.  **To be eligible groups must:**   * Be a voluntary organisation, community group, small charity or not for profit organisation (including social enterprises / CICs) * Be a member of West Lancs CVS * Be based in West Lancashire and serve its residents * Have a constitution or a set of rules that govern how the organisation works * Have relevant equal opportunities / safeguarding policies in place.   **Priority to be given to projects which:**   * Improves people’s health and wellbeing * Addresses needs identified in the Skelmersdale Priority Wards work * Supports community involvement and champions lived experience * Demonstrates a commitment to equal opportunities through activity * Promotes physical activity for health and wellbeing * Reduces social isolation or increases social interaction.   **We are not able to support:**   * Projects outside West Lancashire * Private businesses * Individuals * General appeals or sponsorship * National organisations and their affiliates * Work which has already started or taken place. Whilst you might already be delivering the type of support you are applying for, we will only fund activity that started after the date of your grant agreement. * Work undertaken by or on behalf of statutory bodies or funded from statutory sources * Work for the advancement of religion * Work where the main beneficiaries are animals * Overseas holidays or trips * Work undertaken by/on behalf of schools, colleges or universities as part of their statutory curricular activities. * Work which does not directly benefit people living in West Lancashire.   Bids from groups based outside of West Lancashire but operating within the borough will be looked at on a case-by-case basis.  **This funding can be used to support:**   * New projects, activities or events (including directly associated core / running / staffing / equipment costs) that address the above priorities. * Revenue projects only (please note the purchase of small capital equipment can be also included to support delivery of a revenue project).   **Successful applications are likely to**:   * Clearly meet one, or more, of the grant criteria * Provide a distinct picture of what you will deliver with the grant and what this will achieve * Provide evidence for why the grant is needed * Outline the difference the work will make to residents’ lives and how this will be measured * Demonstrates understanding of inequalities and a commitment to health equity.   Any questions about this funding opportunity should also be sent to [vicky@wlcvs.org](mailto:vicky@wlcvs.org) |

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| **Process**  To apply complete the following steps:  1) Check that you are eligible (if unsure please feel free to give us a call to discuss your project).  2) Complete the application form. This can be downloaded from the health pages on [the CVS website](https://www.wlcvs.org/health-network-2-2/) or requested via [vicky@wlcvs.org](mailto:vicky@wlcvs.org)    3) Attach your supporting documents (see application checklist) to your application and e-mail to [vicky@wlcvs.org](mailto:vicky@wlcvs.org)  **Deadline**: please submit your application by **5pm on 12th April 2024** to [vicky@wlcvs.org](mailto:vicky@wlcvs.org)  Applications will only be processed when all documentation has been received. If we do not receive your supporting documents within four weeks of receiving your application then it will not be processed.  **If you require any assistance with the completion of your application please contact Vicky Attwood on 07598552949 /** [**vicky@wlcvs.org**](mailto:vicky@wlcvs.org) **.**  **Assessment and Award**  Funding decisions will be based on the quality of the application and scoring against the criteria given in the application.  All eligible applications will be assessed by a multi-agency panel. There is no appeals process and our decision will be final although we will try to provide feedback where possible. All approved grants are subject to terms and conditions which will be provided to successful applicants with their offer letter. Some grant approvals may be subject to certain conditions being met before grant money can be released.  All applicants, whether or not successful, will be contacted by email to be informed of the outcome.  **Monitoring and Completion**  When your project is complete, you **must** fill in an evaluation summary. A form for this will be sent to successful applicants when we advise you that payment has been made.  Successful applicants must make sure that the ICB and WLCVS are included in any publicity (our logos will be provided for this).  **Please note: 10% of any grant awarded will be retained by WLCVS until receipt of your evaluation summary of your completed project including photographs (if appropriate) and completed feedback or surveys.** |

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| **Completing the form**  Please complete all questions fully. Sections will expand as you complete your answers.  **The word count is a guide to the level of detail we need – from example, if the maximum is 300 words, aim for this, don’t answer with just a sentence.**  Make sure you include a signed copy of your constitution or set of rules and other relevant policies (for example, safeguarding policies if appropriate).  **Contact Details**  Please complete every section. The contact name should be someone who understands the detail in your application and is authorised to make decisions about the content.  Include your bank account details which must have at least two signatories from people who are not related and who do not live in the same household. If you do not have a group bank account, please explain what other banking arrangements you make.  **Project Details**   1. Give the name of the project 2. Please provide a description of your project, explaining how it contributes to at least one of the priorities (see below). (max 350 words).   The funding is aimed at projects that:   * Work with residents to improve their access to transportation, good quality housing and healthcare * Work with residents to improve their life chances by accessing learning & training and employment * Support residents to receive all of the income support they are entitled to * Support residents to address factors that put their health at risk e.g. smoking, alcohol misuse, drug misuse, low physical activity * Support residents whose health is affected by others putting them at risk e.g. domestic abuse, sexual abuse * Support families to help them provide a healthy environment for pregnant women and children under five.   Use this section to tell us about how your project will work and what you need the funding for – **who** you will be working with, **what** support you will provide them with, **why** they need your help, **where** (specifically) you will deliver the support, **when** you expect to do this and **how** your support will change things for your users. Please read the whole form before you start – you will see that there are other questions where you can provide more detail e.g. evidence of need and expected outcomes. This section is for you to give an overview of your project.   1. Please provide a proposed start and end date for your project. Please note the project must **not have started before the approval** for funding has been granted and confirmed in writing. This means that it must not have been publicised, no participants must have been recruited and no expenditure incurred. 2. Please state which West Lancs area your project will cover (can be all of West Lancs or just one or two areas). 3. Please demonstrate any **evidence** to show that this project is needed, for example, feedback from service users, questionnaires, a gap in service etc. Have you consulted with people in your community? Please note that existence of the project / service is not evidence but a waiting list for the project /service might be. We may ask to see evidence of this or you might want to provide it with your form as this might help your application (max 300 words) 4. Please state how your project will make a **difference**. This is not just about how many or how much you will do but about what will have changed because of the work you do. We would like you to try and describe outputs, outcomes and impact - for example, an exercise group for 20 older people (output) will help people feel fitter (outcome) and be more able to be socially active (impact) (max 300 words). 5. The funding is aimed at improving health and wellbeing of residents in West Lancashire. How will your project help address the areas of work in the table? What experience do you have in tackling these issues with residents? If you will be working with people on these issues for the first time, tell us why you think you can address them. Only complete the ones your project will focus on (max 200 words per section). 6. Explain how you will **evaluate/measure** the impact of your project. Give examples of the tools that you will use (e.g. feedback forms, wellbeing measures, case studies etc). Please give as much detail as possible as you will be asked to complete an evaluation form at the end of the project (max 300 words). 7. Please provide a description of your target group(s). How many individuals will benefit from the project/activity? (max 350 words).   **Financial Details**  10) Please list any items that you need the funding for and the cost of each item - try to be as accurate as you can and show us your workings out e.g. 1 day a week for 6 weeks room hire at £50 per day. Please include a breakdown of any staff costs including rate of pay, the number of hours per week and a total for the duration of the project. Please state the total amount of funding needed to run the project and from where any additional funding has been secured or applied for (if applicable).  11) Please include any additional Information you wish to provide that might be useful to us when assessing the application (max 250 words).  **Declaration**  12) Please sign and date the form and make sure you have included everything you need to.  **Make sure you include a signed copy of your constitution or set of rules and other relevant policies (for example, safeguarding policies if appropriate).** |

**Equal Opportunities**

WLCVS and the ICB are committed to equal opportunities for all and expect groups and organisations applying for grants to show that they are aware of equal opportunities and can demonstrate commitment to them.

**Data Protection**

Your personal details will not be shared with any other outside organisations. However, for the purposes of grant monitoring, we will pass on details of your group including a budget breakdown of your grant to the ICB and to other members of the panel. If you are successful, your group name and project details may be used for publicity. We may also send you information about other funding opportunities and community development information.

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| Applications to be submitted no later than **5pm on 12th April 2024** to [vicky@wlcvs.org](mailto:vicky@wlcvs.org). |