



2021-22

Transformation Fund (Non-recurring funding) APPLICATION FORM

Introduction

Neath Port Talbot County Borough Council has earmarked approximately £300,000 of its Welsh Government (WG) Transformation Fund allocation to seed fund new services at a local community level to support early intervention and prevention.

We are therefore inviting local organizations to apply for a one-off grant allocation to seed fund services/activities that will help support people in their local communities to either prevent or reduce their need for statutory support.

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INFORMATION

Part One: Important information before you start your application

A. Completing the form

- Please make sure you have answered every question and read your application before you send it to us;
 - scan your completed application form to: seedfund@npt.gov.uk putting the name of your organisation from Question 1 into the email subject line.

B. Help with your application

If you have any questions about the grant process or completing this application form please e-mail seedfund@npt.gov.uk

C. Deadline for applications

All applications must be received by 17.00 on 30/08/21. We are unable to accept any late or incomplete applications.

Part Two: Process Summary

A) Who can apply / what can you apply for?

Any public sector or any not-for-profit community, voluntary or third sector organisation, (including service user led groups, co-operatives and social enterprises), that wish to provide services/activities to residents of Neath Port Talbot to support early intervention and prevention. This fund is also open to Directorates within Neath Port Talbot County Borough Council and Swansea Bay University Health Board.

C) What is Seed Funding?

Seed funding is a one off grant payment to help establish a service/activity. This funding is intended to be a one-off grant to support organisations in meeting their necessary start-up costs for a service/activity. It is intended that both the organisation and service/activity is self-sustaining after the seed funding has ended.

D) What is early intervention and prevention?

In the context of this grant opportunity, early intervention and prevention refers to services/activities that either help prevent or delay people from developing the need for statutory social care services, by intervening at an early stage. It can also include services/activities that help reduce the need for additional statutory social care services.

E) What are we looking for?

- Applications to seed fund services/activities that are specifically focused on either preventing or reducing the need for statutory social care support.
- You do not have to target your services/activities towards people that are already known to social services. If the people you intend to deliver the service/activity to are likely to be unknown to social services, then you must be able to demonstrate that your proposal will help prevent or delay the need for a social care statutory service or intervention.
- That you can clearly demonstrate financial sustainability to enable services/activities to be self-sustaining after the seed funding has ended.
- Your proposal must be for either a new service/activity, or to expand existing services/activities. It cannot be used for something that you have already secured funding for.
- Services/activities need to help the Council meet at least one of its Corporate Plan priorities <https://www.npt.gov.uk/19450> and at least one priority in its Plan for Adult Social Care <https://www.npt.gov.uk/media/14700/adults-plan-2019-22.pdf?v=20201112120224> or Plan for Children and Young People Services <https://www.npt.gov.uk/media/14702/cyps-plan-2019-22.pdf?v=20201112120100>
- Evidence of how the proposed service/activity will reduce demand on Council services
- An ability to provide evaluation information in order to assess the impact of the service/activity
- Services/activities that will be delivered to Neath Port Talbot residents, preferably at a local or community level
- That the proposed service/activity is accessible and inclusive of people with disabilities and care and support needs
- Evidence that there is a need for this activity

APPLICATION FORM

Part Three - Your organisation and contact details

1. Organisation name

What is the full legal name of your organisation, as shown in your governing document?

2. Proposed Project name

3. Does your organisation use a different name in your day to day work? (Please tick)

Yes

No

If yes, what other name do you use?

4. What is the main or registered address, including postcode for your organisation?

Phone number one

Phone number two

(at least one number must be a landline)

5. What is the main email address for your organisation?

This should be the email address people use to contact your organisation. It can be a personal email address if your organisation doesn't have one.

6. Does your organisation have a website address? (Please tick)

Yes

No

If yes, what is the address?

7. What type of organisation are you? (Please tick the most appropriate)

Registered Charity (please provide Registration Number)	
Local Authority	
Health Board	
Community Organisation	
Voluntary Organisation	
Third Sector Organisation	
Social Enterprise	
Housing Association	
Development Trust	
Co-Operative	
Service User Led	
Other (please specify)	

8. Is your organisation independent or a branch of a larger organisation? (please tick)

An independent organisation will have its own governing document and can manage its own funds and staff

Independent **Branch**

If you are a branch, what is the name and address, including postcode of the larger organisation?

If we offer a branch a grant we will ask the larger organisation to accept overall responsibility for it.

9. When was your organisation set up?

Please give the date when your organisation adopted its current legal status. This should be on your governing document. All organisations need to provide this date.

10. What is your organisations current financial position?

It is essential that financial need for this grant can be evidenced clearly.

Please insert the amounts from your latest annual accounts and submit a copy of the latest annual accounts with the application form

What was the date of your organisation's most recent annual accounts year ended (dd/mm/yy):					
Income	£	Expenditure	£	Balance c/f	£
Restricted reserves	£	Unrestricted designated reserves	£	Unrestricted general reserves	£

Please tell us what your organisation's reserves policy is:

11. Do you anticipate any changes to your organisational structure over the next few years? (please tick)

Yes

No

If yes, please provide more detail

Part Four: Information on the proposed activity the grant funding will support

12. Summarise what service/activity you would use the grant award to fund (max 500 words).

13. What exactly will the funding deliver? (max 400 words)

Outline in more detail all the main activities that will be funded and how you will deliver them.)

14. How do you know there is a need for the service/activity and that it will be strategically relevant (max 400 words)?

Outline any evidence you have gathered from e.g.:

- *The success of any previous work you have done;*
- *any consultation you or others doing similar work have carried out with the people who would benefit;*
- *research you or others have completed to show there are gaps in provision or a need to enhance existing services.*

In doing so, highlight how the activity will therefore support the delivery of the key strategic priorities in the strategies and plans mentioned in Part 2 e)

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15. Who exactly will benefit from the proposed service/activity (max 400 words)?

Tell us in more detail about the people, communities or organisations that will benefit from your project. There should be a clear link to the identified groups in Part 2 e)

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16. What key outcomes/outputs would you be seeking to achieve if you were successful in receiving the funding?

Outcomes are the key changes or differences an activity will make. A maximum of four outcomes is required, but if your activity will result in two key changes then all you need do is list those two outcomes. Giving two or three will not in anyway reduce your application's chance of success so don't be tempted to add unnecessary outcomes just to fill the boxes. In each outcome, tell us who will benefit from the change. In all cases, these outcomes should clearly contribute to early intervention and prevention.

To help you with this section here is an example:

The objective of the activity is to provide computer literacy classes for people aged over 65's

Outcomes would be – Older people feel confident to use online shopping & banking / older people are able to keep in touch with friends and family online to feel less socially isolated

Outcome 1	
Outcome 2	
Outcome 3	
Outcome 4	

Outputs can include services you offer or facilities you provide. They are what you 'put out' as a result of your activity. A maximum of four outputs is required, but if your activity will result in two key changes then all you need do is list those two outputs. Giving two or three will not in anyway reduce your application's chance of success so don't be tempted to add unnecessary outputs just to fill the boxes.

Using the IT example above, an example of an output would be: delivery of 25 computer literacy classes to people aged over 65s

Output 1	
Output 2	
Output 3	
Output 4	

17. Outline the key milestones and timeline of your plans for how you will set up the proposed service/activity ready to 'go live' on confirmation of award (max 400 words).

18. Outline how you will monitor outcomes and outputs and otherwise ensure that all proposed service/activity is delivered as planned (max 500 words).

We want to know about your ability to deliver successfully. This may include:

- Your organisation's experience of delivering similar work;
- Your staff and management committee's relevant skills and expertise and what training and/or development opportunities have been accessed;
- your existing internal performance management arrangements;
- The support you will need from other organisations or partners.

19. If the grant is awarded how will you ensure that the service/activity is accessible and inclusive of people with disabilities and care and support needs (max 400 words)?

20. If the grant is awarded how will it affect, if at all, opportunities for people to use the Welsh language and its equal treatment with English (max 400 words)?

Part Five: Financial Information

21. How much are you requesting from Neath Port Talbot County Borough Council and what percentage is this of the total cost of the service/activity? What percentage will be spent on front line staff/other staffing costs?

Full Cost	Amount requested from Neath Port Talbot CBC	% of the full cost requested from Neath Port Talbot CBC	% of the amount requested that will be spend on front line staff / other staffing costs
£	£		

22. Other sources of funding if not 100% of full cost requested as part of this application

Funding Source:	Confirmed (Yes / No	2020/2021 Amount
Eligible Reserves- that will be used to fund the activity		
Business income		
Donations		
Fundraising		
Business Sponsorship		
Grant funding secured (please itemise) •		
Funding being applied for (please itemise) •		

23. Please provide details of grants already recieved from NPTCBC in past 3 years:

Financial Year	Type of Grant	Amount (£)

24. Please provide evidence that your organisation has the following types of insurance in place

The evidence should include the name of the insurers, policy numbers, expiry date, and limits for any one incident.

*Please complete the table below and **provide copies of relevant insurance certificates.***

	<i>Employers Liability Insurance</i>	<i>Public Liability Insurance</i>	<i>Property (including contents) insurance</i>
<i>Name of insurer</i>			
<i>Policy Number</i>			
<i>Expiry dates</i>			
<i>Limits for any one incident</i>			

25. Declaration

As a duly authorized representative for and on behalf of the organisation named below, I hereby certify that all information provided to the Council in this Application Form is complete and accurate in all respects.

Signed	
Name	
Position	
Duly authorized representative for and on behalf of	
Date	

Please email your completed application form to: seedfund@npt.gov.uk putting the name of your organisation from Question 1 into the email subject line.