Health and Social Care Alliance Scotland (the ALLIANCE)



**Self Management Fund: Working Together to Strengthen Integration**

This is the Application Form for the Health and Social Care Alliance Scotland (the ALLIANCE) Self Management Fund administered on behalf of the Scottish Government. We are keen to hear about your ideas and offer all applicants support throughout the funding process. We are available to meet, chat on the phone or by email to discuss any applications, answer any questions you may have and read through draft applications.

For any Fund support please contact the team: [**Fund@alliance-scotland.org.uk**](mailto:Fund@alliance-scotland.org.uk) **0141 404 0231**

# Guidance

A Guidance Document is available on our website to help you with the application process and details the core criteria for the Fund. Please ensure to read the guidance carefully before completing your application.

# When to submit:

The deadline for applications for this round of funding is **30th June 2019** for work to begin on 1st October 2019. Please submit completed applications to [fund@alliance-scotland.org.uk](mailto:fund@alliance-scotland.org.uk)

**Part One – Your Organisation**

|  |  |
| --- | --- |
| **Organisation name** |  |
| **Address** |  |
| **Telephone number** |  |
| **Website** |  |
| **Address for correspondence (if different from above)** |  |
| **Legal status of organisation (if a registered charity please state charity number)** |  |

# Main Contact

As part of the assessment process we phone all applicants to have a chat about the application and discuss the project idea. Please provide a main contact who has a good knowledge of the project idea and budget.

|  |  |
| --- | --- |
| **Name of main contact** |  |
| **Position** |  |
| **Contact number** |  |
| **Contact email address** |  |

# Part Two – Project Details

|  |  |
| --- | --- |
| **Amount requested (up to**  **£30,000)** | **£** |
| **How long will the project be?** |  |
| **Will this project involve partnership working with any other organisations? (please detail organisation names)** |  |
| **Will any volunteers be involved in this project? If yes, how many?** |  |
| **What area(s) of Scotland will your project cover?** |  |

**Part Three – Budget**

Please list what you plan to use the grant from the self management Fund for.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Proposed Expenditure (please detail)** | **October 2019**  **– March 2020** | **March 2020**  **– September 2020** | **October 2020**  **– March 2021** | **Total** |
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|  |  |  |  |  |
| **Total Expenditure** |  |  |  |  |

# Part Four - Partnerships

**Partnership working and funding is not essential, but if you do have any partnerships in place with other organisations then please detail here.**

**Part Five – Project Plan**

Your plan should be between two and a maximum of four sides of A4. Please tell us here:

* What do you want to do?

- You should tell us here how your project supports self management and health and social care integration.

* How will you do it?
* What difference will it make and how will you know if it is successful?

Please attach this separately clearly marked Part Five – Project Plan.

# Part Six – Supporting Statements

Please provide two statements of support from people who know about and can provide backing for your application. If you are working in partnership with an organisation, one of your statements of support should come from a representative of that organisation.

The statement of support should contain the following information:

* What their relationship/involvement is with the project
* A short statement of support for the project
* Contact details to allow the ALLIANCE to contact them to verify their support.

If your application is successful, we will contact your supporters by phone or email for verification before funds are released.

# Part Seven – Signatures

**I confirm that the information provided for this application is true and accurate**

|  |  |
| --- | --- |
| **Name** |  |
| **Signed** |  |
| **Date** |  |
| **Position in Organisation** |  |

# Part Eight – Enclosures Checklist

|  |  |
| --- | --- |
| **Established organisations (running for more than 2 years)** | |
| **Project Plan** |  |
| **Copy of governing document** |  |
| **Last two sets of annual accounts** |  |
| **Two supporting statements** |  |
| **Established organisations (running for less than 2 years)** | |
| **Project Plan** |  |
| **Copy of governing document** |  |
| **Most recent bank statements (three months if possible)** |  |
| **Budget plans or management accounts** |  |
| **Two supporting statements** |  |

**Privacy Statement**

The personal data on this form is being collected by the ALLIANCE for the following purpose: to effectively process your application to the Self Management Fund: Working Together to Strengthen Integration and to carry out due diligence checks.

The ALLIANCE and its sub-contractors will not distribute or disclose your personal information to third parties unless we have your written permission or are required by law to do so. We comply with the Data Protection Act 2018 and GDPR 2018 when handling your personal information. If you have any concerns about how we use your personal information, contact DPO at: [DPO@alliance-scotland.org.uk.](mailto:DPO@alliance-scotland.org.uk) Alternatively, you have the right to complain to the ICO https://ico.org.uk/concerns/.

For our full privacy policy, which provides detailed information regarding your rights and how we will process your information and for how long we will retain it, please read [https://www.alliance-scotland.org.uk/privacy-policy/](http://www.alliance-scotland.org.uk/privacy-policy/)

By signing this form you are confirming that you have read and understood our privacy policy and are consenting to us processing your personal information for the above purposes in line with this policy, which is our legal basis for processing your personal information.