Funding to Provide Support for the Tobacco Control Plan

Guidance for Applicants
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1. Introduction

This document provides information about applying for the grant 'Funding to Provide Support for the Tobacco Control Plan', which will be awarded in financial years 2018-19, 2019-20, 2020-21. (We confirm the grant for year 1 but the amounts for any additional years are provisional offers and are subject to performance, and the Department's future budgetary decisions.)

You should read the information in this guide carefully as the document will give you information to help you decide if the Grant is suitable for your organisation and the activity you want the funding for.

If you need support you can contact us by email:

tcpgrant@dh.gsi.gov.uk

To be successful, organisations will need to have a clear focus in their applications on how their proposals would support and drive forward the ambitions of the Tobacco Control Plan.

The Grant is open for applications for projects which should start by September 2018.

**The deadline for applications is noon 15 June 2018.**

Applications received after this deadline will not be considered.

The Tobacco Control Plan

Despite a significant reduction in the prevalence of smoking over the last 25 years, tobacco use remains one of the largest threats to public health in England and one of the largest causes of social and health inequalities. There are still 7.3 million smokers and more than 200 people a day still die from smoking related illness which could have been prevented.

This burden falls hardest on some of the poorest and most vulnerable people in our society. Smoking accounts for approximately half of the difference in life expectancy between the poorest and the richest. This difference sees some people die on average 9 years earlier than people who are financially better off; this is an unacceptable injustice which must be addressed.

This Government remains committed to reducing the harm caused by tobacco, and over the course of this plan we will work to further drive down the prevalence of smoking, particularly in communities where prevalence remains high.

England has long been recognised for having a pioneering and comprehensive approach to tobacco control. A range of tobacco control measures exist in this country to support smokers to quit and discourage people from starting smoke in the first place. These measures have proven to be highly effective with smoking prevalence at a record low. However, there is more to be done; that's why in July 2017 we renewed our commitment by publishing a new Tobacco Control Plan, *Towards a Smokefree Generation: the Tobacco Control Plan for England 2017-2022*. 


We are looking for eligible organisations with capacity and a relevant track record who can complement national efforts on tobacco control and support delivery of our national ambitions set out below.

**Our National Ambitions**

Our vision is to create a smokefree generation. We will have achieved this when smoking prevalence is at 5% or below. To deliver this, the Government has set out the following national ambitions which will help focus tobacco control across the whole system.

The key ambitions of the Plan set our aspirations on how much we will reduce smoking prevalence by in England. These are:

- Reduce the prevalence of 15 year olds who regularly smoke from 7% to 3% or less by the end of 2022.
- Reduce smoking prevalence amongst adults in England from 15.5% to 12% or less by the end of 2022.
- Reduce the inequality gap in smoking prevalence between those in routine and manual occupations and the general population by the end of 2022.
- Reduce the prevalence of smoking in pregnancy from 10.7% to 6% or less by the end of 2022.

To do this we need all public services to work together, leading the way in helping people to stop smoking.

After 2022, we will continue to work to reduce smoking prevalence further, on our way towards a smokefree generation.

Successful organisations will need to demonstrate how they would work to support delivery of these ambitions.

**Funding to Provide Support for the Tobacco Control Plan**

Through a grant scheme, the Department of Health and Social Care is offering funding to successful applicants to provide support for the implementation of Tobacco Control Plan for England.

The funding is for work to be completed in the financial years 2018-19, 2019-20 and 2020-21. Each year a total of up to £140,000 will be available for projects, totalling £420,000 across the three financial years. We confirm the grant for year 1 but the amounts for any additional years are provisional offers and are subject to performance and the Department's future budgetary decisions.

Projects must have natural break points after each year to take this into account.

Organisations are welcome to apply for all or a portion of this funding.
Themes

The Department of Health and Social Care has identified key blocks of work that will be supported by the Grant. Applicants must demonstrate how they would transform smoking prevalence in line with the ambitions of the Tobacco Control Plan in one or more of the following areas:

- Inequalities: mental health
- Inequalities: smoking in pregnancy, lesbian gay bisexual and transgender (LGBT), black and minority ethnic (BME) communities or routine and manual workers
- Smoking rates in 16 and 17 year old young people
- Knowledge and evidence
- Delivering effective local tobacco control

Please see section 2 on funding themes for more information.
2. Funding Themes

Inequalities: mental health

Smoking prevalence may be declining year on year nationally, but 40.5% of adults with a serious mental illness smoke and people with a mental health condition die on average 10 to 20 years earlier than the general population. Smoking causes premature death, disability and poverty and if we do not reduce smoking prevalence among this group, we will have failed to reduce inequalities.

The majority of mental health provision takes place in the community and, if we are to achieve our ambition and reduce inequalities, urgent action is needed in these settings. Primary care and community care providers are fundamental in delivering an integrated tobacco dependence treatment pathway. This includes the systematic identification of smokers, provision of advice and access to effective support to quit or reduce harm. Shared ownership and responsibility in the local health and social care system is essential to ensure the continuity of care between primary, community and inpatient settings.

We are therefore looking for innovative ways in which smoking prevalence in people with a mental health condition can be tackled.
Inequalities: smoking in pregnancy, lesbian gay bisexual and transgender (LGBT), black and minority ethnic (BME) communities or routine and manual workers

Although national smoking prevalence continues to decline, the picture is not so positive for all groups and communities across England. Smoking remains highest among populations who already suffer from poorer health and other disadvantages.

Smoking during pregnancy is a major health inequality, with prevalence varying significantly across communities and social groups. Smoking prevalence among pregnant women in more disadvantaged groups and those aged under 20 remains considerably higher than in older and more affluent groups. Mothers in routine and manual occupations are five times more likely to have smoked throughout pregnancy compared to women in managerial and professional occupations, meaning those from lower socio-economic groups are at a much greater risk of complications during and after pregnancy.

In 2015, there were almost three times as many smokers among the lowest earners in our society in comparison to the highest earners. In 2016, the prevalence of smoking among people working in jobs classed as routine and manual was more than double that of people working in managerial and professional occupations.

Smoking rates also vary greatly for some ethnic minority groups and those from the LGBT community who remain far more likely to smoke than the general population.

We are therefore looking for innovative ways to tackle the variation in smoking rates amongst these groups.
Smoking rates in 16 and 17 years

Smoking remains an addiction which is largely taken up in childhood, with the majority of smokers starting as teenagers. 77% of smokers aged 16 to 24 in 2014 began smoking before the age of 18. 32% of smokers (current and ex-smokers) aged 16-24 started when they are 16 or 17. As a result many young people become addicted before they fully understand the health risks associated with smoking.

We are therefore looking for innovative ways to increase our understanding of smoking rates in 16 and 17 year olds.
Knowledge and evidence

Two thirds of smokers say they want to stop smoking, however long term success rates are low. Despite the availability of effective medicines and treatments to support quit attempts, the majority of smokers choose to quit unassisted, by going ‘cold turkey’. This has proved to be the least effective method. Smokers who use a combination of medication and expert behavioural support are up to four times as likely to stop smoking successfully as those who attempt to quit unaided or with over the counter nicotine replacement therapy. People need to be supported not to start smoking and smokers need knowledge and tools on which services are available to them.

We are therefore looking for innovative ways to increase our knowledge and gather more evidence of the issues around tobacco use, including ways of raising awareness and innovative ways of promoting stop smoking campaigns.
Delivering effective local tobacco control

Comprehensive and effective local tobacco control strategies require joined up working and integrated commissioning between local government and the NHS. It is through these dedicated joint partnerships that local areas can demonstrate real strategic leadership and champion the importance of a collaborative ‘whole system approach’ in working towards a common goal.

Smoking is the biggest cause of preventable death and so tackling it offers the biggest opportunity for making services across the entire health and care system more sustainable. By developing a coordinated and collaborative approach local systems exploit more opportunities to tackle smoking, realise greater reductions in prevalence and maximise the financial savings from reducing smoking. Shared ownership and governance processes that allow local systems to hold each other to account are an essential component of effective local tobacco control.

We are therefore looking for innovative ways to support effective local delivery of tobacco control programmes.
3. Eligibility

Are you eligible to apply?
You must meet the conditions set out in section 64 of the Health Services and Public Health Act 1968 to be eligible to receive funding from the Grant. You must meet the following legal requirements (which are a summary of the criteria in Section 64 and not a complete description of the law):

Your organisation must be carrying out activities that involve “… providing a service similar to a service provided by the National Health Service or by local authority social services, promoting, publicising or providing advice to do with providing either a national health or local authority social service or a similar service”.

The Act gives the Secretary of State for Health and Social Care the power to award grants to not for profit organisations in England whose activities support our priorities.

The following types of organisation are not eligible to apply to this Grant.
- Individuals or sole traders
- Organisations that make profit for private gain
- Public bodies including local authorities, schools, universities, community or town councils
- Organisations based outside of England
- Organisations formed less than 12 months ago
- Organisations without suitable accounting records

Start-up organisations
Please note that organisations that have been formed within the last 12 months will not be eligible to apply, as we require your last set of audited accounts and a reference from an organisation that has worked with you in the past. It is possible however to partner with an established organisation, with them acting as the lead accountable body. (Please see section on Joint and Partnership bids).

Is your proposal eligible?
You can submit:
- One application with your organisation as the designated sole applicant.
and/or one of:
- One application (for a separate proposal) with your organisation as the designated lead accountable body for a partnership application; or
- One application as an equal partner in a joint application.

If you send in more than one application as the sole applicant and/or more than one application as the lead accountable body for a partnership or joint application, we will ask you to identify
Funding to Provide Support for the Tobacco Control Plan

which application(s) should continue and which should be withdrawn. You can be involved in numerous partnership applications as a delivery partner, which means that your organisation is not the lead accountable body; however we strongly recommend that this does not exceed 3.

The following types of proposals are not eligible for funding from the Grant:

- Activities that are not allowed under your organisation’s aims.
- Delivering an existing service locally that is the responsibility of local organisations to arrange and pay for based on an assessment of local needs.
- Proposals that simply continue existing initiatives or activities.
- Routine on-going, updating or maintenance costs of websites and other electronic communications, phone helplines and hard copies of materials.
- If the organisation plans to use the funding to support party political activities.
- If the organisation plans to use any part of the Grant to finance fundraising efforts.
- Capital projects, for example, buildings, refurbishment and transport. Your proposal can include up to £5,000 of capital spending for equipment.
- Proposals where the funding you request for each year of the project is more than 25% of your annual income (based on your most recent available final accounts). For all proposals you will need to ensure your organisation has the capacity to undertake the work and you can clearly demonstrate value for money.
- Proposals that include passing all or part of the Grant funding to individuals or other organisations e.g. through grants, will not be eligible.

Your proposal should adhere to the Government Grants Minimum Standards Guidelines which can be accessed [here](#).

**National Impact**

All proposals for funding under this Grant will need to demonstrate they will have a national impact. The proposal should be able to make a difference to the health and well-being of people across England. If your proposal is simply to provide local services, we would advise you to contact local funding organisations for help.

Your proposal must only provide health and care services in England.
4. Evaluation and Dissemination

Evaluation

It is important that all applications include a clear evaluation methodology which will be in place from the outset and take place throughout the life of the project. The evaluation should focus on how and why the project works and the impact it has on tobacco control. As a minimum, you should ensure that there is an assessment of key performance indicators or outcomes which is meaningful and unbiased.

Dissemination

For all projects we also expect to see clear national dissemination arrangements reflected in your plans. This should include details of how other organisations across England will factor your proposal outcomes into their working practices. We are not suggesting a preferred method as each project will be different, but some methods could include: learning events and conferences, setting up learning sets and networks, peer-to-peer support, and developing best-practice guidelines. Passing on these findings is essential and would have to be carried out effectively in order to have a national impact and make a difference to health and care across England. To take a worst-case example, we may not support a proposal that produces a report and simply mails it to other organisations across England. We would expect to see evidence that it will be effectively used.
5. Joint and Partnership Bids

For each application, working with partners, a ‘Lead accountable body’ (LAB) will need to be assigned. The LAB must be a voluntary, community, social enterprise or mutual organisation. The LAB will be responsible for:

- The audit trail of the project (including work carried out by partners)
- Completion and submission of monitoring data for the whole project, in a timely manner as requested
- Distribution of funds to partners
- Provide assurance of the suitability of partners
- Undertaking to deal with any breaches of eligibility/audit requirements/disputes amongst partners

What is the difference between a partnership application and a joint application?

A partnership application is where there is a lead organisation who acts as the ‘lead accountable body’ for the proposal, and a number of other organisations that deliver certain aspects of the project. These other organisations could act as subcontractors and receive money for delivering the services, but contracts would have to come from the lead organisation and all work would need to be invoiced for. It is advisable to check whether the activities that they are undertaking will incur VAT. Subcontractors have no management input; they are involved to provide specialist elements of the proposal.

The partnership should be guided by a ‘Partnership Agreement’, working towards a common set of strategic objectives.

For a joint application two or more organisations would come together as equal partners to apply for funding from the Grant. Although there must be a lead contact, each organisation would play an equal part in delivering the project. We would include both the names on the offer letter, and could even pay both organisations separately for the work. For joint applications, partners should have a ‘Partnership Agreement’ in place before the project begins.

We would require both organisations in a joint bid to complete the eligibility form, provide their most recent set of accounts and trustee sign off and both organisations would be involved in completing the form, but only the lead contact would submit it. Please contact us to discuss joint bids to ensure that the correct procedure is followed.

I’m making a partnership bid with two other organisations. Can we split the Grant money three ways?

No. The lead organisation will have full responsibility for the project and the Grant award throughout the life of the project. The lead organisation will be expected to have strong project governance in place covering all organisations within the partnership. You will however have to supply a breakdown of expenditure for each partner.

Can a private sector organisation be involved in a partnership application or a joint application?
In a partnership application, as long as the lead applicant (accountable body), who is the recipient of the grant is eligible as a voluntary organisation, it can partner with any other type of organisation (including, for example, private, NHS or local government). Where two or more organisations make a joint application (as opposed to a partnership application); each organisation would need to be eligible to apply in their own right.

**Can I make unlimited bids under partnership arrangements?**

We will allow an organisation to be involved in only one partnership application as the project lead. However, that same organisation could be involved in other partnership applications, provided that it isn’t the project lead or involved in a joint application.

**How will you handle the 25% rule for ‘joint’ applications?**

We want to encourage joint working through our investments. If a bid is made jointly, we will look at the incomes of both partners when assessing the 25% rule. The reason behind this is that if one of the partners (with a small income) unfortunately has to close down, we would expect the project not to be at risk as it would continue under the management of the remaining partner.

**How will you handle the 25% rule for ‘partnership' applications?**

We also want to encourage partnership working through our investments. If a bid is made as a partnership, we will look at the audited accounts of just the lead partner when assessing the 25% rule and will not take into account the income of any of the partner organisations.
6. Communications Activities

Restrictions on 'communications activities'

Effective, timely and targeted communications about your project will be critical to the delivery of its success. However, there are some considerations in the area of communications of which you need to be aware.

DHSC applies restrictions to any communications activity where the marginal cost of carrying it out is in excess of £5,000 per year. Costs of £5,000 and under (not including the time spent on the activity by those already employed by, or donated on a voluntary basis to the organisation) can be approved by the applicant organisation, where it is satisfied that the highest levels of value-for-money have been achieved. Organisations will be required to provide a detailed breakdown and justification as to why the costs that are in excess of £5,000 per year are essential in the delivery of the project.

For organisations considering applying for the Grant, the restrictions apply to all new advertising and marketing spend which is defined as:

Advertising including, but not limited to:

- TV advertising
- Radio advertising
- Digital advertising
- Outdoor advertising
- Print advertising, including advertorials
- Recruitment advertising campaigns
- Costs of media, and fees and commission for media buying, media planning, creative development and production

Marketing activity, including but not limited to:

- Design and branding
- Direct and relationship marketing
- Customer relationship management programmes
- Telemarketing
- Campaign help lines
- Partnership marketing
- Sponsorship marketing
- Field or experiential marketing
- Merchandising
- Advertiser-funded programming
- Audio-visual activity
- Storage and distribution of marketing materials

Communication strategy, planning, concept and proposition testing and development
Market research that informs marketing and advertising activity
Evaluation of marketing and advertising activity
Printing and publications
Events, conferences and exhibitions
Public relations (PR) activity
7. Digital Activities

DHSC applies restrictions to any digital activity; organisations will be required to provide a detailed breakdown and justification as to why any costs are essential in the delivery of the project.

The following basic tests will help you to detect if there are digital elements to your proposal. This is not an exhaustive list and it is the responsibility of the submitting organisation to ensure that any potential digital elements are clearly highlighted in the application.

For the purpose of these controls digital has been defined as:

“Any external-facing service delivered through the internet to citizens, businesses, civil society or non-government organisations”.

The definition of digital covers any service that the public has any access to, regardless if that is the main audience or not. However, there is a distinction between the functional side of a website and the content it carries. The tests below are designed to detect if there are any functional requirements that would place the proposal under the digital controls.

Test Questions

If you answer ‘yes’ to any of the questions below, your application may be subject to additional approvals:

**Q1. Does this application have any of the following?**

Q1.1. The proposal requires the creation of a new website, including microsites, sites for the publication of information, campaigns, consultation or transactional activity, (note: transactional activity in this context typically means a web based system or site that provides an exchange of information, money, rights, goods or some combination of these),

Q1.2. Requires a new domain registration,

Q1.3. Requires a new e-learning platform,

Q1.4. Have any requirements for a native mobile app that is specifically designed to work on any smart phone platforms, such as Android or iPhone etc. rather than computer web browsers,

Q1.5. Initiate any new web function,

Q1.6. Development or redevelopment any web function.

**Q2. For this proposal, will you have to?**

Q2.1. Form a new contract for web services, including hosting, web development, support or maintenance,

Q2.2. Make any contract amendments, extensions or renewals, including renewal of licences or Cloud services associated with the website,

Q2.3. Make any ‘business as usual’ changes, enhancements, maintenance or refreshes to the function of an existing website, but not any content changes or testing such as AB testing,

Q2.4. Create a website to run any pilots, feasibility and/or proof of concept sites,

**Q3. Other questions**

The following areas are often more difficult to determine. The proposal should be clear that any cost in this area would be part of a present or future digital project.
Q3.1. User needs research. This is often a mixture of comms or policy research work and technical evaluation. There is potential that this cost, and the process used, would form part of a future digital proposition in the discovery phase, and therefore within the digital controls.

Q3.2. Identity assurance for the general public. This function may be part of digital controls. The use of social media applications such as links to a video loaded on Facebook, which do not change the functionality of a website, are not in scope of digital controls. However, if the use of social media applications requires any changes to a website, then the controls apply.

If you answered yes to any of the above questions please let us know in section 3.4 of the application form.
8. Additional Approvals

Proposals that include communications/digital activities will be subject to additional scrutiny, you will need to be satisfied that the highest levels of value-for-money have been achieved. If a proposal can demonstrate that communications/digital activities would be able to demonstrate value-for-money in achieving specified, measurable benefits, the Department of Health and Social Care may consider the proposal for funding. Each bid will be considered on its own merit, but:

- All bids may be subject to an additional approvals process within DHSC. This would consider whether, in the particular case, the measurable benefits from the paid-for communications/digital activities proposed outweighed general concerns about the value-for-money of using Government funds in this way. **We may contact you with a request for additional information.**

- Proposals will need to include consideration of how they could achieve their outcomes other than through paid-for communications/digital activities and why these options are not being proposed. Please insert this information in section 3.4 of the application form. Proposals should show evidence of how the communications/digital activities will directly contribute to the projects objectives.

- The preparation and distribution of printed copies of publications will be funded only in exceptional circumstances; for example, where there is a known need from service users or the need for the document to be available in circumstances where electronic access is not available.

- Conferences and events will not be funded, unless they are explicitly for training or development and can demonstrate measurable outcomes and benefits.

- There are restrictions on grant funding for some aspects of technology and grant funding should not be used for Native Mobile Apps or for websites that duplicate existing services such as NHS Choices, GOV.UK.

- DHSC is not expecting that, even with value-for-money justification, any application would include a communications element of more than £100,000. Any such proposals over this figure would not only require the approval of DHSC, but also that of the Efficiency Reform Group at the Cabinet Office.
9. The Application Process

This chapter gives guidance on the application process and timescales.

What makes a good application?

A good application:

• is concise;
• focuses on clearly defined aims and measurable outputs;
• proves it will have an effect nationally, or clearly explains how it will have the potential for a national effect;
• clearly describes what benefits the proposal will bring, avoiding jargon and abbreviations (unless explained);
• is clear about how the proposal contributes to the Departmental aims;
• is relevant to and tackles the requirements of the funding strand you have chosen;
• shows how it contributes to the funding theme you have chosen;
• has a strong project plan and clear details of costs (see Annex A for Budget Template);
• shows meaningful arrangements for working with others;
• has a realistic strategy for long-term plans, including an ‘exit strategy’;
• has clear evaluation criteria and strategies to pass on what has been learned; and
• shows how equality and the tackling of health inequalities are central to the proposal.

Please note: Significant emphasis is given to whether the proposal will deliver value for money. Proposals should justify the time period of funding that they are requesting and the cost of the activities.

How do I apply?

The deadline for applications is noon 15 June 2018. Include all the details we need to assess your application. We will not accept extra or supporting information received after this date and treat it as if you have not supplied it. We will not accept applications after the closing date. We have fixed these deadlines to be fair to everyone applying and to make sure we can start the assessment process. Incomplete applications affect our ability to complete the assessment process as planned.

Important information

You should be aware that we do not fund all applications that meet the criteria and preferences. We are looking for those that best meet the criteria and preferences and this will allow us to take account of any similarities between proposals. If we identify similar proposals from different
organisations, we will either choose the ones that show most potential on the information provided, alternatively, we may ask you to consider working together with the other organisation on a joint proposal.

Remember that the information we use to assess applications will be what you give on the application form and our knowledge of existing and planned initiatives in that area. If you know of similar services, you should explain on the form how your proposal adds to but does not just copy similar services. If you have applied for alternative funding to deliver similar activities to those described in your application form you should declare this in section 1.9 of the application form.

We will provide feedback on all unsuccessful applications. We provide this in a constructive way so you can review your proposals and see where we felt the strengths and weaknesses were in your application.

Application Form – Questions

You can download a word template of the application form from our website or if you require a paper document please contact us on the details in the introduction section. You should make sure that the responses you give clearly answer each question as fully as possible. Relate the responses to the detail set out in this guidance for applicants.

Please be aware of any word count limits on each section you answer. They will be clearly marked on the application form.

Application completion guidance

Some areas of the application form have resulted in questions from organisations in previous funding rounds. Please see the guidance below for advice on completion:

1.1 Proposal summary: Please ensure that this is kept to no more than a few sentences (100 word limit); this should be a very brief synopsis of what the proposal aims to achieve.

1.4 Joint/Partnership Bids: Please ensure you are completely clear on which structure type you are applying under; organisations have failed eligibility due to selecting the wrong option for joint or partnership bids. Please see page 16 for further information.

4.1 Reference: You are required to provide a reference letter as further evidence of your ability to deliver a project effectively. The reference must come from a stakeholder you have worked with recently on a project, for example an NHS organisation or Local Authority. The letter should provide some context (including a timeline) as well as contact details. Please note that this must not be a ‘Department of Health and Social Care’, ‘NHS England’ or ‘Public Health England’ member of staff.

All proposals will be expected to consider the sustainability of their project after funding has ceased. We would expect projects to develop a sustainability strategy showing how the projects outcomes will continue.
10. Costings

Working out the costs of the proposal

The maximum amount you can apply for is £140,000 for each of the financial years 2018-19, 2019-20, 2020-21, there is no minimum amount. Applications for future years funding are agreed in principle, but this is subject to business planning and funding can be removed at any point.

Your application for funding should be realistic and follow the principles of recovering the full cost of your proposal. We will expect you to be able to show that your proposal will achieve value for money. Don’t forget to take account of cost increases for any additional years of the proposal. We will not automatically increase future years in line with inflation.

We will not accept applications where the proposal costs are more than 25% of your annual income for each year of the project (based on your most recent available final accounts). We have introduced this rule because experience has shown us that organisations who receive a single project grant which is a high percentage of their income may experience difficulty in covering core costs which then has an effect on their ability to deliver the project. If there are particular circumstances which mean that your latest accounts do not represent your current or expected income, please explain this on the form.

You do not have to pay VAT on the Grant as they are generally considered out of scope of VAT because we do not receive direct benefit from the Grant. We cannot give you advice on whether the activities you will be carrying out with the Grant will be charged VAT. You will need to discuss this with HM Revenue and Customs. It could be that while the income (the grant) is outside the scope of VAT, the activities you are providing may be charged VAT. If you need to pay VAT on any of the work and you cannot get it back, you should include this in the initial costings. If it is a partnership bid and delivery partners will be invoicing you for their costs, you should also check with HM Revenue and Customs whether the activities will incur VAT that cannot be recovered.

Recovering the full cost of the proposal

You should aim to recover the full costs of delivering services for public sector organisations, including overhead costs and VAT that you cannot recover. This will involve you presenting applications for funding on the basis of strong and evidence-based calculations of the costs of the funded activity or service. Overhead costs can include accommodation, human resources, utilities, maintenance for premises and monitoring requirements. This is not a full list. These overhead costs need to be both relevant and reasonable.

We would normally expect overheads to make up to 10% of your projects costs, if your overhead costs are higher please provide an explanation why.

Please note you may find it helpful to refer to clause 3.8 of The Compact in relation to recovering the full cost of the proposal. There are also organisations in the voluntary sector that may be able to support you in calculating these costs, including the Association of Chief Executives of Voluntary Organisations (ACEVO) and the National Association for Voluntary and Community Action (NAVCA).
11. Use of DHSC Logos and Branding

You will not normally be able to use the DHSC or the NHS logos on any material you produce through the Grant. You can use ‘Produced with funding support from the Department of Health and Social Care’ or similar. But the statement should not suggest that we have guaranteed the quality of the product or that we endorse the product.

If you are producing material that has intellectual property rights (IPR) or copyright issues, we ask that you highlight this in your application. We may want to discuss this with you.

Data Protection and Confidentially

It is essential for the Grant recipient to have all the necessary processes in place to ensure the exchange of information between external bodies throughout the lifetime of the project is fully respected, secure and to adhere to rules of the Data Protection Act (DPA) 1998, the Freedom of Information Act 2000 and the Human Rights Act 1998. The Grant recipient will need to take reasonable care to prevent inappropriate access, modification or manipulation of data from taking place. In practice, this is applied through three cornerstones – confidentiality, integrity and availability;

- information must be secured against unauthorised access – confidentiality;
- information must be safeguarded against unauthorised modification – integrity;
- information must be accessible to authorised users at times when they require it – availability.

For further information please refer to Principles of information security on the Health and Social Care Information Centre’s website.
12. What Happens Next?

We will assess applications along with the supporting information you have provided. We may contact external stakeholders to discuss your proposal with them. If we send any applications outside the Department, we will also inform them that the proposals are confidential and they should not discuss them with others.

A short list of applications will be submitted to Ministers, along with advice as to how it matches up with our conditions and preferences.

Giving you our decision

We aim to inform you of our decision of the outcome of your application by September 2018. We will do this by e-mail to the contact on the application form. Please let us know if the following changes: the e-mail address of the application contact and/or her/his organisation; the name of the organisation and/or its application contact; the address of the organisation. Some organisations have their e-mail systems set to automatically filter out 'system-generated e-mails', so if you have not received a reply from us, please check your ‘spam’ or ‘junk’ folders before contacting the helpdesk.

Summary of conditions of the award

If you are successful, we will send you an award letter showing the full terms and conditions of the Grant. Below are some of the conditions you should be aware of at this stage.

- The terms and conditions must be accepted by a board member (trustee or director) or the chair of the management committee if you are an unincorporated association.
- We confirm the Grant for year 1 but the amounts for any additional years are provisional offers and are subject to performance and financial reporting.
- Grants are restricted funds and are recorded as such in the accounts. (Identifying the Grant in your accounts is required as a measure of accountability for the use of public funds).
- You will have to repay the Grant if you do not use it for the purposes intended.
- You cannot pass all or part of the Grant funding to individuals or other organisations, funds can only be moved to pay for contractual activities as part of a partnership or joint bid.
- You will be required to provide us with monitoring information.
- We are not committed to provide any funding after the agreed term of the Grant.
- You must identify the Grant in your accounts as being from ‘Department of Health and Social Care’.
Appeals

The Grant is a discretionary scheme and you cannot appeal against the decisions made by Ministers. However, we do know that, at times, you may feel that we have not followed the grant application process correctly and you may want to raise a concern. We treat these requests as complaints and use our complaints procedure. The first stage is ‘informal resolution’ where the Voluntary Sector Grants Hub would handle your complaint. If you are unhappy with the response, you can make a formal complaint to the ‘Deputy Director of Departmental Financial Management and Partnering’. The complaint will be investigated and the findings reported back to you.

Deputy Director of Departmental Financial Management and Partnering
Voluntary Sector Grants Hub
2S10 Quarry House
Quarry Hill
Leeds
LS2 7UE

If you are unhappy with that response, you can take this further within our complaints procedure by writing to the Head of Customer Service.

Complaints Manager - Customer Service Centre
Department of Health and Social Care
39 Victoria Street
Westminster
London
SW1H 0EU

This is a summary of our complaints procedure and you can find full details here.
13. Delivery and Monitoring

Summary of monitoring requirements

All Government Departments have a duty to ensure that all grant awards offer value for money and are spent in line with the original plans. The Department therefore places great importance on the monitoring of all grant awards. If your application is successful and you receive grant funding, you will be asked to provide the following documents during the period of the grant:

- A quarterly update on the progress of the project;
- An end-of-year progress report and forward plan for next year, including expected spending;
- An end-of-project report and summary of total spending on the project; and
- Annual accounts to show you have identified the grant correctly or;
- A ‘Certified statement of the project’s income and expenditure’ signed by any of the following: - trustee, company director, chief executive, finance officer/treasurer, registered auditor, reporting accountant or independent examiner. This must be in the same detail as the budget template provided in Annex A.
- You may also be asked to provide a ‘Certified statement of the project's income and expenditure’ if we feel that the accounts provided are unclear.
- However if your organisation is not legally required to have its accounts audited, reported on by a reporting accountant or independently examined, then you must provide one copy of a ‘statement of your organisation's gross income and total expenditure’, in which the Grant must be separately identified, and signed by a trustee or, if a limited company, a company director.

You will be assigned an Accounts Manager, they will:

- Monitor your progress against your project plan/milestones/outcomes
- Discuss and manage any risks against delivery
- Agree any changes to the project plan
- Agree payment against outcomes

Please note, you may find it helpful to refer to sections 3 and 4 of the Compact, particularly clause 3.6. You can view this here.
14. Contact Us

By email: tcpgrant@dh.gsi.gov.uk

We will reply to your query as soon as possible.
Appendix A: Risk Management Template

Please ensure you complete risk management in your application using the template below. See the format in example below:

<table>
<thead>
<tr>
<th>RISK REFERENCE No.</th>
<th>RATING (Likelihood)</th>
<th>RATING (Impact)</th>
<th>DESCRIPTION of IMPACT</th>
<th>ACTION BEING TAKEN TO MANAGE THE RISK</th>
<th>RISK MANAGEMENT RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>EG: 001: Impact upon NHS and/or other organisations</td>
<td>Low</td>
<td>Medium</td>
<td>One of the key drivers for the project is to improve functionality for NHS users in order to achieve significant efficiency gains. Impact: Failure to do this would result in reduced confidence both in the system and the DHSC’s ability to deliver promised enhancements</td>
<td>Project Manager will closely monitor the project and report progress to the Project Board both by means of Highlight Reports and Board meetings. Any significant project issue will be immediately brought to the attention of the Project Chair.</td>
<td>Project Manager (PM), Project Board (PB)</td>
</tr>
</tbody>
</table>
Appendix B: Additional Information

You may find the additional information below useful when completing your application.

Can you please clarify if the £5000 for communication activities is per year in total, or per year on each of the restricted activities?  
The total amount of spending on communication activities must not be more than £5000 in total per year.

Can Local Authorities apply as a partner organisation?  
Yes, as a minor partner with a voluntary organisation as the lead partner.

Can we contract out some work?  
No, you may not subcontract out the grant. But where required grantees can purchase specific expertise, goods or services, not held in house, which are necessary for them to complete the project.

Can we use a reference from someone for whom we have undertaken has been ‘in-kind’ activity and we have not had shared funding to deliver this work?  
A reference from an organisation that you had a financial relationship with would be stronger than that from an organisation where work has been in kind. It would be perceived as more impartial and independent due to the contractual relationship between parties and allows comments to be made on ability to stick to time and budget.

How thorough should the impact assessment be?  
We don’t expect a full impact assessment, we expect you to consider the guidelines on government funded projects and the impact your proposal will have on society. Please reflect on the interventions you are proposing and assess how they will affect different sections of society. This should be maximum of 1 page.

In the application pack it asks for a project plan to be no more than 1-2 sides, can we go over this?  
This has been revised. We will accept 1-2 sides for each year of your proposal.

Can hospital trusts apply for the grant?  
No.

Do I have to stick to the word limit?
Some questions have word limits in place. If you exceed the word limit on a question we will only use the information you supply up to the word limit to score your answer and will disregard text after the word limit.

In question 3.1 you ask for key milestones and deliverables. Is there a template for this? Please use annex B, project plan, to answer this question in 3.1. You should include at least 5 milestones each funding year with corresponding deliverables.

When should I start my budget form from? Please start your budget from 1 September 2018.

What do you mean by 'hosting costs' on the budget template? If you do not have any hosting costs please ignore this section. This also applies to other areas in the budget template.