

Area Board Projects and Councillor Led Initiatives Application Form 2014/2015

To be completed by the Wiltshire Councillor leading on the project

Please ensure that you have read the Funding Criteria before completing this form

PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED

1. Contact Details

Area Board Name	Chippenham		
Your Name	Councillor Peter Hutton		
Contact number	01249 660713	e-mail	peter.hutton@wiltshire.gov.uk

2. The project

Project Title/Name	One stop shop for your heart
Please tell us about the project /activity you want to organise/deliver and why? <i>Important: This section is limited to 900 characters only (inclusive of spaces).</i>	<i>By popular demand a "one stop shop" presentation covering: demonstration of a defibrillator, how to perform CPR, general information on defibrillators, possible planning considerations, advice on funding sources, ongoing costs, answers to concerns around liability, opportunity for practical individual support & information packs. Parishes & individuals voiced their frustration around trying to procure a defibrillator & access all the ancillary information required. In trying to help them it became apparent that whilst some parishes & organisations have proceeded to provide a defibrillator, the reasons why others had not needed to be addressed. As defibrillation is only one aspect of the whole process in resuscitation, it is key to include instruction on how to deliver CPR as part of the session provided. To facilitate the delivery of factual information through demonstrations.</i>
Where is this project taking place?	Goss Croft Hall, Seagry
When will the project take place?	Spring 2014
What evidence is there that this project/activity needs to take place/be funded by the area board?	There are approximately 76 defibrillators available for use across the Chippenham Area Board, there are still gaps in the service, & not all AED units are public access 24/7

How will the local community benefit?	The event will raise the profile of the need for defibrillators to improve availability of public access defibrillators across the Chippenham & Villages Board Area, reduce the time it takes to research acquire & install a defibrillator, provide support by creating the opportunities for Town Parishes & other parties to attend an organised event.		
Does this project link to a current Community Issue? (if so, please give reference number as well as a brief description)	N/A		
Does this project link to the Community Plan or local priorities? (if so, please provide details)	Access to Community Health Services for vulnerable people		
What is the desired outcome/s of this project? To raise the profile of the importance and practical benefits of a defibrillator, and support to install one.			
Who will be responsible for managing this project? Councillor Peter Hutton & Alison Butler (ChAP)			
3. Funding			
What will be the total cost of the project?	£ 985		
How much funding are you applying for?	£ 985		
If you are expecting to receive any other funding for your project, please give details	Source of Funding	Amount Applied For	Amount Received
Please give the name of the organisation and bank account name (but not the number) your grant will be paid in to. (N.B. We cannot pay money into an individual's bank account)			
4. Declaration – I confirm that...			
<input type="checkbox"/> The information on this form is correct and that any grant received will be spent on the activities specified <input type="checkbox"/> Any form of licence, insurance or other approval for this project will be in place before the start of the project outlined in this application			
Name: Peter Hutton		Date: 25/11/2013	
Position in organisation: Councillor			
Please return your completed application to the appropriate Area Board Locality Team (see section 3)			