



Reference no

Log no

For office use

Community Area Grant Application Form 2010/2011

Please ensure that you have read all the Funding Criteria and Additional Guidance Notes before completing this form PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED

We strongly advise that you contact your Community Area Manager before completing your application.

1 - Your organisation or group

Name of organisation	Calne First Responders		
Contact name			
Contact address			
Contact number		e-mail	
Organisation type	Not for profit organisation <input checked="" type="checkbox"/> Parish/town council <input type="checkbox"/> Other, please specify		

2 - Your project

In which community area does your project take place? (Please give name – see section 3 of the grants pack)	Calne Area Board
Does your town/parish council know about your project?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).	To expand our existing scheme by providing 3 responders with equipment to respond to life threatening calls in their own vehicles. This would enable Calne First Responders to cover a greater geographical area and eliminate the time gaps when there is no cover.
Where will your project take place?	Calne and surrounding villages
When will your project take place?	Mid September 2010
How many people will benefit from your project?	Unknown, Nos dependant on 999 calls
How does your project demonstrate a direct link to the community plan for your area? Please provide a reference/page no.	On average 70% of our calls are related to ill health within the Calne area. We aim to provide 24 hour fast response to all calls. 10

What is the link between your project and other local priorities? e.g. Priorities set by your area board and parish plans.

At present no known link.

How did you discover there was a need for your project and how will your project benefit your local community?

Important: Please do not type in paragraphs – This section is limited to 1200 characters only (inclusive of spaces)

It is known nationally that early intervention with basic life support equipment can increase the chances of a casualty surviving in a life threatening situation. It also reduces the potential damage that can be caused during various life threatening situations. Calne First Responders have an average response time of 4 minutes during the day however there are gaps during the 24 hour period that cannot be covered and geographically there are areas that are currently outside the radius covered. By having the equipment on the additional 3 vehicles this will increase our cover and availability.

Any other information about your project.

On a yearly average there are 3 life threatening calls daily in a 3 mile radius from the town centre.

It is our intention to provide basic life support training to the local community using the offer of free use of the Calne Town Hall. This training will be made available to all members of the community free of charge (page 6 community plan).

3 - Management

How many people are involved in the management of your group/organisation? 4

Of these, how many are:

Over 50 years	Male	<input type="text" value="1"/>	Female	<input type="text" value="0"/>
25 – 50 years	Male	<input type="text" value="1"/>	Female	1 <input type="text"/>
Under 25 years	Male	<input type="text" value="0"/>	Female	<input type="text" value="0"/>
Disabled People	Male	<input type="text" value="0"/>	Female	1 <input type="text"/>
Black and Minority Ethnic people	Male	<input type="text" value="0"/>	Female	0 <input type="text"/>

If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?

Public donations and milage payments from GWAS will maintain our service to the community, it is not anticpated that the scheme will need to expand further.

If you were not awarded the full amount requested, what would be the impact on your project?

It would limit the cover we could potentially offer the community, in particular the outlying villages.

How will you know whether your project has made a difference in the community?

An increase in the number of calls attended and feedback from patients.

Have you contacted Charities Information Bureau for help with your application/ to seek funding?

Yes

No

To who have you applied for funding for this project (other than Wiltshire Council)?

Wilkins Builders and Hilmartin CFR group

Have you been successful?

Yes

No

Have you or do you intend to apply for a grant from another area board within this financial year?

Yes

No

If yes, please state which ones.

Are you in receipt or anticipating other funding from Wiltshire Council for this project?

Yes

No

4 - Information relating to your last annual accounts (if applicable)

Year ending:

Month: June

Year: 2010

A - Total income:

£7643

B - Minus total expenditure:

£8277

Surplus/deficit for year: (A minus B)

£633

Free reserves held:

£959

5 - Financial information

Project Costs A Please provide a <u>full</u> breakdown e.g. equipment, installation etc.		Project Income B Please list all sources of funding for this project, as provisional (P) or confirmed (C)		
			P/C	
Magnetic Light Bar C/W Siren x3	£2,966	Own fundraising/reserves		£
Responder Backpacks x3	£447			£
Entonox Units x3	£687	Parish/town council		£
Diagnostic Leads x3	£490			£
Tom Tom 1excel x3	£360	Trusts/foundations		£
	£			£
	£	In kind		£
	£			£
	£	Other		£
	£	Hilmarton CFR	C	£1,500
	£	Wilkins Builders	C	£1,000
	£			£
	£			£
Total Project Expenditure	£4,950	Total Project Income		£2,500
Total project income B		£2,500		
Total project expenditure A		£4,950		
Project shortfall A – B		£2,450		
Award sought from Wiltshire Council Area Board		£2,450		
Bank Details				
Please give the name of the organisations' bank account e.g. Barclays		Britania Building Socitey		
Please give the title name of the organisations' bank account e.g. current		Club account (Calne First Responders)		

6 – Supporting information – Please enclose the following documentation

Enclosed (please tick)

- Written quotes including the one you are going to use
- Latest inspected/audited accounts or annual report
- Income and expenditure budget for current financial year
- Project budget (if applicable)
- Terms of reference/constitution/group rules
- Evidence of ownership/lease of buildings and/or land

For new groups, only the group's terms of reference and a projected income and expenditure budget covering a period of 12 months is required.

7 - Equalities and Inclusion – Wiltshire Council is committed to ensuring that its work through the Area Boards benefits all sections of our community and promotes equality and inclusion. To assist us in assessing how your application aims to meet our commitment to equality and inclusion, please provide a brief answer to the following:

a) How does your project work to either (a) promote equality and access to services/facilities, and/or (b) reduce disadvantage?

The oncall responder attends all cat A (life threatening) 999 calls within the radius of their designated area irrespective of their ethnic diversity or disability.

b) How does your project work to promote inclusion, participation and good community relations?

We provide a high profile service to support the local community.

c) Is your project targeted at a specific group? If yes, please tick any of the following which apply

- Under 25's Over 50's
- Mostly or all men/boys Mostly or all women/girls
- Specific minority ethnic groups (please state which groups)
- Specific faith groups (please state which groups)
- People/families on low income
- Other disadvantaged groups (please state which groups)

8 - Declaration (on behalf of organisation or group) – I confirm that...

- I have read the funding criteria
- The information on this form is correct, that any award received will be spent on the activities specified, that I will complete a monitoring form (if requested) following completion of the project.
- If an award is received, I will complete and return an evaluation sheet.
- That any other form of licence or approval for this project has been received prior to submission of this application.
- That the necessary policies and procedures will be in place prior to the commencement of the project outlined in this application. Child Protection Public Liability Insurance
- Equal opportunities Access audit Environmental impact
- Planning permission applied for (date) or granted (date)
- That acknowledgement will be given of Wiltshire Council support in any publicity, printed or website material.
- I give permission for press and media coverage by Wiltshire Council in relation to this project.

Name:	Date: 16/07/2010
Position in organisation: CFR Team Leader	

Please return your completed application to the appropriate Area Board Locality Team