

Reference no

Log no

For office use

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 Corsham Area Board **Your Name** Councillor Sheila Parker **Contact number** sheila.parker@wiltshire.gov.uk e-mail 2. The project Slipper exchange as part of health Fayre on 20th November 2014 **Project Title/Name** Please tell us about the project /activity Wiltshire Council and key partners are holding a series of health events across the county in you want to the coming months. Corsham Community Area health event is one aspect of the delivery of organise/deliver and this exciting and ambitious series of dates. why? As part of this event, Corsham Area Board has expressed a desire to offer a slipper exchange for people as part of an early intervention strategy to reduce the incidences of Important: This section falls and trips especially amongst the elderly in our community area. Some key partners have already agreed that this will be a very worthwhile element of the is limited to 900 characters only event being held and have agreed to support it in terms of organising delivery and (inclusive of spaces). exchange of the slippers on the day. People attending this event will also have an opportunity to talk to other health related professionals about all aspects of healthy / safe living. Where is this project taking place? Springfield Campus, Corsham When will the project take place? 20th November 2014 What evidence is there that this Community Plan and recent JSA event. Early intervention schemes. project/activity needs to take place/be Wiltshire Council business plan. Protect those who are vulnerable. funded by the area board? Working together to solve problems locally.

How will the local community benefit?	The older people in the community who participate in the slipper exchange will directly benefit from having slippers that fit correctly thus lowering the risk of trips and falls and the need for hospital treatment. Their families, friends and relatives will benefit from not having to cope with the pressure and turmoil associated with admittance to hospital and associated stress involved.			
Does this project link to a current Community Issue? (if so, please give reference number as well as a brief description)	This issue was raised at the recent JSA event held March 2014.			
Does this project link to the Community Plan or local priorities? (if so, please provide details)	JSA priority early intervention eapecially those who are vulnerable.			
What is the desired outcome/s of this project? Reduction in trips and falls associated with ill fitting slippers.				
Who will be responsible for managing this Corsham Area Board and it's partners	project?			
3. Funding				
What will be the total cost of the project?	£ 1,500			
How much funding are you applying for?	£ £1,500			
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)	Tbc			
4. Declaration – I confirm that	1			
 ☑ The information on this form is correct specified ☑ Any form of licence, insurance or othe project outlined in this application 				
Name: Sheila Parker			Date : 06/09/2014	
Position in organisation: Councillor		_ 3.0. 30,0072		
Please return your completed application	to the appropriate Area Board Locality	I 「eam <u>(see sect</u> i	ion 3)	