

ASSISTANCE TO VOLUNTARY ORGANISATIONS
ASSESSMENT FORM for Social Welfare Grants, Education and Leisure
Development Grants

1 Details

Name of Assessing Officer	Chris Goan – Area Manager MH
Have you contacted/visited the organisation to assess this application? *	Contacted <input checked="" type="checkbox"/> Visited <input type="checkbox"/>

***Please note if grant has not been checked and approved it cannot go ahead**

Name of Group:	Dunoon Elderly Forum	Scheme:	Social Welfare
Key Contact Person:	Margaret Johnston President	a) Grant requested from A & B Council?	£450
		b) Grant awarded last year?	£438
		c) Total cost?	£2359.44
		d) How much coming is from own resources?	£1921
		e) How much coming from other agencies?	£0
		Grant Recommended:	£450
Reason for grant:	<p>To sustain the work of the forum in providing information, advice and support to older people in the Dunoon and Cowal area. To contribute to costs of hire of the hall, and advertising various meetings/events.</p> <p>The elderly forum acts to promote the welfare of older people in this area, engaging people in local issues through discussion, campaigning and information sharing. It also provides an important social and networking function.</p>		

2 Financial Check – Have you checked the Organisation is:

a)	Fully constituted	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
b)	Has submitted a bank statement	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
c)	Has submitted audited/signed accounts	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
d)	<u>Leisure and Education Development Grants</u> : If over £2000 have you sent this grant to finance?	Yes <input type="checkbox"/>	N/A <input type="checkbox"/>
e)	If relevant, has the grant passed the financial check?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
f)	<u>Social Welfare Grants</u> : Has the grant been registered with Library Headquarters?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
g)	Have you checked that the organisation is within 50% of the costs for the relevant grant scheme?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
h)	Have you checked that the Council is meeting its obligations under Best Value in awarding this grant, for example, if the grant is awarded will the work definitely go ahead?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

3 General Criteria

Do you concur with the organisation in their assessment of need? Please supply a very brief summary:	
Is the activity non-political?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is the project consistent with Council priorities?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the project have open membership?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Have sponsorship agreements been checked?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
How many people overall will benefit from this grant?	50-60
Is the organisation well established?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Have you identified any training needs for the organisations committee or volunteers?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the organisation have volunteer training in place?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Have you confidence in their ability to deliver a service?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

4 Policy and Procedures

Have you checked that the organisation, particularly if they work with children under 18 or vulnerable adults has in place a Child Protection Policy or a Vulnerable Adults Policy?

a) Clear recruitment policies	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
b) Ongoing training and support for volunteers	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
c) A code of conduct for staff and volunteers	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
d) A Code of Good Practice	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
e) An Equal Opportunities Policy	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
f) A Policy for Managing Confidential Information	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
g) Grievance Procedure for staff and volunteers	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
h) A Disciplinary Procedure for staff and volunteers	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Signed: **Chris Goan, AMMH**

Assessment Officer

Date: 4/6/10

5 Equal Opportunities

What are the clients ethnic group(s)?

A White

Scottish

Other British

Irish

Any other White background please specify

American

B Mixed

Any Mixed background please specify

C

Eastern European

D Asian, Asian Scottish or Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background please write in

E Black, Black Scottish or Black British

Caribbean

African

Any other Black background please write in

F Other Ethnic background

Any other background please write in