

Skills for Care

Grant application (ULO)

Funding to pay for the learning and development of personal assistants (PAs) and individual employers (IEs)

2022/2023

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| **Organisation name**  Name of the lead organisation that will be legally responsible for this grant and should be a user led organisation. |  |
| **Total funding requested**  The total amount, in pounds, that you would like, to be able to deliver or commission training for IEs and PAs, including any VAT. | £ |

**Before completing the application, read all the questions as well as the information on** [**www.skillsforcare.org.uk/ulofunding**](http://www.skillsforcare.org.uk/ulofunding)**.**

**IMPORTANT:**

* Write within the boxes only.
* Do not expand the sizes of the boxes.
* Applications where the boxes have been expanded may be rejected.
* Do not save this application as a PDF as it may be rejected.

**Eligibility criteria**

* This funding is to pay for the learning and development of:
  + individuals who employ PAs (individual employers) using a social care direct payment from their local authority and/or a personal health budget (PHB) from the NHS, or their own money
  + PAs directly employed by individuals using a personal budget (social care and/or health) or their own money
  + prospective PAs as part of a structured pre-employment programme
  + pre-employer training for those pre-approved for a social care direct payment from their local authority and/or PHB direct payment from the NHS.
* Applicants must be organisations who are run for, and by, people with a disability or long-term health condition (disabled people’s user led organisations). For example, organisations that have a minimum membership of 75% of disabled people on their board and employ disabled staff and volunteers, including disabled people, people who use mental health services, people with learning disabilities, older people, and their families and carers.
* Applicants must have direct contact with people who employ PAs (known as individual employers) and PAs, and access to their contact details.
* Applying organisations must be able to identify the learning and development needs of individual employers and PAs and be able to deliver a training programme that meets those needs.

The following organisations are not eligible to apply:

* learning providers
* local authorities
* clinical commissioning groups (CCGs)
* care providers (organisations employing carers/PAs on behalf of individuals)
* organisations that only provide services for people who access care and support (e.g. payroll providers, charities who are not user-led, etc.)
* organisations working with self-employed PAs.

**Announcing and promoting successful grant holders**

Skills for Care will announce the details of the successful grant holders and the training they expect to deliver on our website, and promote them through local contacts, newsletters and social media. The amount of funding awarded will not be shared publicly.

**Performance review and evaluation**

Comprehensive record keeping is essential as successful applicants will be required to:

* complete one written interim report (due end Oct 2022)
* attend one group virtual Q&A meeting with all other grant holders (early Nov 2022)
* complete second written interim report (due end Jan 2023) and attend one performance review meeting (held virtually in Jan 2023)
* complete an end of project evaluation (due end March 2023).

**Financial information**

* This tendering process is being undertaken subject to confirmation of funding from the Department of Health and Social Care, and NHS England and NHS Improvement.
* All costs must be outlined in the application form (including VAT).
* Applications can include the direct costs of training, travel for the learner and the cost of hiring replacement support whilst the employer’s usual PA is attending training during their normal working hours.
* Funding cannot be awarded to pay for the normal running costs of office facilities nor the purchase of IT equipment.
* A small portion of the grant can support project management, but the majority of the funding should be used to pay for training delivery.
* Skills for Care will transfer grant funding using BACS. If your application is successful, we will request your organisation’s bank details as part of the grant letter.

**Timeline**

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| **Applications open** | Tuesday 17 May 2022, 10:00 |
| **Q&A webinar:** email [funding@skillsforcare.org.uk](mailto:funding@skillsforcare.org.uk) to sign up | Wednesday 8 June, 10:00 -11:00 |
| **Applications close** | Monday 20 June 2022, 12:00 |
| **Outcomes notified** | By end of July 2022[[1]](#footnote-1) |
| **Interim report 1** | Monday 31 October 2022, 12:00 |
| **Interim report 2** | Monday 30 January 2023, 12:00 |
| **Training completed and Final evaluation report** | Friday 31 March 2023, 12:00 |

**Queries**

If you have any questions about this funding, or require support to complete the application, please contact [funding@skillsforcare.org.uk](mailto:funding@skillsforcare.org.uk) or call 0113 241 1275.

**Section 1: Organisation details**

If any of these details change at any time, you must inform Skills for Care as soon as possible.

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| Full address  including postcode |  | | |
| Charity number |  | Company number |  |
| Other (please specify) |  | | |
| If the lead organisation is an unincorporated association and not registered with the Charity Commission, please tick this box, and send us a copy of your governing documents (for example, constitution or set of rules) with your outline proposal. | | | |
| Local authority area |  | | |
| **Senior manager:** | Details of the person who has the authority to sign and submit this application on behalf of your organisation (section 5). | | |
| Name |  | | |
| Phone number |  | | |
| Email |  | | |
| **Primary contact:** | This is the day-to-day contact for the project and should be different from the senior manager you have named above. | | |
| Name |  | | |
| Phone number |  | | |
| Email |  | | |
| **Secondary contact:** | This is the contact for the project should neither the senior manager nor primary contact be available, and who should be able to progress the project in their absence. | | |
| Name |  | | |
| Phone number |  | | |
| Email |  | | |

**State the number of people to whom your organisation provides a service, split into the categories below.**

* Only count individuals who your organisation has a **direct** relationship with, and for whom you have **direct** access to their contact details.
* Do not include individuals where you would need to go through another organisation to contact them.
* Use exact whole numbers only (words or ranges will not be accepted).
* If your organisation provides a service to others who are not included here, provide details and any further information in the space provided (‘Others’).

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| Employers who receive direct payments from their local authority |  |
| Employers who receive a Personal Health Budget as a direct payment from their CCG/NHS |  |
| Employers who are self-funders |  |
| Personal assistants (PAs) – working for direct payment/self-funding IEs |  |
| Personal assistants (PAs) – working for PHB funded IEs |  |
| Others, please specify below: |  |
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| **How many additional PAs are you able to contact via your members?**  The number of PAs who you do not have direct contact with, but who you could contact via your members. This number will be in addition to those you have on your database. |  |

**Describe how your organisation is user-led:**

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**What services does your organisation provide?**

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**Section 2: Partner organisation details**

Partnership working is encouraged, particularly where there is an opportunity to extend the reach of this funding and the learning and development offer you would like this funding to support. This could be with another ULO, community or voluntary organisations, local authorities etc, that support IEs and/or PAs.

If you plan to work with more than one other organisation, submit the same information for each using additional sheets as an appendix to this application form.

If you are not planning to work with a partner, this section does not apply, and you can move to section 3.

**IMPORTANT NOTE:** Learning providers cannot be a partner organisation.

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| Organisation name |  | | |
| Full address  including postcode |  | | |
| Charity number |  | Company number |  |
| Other (please specify) |  | | |
| If the partner organisation is an unincorporated association and not registered with the Charity Commission, please tick this box, and send us a copy of your governing documents (for example, constitution or set of rules) with your outline proposal. | | | |
| Local authority area |  | | |
| **Senior manager:** |  | | |
| Name |  | | |
| Phone number |  | | |
| Email |  | | |

**State the number of people to whom this partner organisation provides a service to:**

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| Employers who receive direct payments from their local authority |  |
| Employers who are self-funders |  |
| Employers who receive a Personal Health Budget as a direct payment from their CCG/NHS |  |
| Personal assistants (PAs) – working for direct payment/self-funding IEs |  |
| Personal assistants (PAs) – working for PHB funded IEs |  |
| Others, please specify below: |  |
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**Outline the benefits of this partnership for you and any or all partners:**

Give specific details of each partner’s contribution (for example, advice, the offer of training, access to additional resources) and any shared or individual project outcomes.

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**Outline how, when and why the partnership has been formed:**

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**Outline details of any financial arrangements made between your organisation and your partners:** Tell us how the funding will be split between your organisation and the partners (including any professional fees that will be paid to any partners and what they are for), and how that money will be managed between you and the partners. For example, you’ll ensure the partners meet milestones and/or objectives before you transfer them the money and/or you’ll detail any consequences if partner organisations don’t perform well against milestones and/or targets.

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**Section 3: Project deliverables and outcomes**

**What is the training you want to deliver or commission?**

We encourage innovative or different ideas for IE and PA training.

The answer to this question should **ONLY include** the information listed below.

* the type or name of the course or qualification and a description of what will be learned
* the name and contact details of the provider
* how the training will be delivered and in which setting (e.g. virtually, classroom, employer’s home, etc.)
* the type of completion evidence learners will receive (e.g. attendance certificate, a certificate from an awarding organisation, continuing professional development certificate etc.)

The panel will have prior knowledge of the challenges facing IEs, PA development and recruitment, as well as the range of resources available to support them. **Do not** include this in your application.

You will have the opportunity to explain why the training is needed and how it will be promoted later in this application, so you **do not** need to include this here.

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**How do you know this learning and development is needed and that the training you intend to provide is the right solution?**

Tell us:

* how you know that IEs and PAs in your area are interested in learning and development
* how you know what training IEs and PAs would like to undertake
* how you know this is the best way to deliver that training for IEs and PAs.

You should have carried out research or undertaken a learning needs analysis with IEs and PAs. The panel may reject any applications that cannot provide a rationale to support the need for learning and development in your area and evidence that what you are proposing will meet the needs of IEs and PAs.

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**How will you promote the opportunity to participate in learning and development, and if you intend to promote it beyond your current membership, how will you do this?**

It is important to make IEs and PAs aware of the funded training and you should use a variety of promotional tools to do this, for example, social media, website, emails, one to one conversations, posters and flyers. You should also say how you are going to promote this training to people who are not members of your organisation, ensuring that you have permission to access their contact details.

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**How many people do you expect to attend the training?**

The number of people that will attend the training or engage in learning.

**IMPORTANT NOTE:** This is different to the number of learning outcomes you expect to be achieved with the funding. We would expect the number of individuals attending training to be lower than or equal to the number of learning outcomes achieved. This is because an individual may attend more than one training course. For example, In the case where you expect one (1) learner to attend three (3) training courses, you should count them as one (1) learner. Learning outcome details will be captured on the full cost breakdown spreadsheet (section 4).

You must use exact whole numbers only (words or ranges will not be accepted). If this application includes a partner organisation that will not contribute learners (that is, they are providing advice and guidance only), give full details of their contribution or role in Section 2.

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| **Learner type** | **Lead partner** | **Partner(s)**  **(if applicable)** |
| Employers who receive direct payments from their local authority |  |  |
| Employers who are self-funders |  |  |
| Employers who receive a PHB as a direct payment from their CCG/NHS |  |  |
| Personal assistants (PAs) – working for direct payment/self-funding IEs |  |  |
| Personal assistants (PAs) – working for PHB funded IEs |  |  |
| Others, please specify below: |  |  |
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| **Totals:** please ensure these are calculated correctly |  |  |

**Explain how you expect the learning and development will benefit these individuals in the immediate and longer term:**

For example, an immediate benefit may be that a PA has learned a new skill or has a better understanding of a specific condition. A longer-term benefit may be that the PA will be able to support their employer more effectively and may progress onto further training, or employers may experience a reduction in staff turnover.

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**Aside from the skills and knowledge gained through the training, how else will IEs and PAs benefit from this funding?**

This should include (but is not limited to) details of support or signposting that will allow individuals to continue their personal development, access available funding or identify what to do next.

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**How will this project be managed and how will you ensure the activity, including all learning or training, is completed within the advertised timescales?**

You should use this section to tell us:

* the person responsible for delivering this project (name and/or job role)
* what project methodologies (e.g. structured approaches for planning, developing, controlling and delivering a project) will be used to ensure it is delivered within the timescales.

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**Acknowledging Skills for Care**

During this project, all promotion of the training should include the ‘funded by Skills for Care’ logo. If successful, you will be sent a declaration form and the logo.

In addition, Skills for Care has lots of resources for IEs and PAs on the [information hub for IEs and PAs](http://www.skillsforcare.org.uk/iepahub), and distributes [individual employer funding](http://www.skillsforcare.org.uk/iefunding) to pay for training. We encourage you to use and promote these resources. Use this section to tell us what you will use and how.

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**Section 4: Costs**

Complete and submit the full cost breakdown spreadsheet that was provided with your application. You can [download it here](https://preview-skillsforcare.cloud.contensis.com/resources/documents/Funding/ULO/Application-full-cost-breakdown-ULO-funding-2022-23.xlsx). Instructions have been included within the spreadsheet.

**IMPORTANT:**

* Applications can include the direct costs of the training course, travel for the learner and the cost of hiring replacement support whilst the employer’s usual PA is attending training during their normal working hours.
* Funding cannot be awarded to pay for the normal running costs of office facilities nor the purchase of IT equipment.
* A small portion of the grant can support project management, but the majority of the funding should be used to pay for training.

**Explain how your application demonstrates value for money.**

Tell us how you will make sure the training and resources represent value for money. For example, explain that you have carried out some cost comparisons and obtained quotes prior to submitting your application for funding.

You should also include any ‘added value’ that you expect your organisation to receive during the project. For example, this may result in an improved relationship with your members or partners.

You must also include any sustainable outcomes from the project. For example, new resources or peer support networks that will be self-managed and can continue after the lifetime of this project.

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**Section 5: Declarations**

**Declarations of interest**

This declaration must include details of any interests held by you or any of the partner organisation(s) that you identified in Section 2.

You must declare if your organisation, any person within your organisation or any individuals you represent have any personal or material interest/links with Skills for Care. This applies to organisations or individuals who hold contracts with Skills for Care or organisations and individuals who are either committee members or acting in any other capacity for Skills for Care regarding this proposal.

Do you have anything to declare?  Yes  No

If you select yes, you must provide details (name, organisation and capacity/declaration).

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| **Name** | **Organisation** | **Capacity/Declaration** |
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**Organisation declaration**

* We understand this tendering process is being undertaken subject to confirmation of funding from the Department of Health and Social Care, and NHS England and NHS Improvement.
* We confirm that all information provided in this application for funding is accurate.
* We confirm that the information provided in respect of declarations of interest above is accurate. We undertake to advise Skills for Care immediately should any interest come to our notice after the grant letter is issued.
* We confirm that we have read the appropriate Skills for Care information and guidance.
* We understand that Skills for Care will announce, using several channels (website, information hub for IEs and PAs, newsletters and social media), which ULOs have been awarded funding. This will include details of their partner organisations and type of training that is expected to be delivered during the project.
* We will maintain an effective communication channel with Skills for Care staff who are involved in this work, as requested.
* We will ensure that staff within our organisation and those that benefit from the training are aware that the funding is provided by Skills for Care.
* We confirm that we will deliver or commission learning, or training based the needs of IEs and PAs as outlined in this application.
* We confirm that we will maintain accurate records of training delivered and learning achieved and provide these to Skills for Care upon request.
* We will provide interim reports by the deadlines advertised and will participate in follow up group and performance review meetings.
* We will ensure training is delivered as agreed and provide the final evaluation report by 31 March 2023.
* We understand that Skills for Care may share good practice and learning from the funding of this project with the wider adult social care sector through the development of case studies.
* We will participate in any evaluation of the funding if requested by Skills for Care.
* We understand that we have a responsibility to maintain financial probity and a clear audit trail of funding spent.
* We are aware that this grant is awarded at the discretion of Skills for Care Ltd.
* We understand that this grant is recoverable to the extent that, if it is not used for the purposes for which it is given, Skills for Care Ltd reserves the right to reclaim part or all of the grant and the right is reserved to discontinue the grant before it is paid in full.

Tick this box to confirm that you are the individual named below, you are authorised to sign on behalf of the organisation and you understand our obligations under the Data Protection Act[[2]](#footnote-2).

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| **Name of authorised signatory:** |  |
| **Job title of authorised signatory:** |  |
| **Date:** |  |

For validation purposes this application form **MUST** be returned by the authorised person named above (i.e. the senior manager).

**END OF APPLICATION**

All applications (this form and full cost breakdown spreadsheet) must be sent by email to [**funding@skillsforcare.org.uk**](mailto:funding@skillsforcare.org.uk) by 12:00 on Monday 20 June 2022. We will send you a confirmation email shortly after we receive your application.

We will not accept any applications that are received after the deadline. Please allow enough time to submit your application as the final deadline is non-negotiable.

PDFs received by email and paper copies sent by post will not be accepted.

1. Subject to confirmation of funding. [↑](#footnote-ref-1)
2. Skills for Care’s [Privacy Policy](https://www.skillsforcare.org.uk/Privacy-and-legal/Privacy-policy.aspx). [↑](#footnote-ref-2)