The Baily Thomas Charitable Fund

GUIDELINES AND NOTES ON GRANT APPLICATIONS

(Please see separate Guidelines and Notes for Research Grants www.bailythomas.org.uk/grants/research-programme/research-grant/research-guidelines

1 THE FUND'S POLICY

1.1 The Baily Thomas Charitable Fund is a registered charity which was established primarily to aid the research into learning disability and to aid the care and relief of those affected by learning disability by making grants to voluntary organisations working in this field.

1.2 **Learning Disabilities** Learning disabilities (intellectual disabilities), with or without autism are our priorities for funding. We consider projects for children or adults. We do not give grants for research into or care of people with mental illness, dyslexia, dyspraxia, autism, nor ADHD, if they do not also have learning disabilities (intellectual disabilities).

1.3 The Fund's work is linked with The Rix-Thompson-Rothenberg Foundation therefore applicants cannot apply to both. If you receive a grant from either trust you are not eligible to reapply to the Fund until 2 years from receipt of the grant.

2 APPLICATIONS CONSIDERED FOR FUNDING

2.1 Funding is normally considered for capital and revenue costs and for both specific projects and for general running/core costs.

2.2 Grants are awarded for amounts from £250 and depend on a number of factors including the purpose, the total funding requirement and the potential sources of other funds including, in some cases, matching funding.

2.3 Normally one-off grants are awarded but exceptionally a new project may be funded over two or three years, subject to satisfactory reports of progress.

2.4 Grants should normally be taken up within one year of the issue of the grant offer letter which will include conditions relating to the release of the grant.

2.5 The following areas of work normally fall **within** the Fund's policy providing they benefit the learning disabled:

- Capital building/renovation/refurbishment works for residential, nursing and respite care, and schools;
- Employment schemes including woodwork, crafts, printing and horticulture;
- Play schemes and play therapy schemes;
- Day and social activities centres including building costs and running costs;
- Support for families, including respite schemes;
- Independent living schemes;
- Support in the community schemes;
- Snoezelen rooms.

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2.6 We do not normally fund:

- Hospices;
- Minibuses except those for residential and/or day care services for the learning disabled;
- Advocacy projects;
- Conductive Education projects;
- Arts and theatre projects;
- Swimming and hydro-therapy pools;
- Physical disabilities unless accompanied by significant learning disabilities.
- Grants for acquired brain injury will only be considered if the resulting learning disabilities occur early in the developmental period (i.e. birth, infancy or childhood), impacting on brain maturation and development and learning in childhood.

3 HOW TO APPLY

3.1 Applications should be made by completing the Fund's grant application form via the Fund's website. If you do not have access to the internet, please contact the Secretary to the Trustees.

3.2 Applications will only be considered from voluntary organisations which are registered charities or are associated with a registered charity.

3.3 Grants will **not** normally be awarded to **individuals**.

3.4 All applications to the Fund will be subject to independent review.

3.5 A copy of the applicant's **latest annual report and accounts** should be submitted with the application form and these can either be uploaded at the time of applying online or posted subsequently to the Secretary.

3.6 Do not send architectural drawings, plans or photographs. These are seldom necessary and will be asked for, if required.

3.7 Successful applicants will normally be asked to submit a written, brief grant monitoring report.

3.8 A second application from an organisation will **not** normally be considered for a **period of at least two years** after consideration of a previously successful grant, or **one year** from notification of an unsuccessful application.

3.9 Meetings of the Trustees are usually held in March, June and November each year, for details of application deadlines, please refer to the website.

The Baily Thomas Charitable Fund

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4 HEALTH AND SAFETY ISSUES

Persons making applications for a grant for the purpose of employing individuals with a learning disability in their own enterprises are required to complete and sign the attached questionnaire marked "A" concerning issues of health and safety at work. They agree in all respects to comply with their obligations under Health and Safety legislation for the time being in force whether or not covered by the questionnaire.

Persons who are making applications for the purposes of sponsoring or arranging the placement for employment of individuals with a learning disability at the establishment of a third party are required to take all necessary steps for securing the health, safety and welfare of the said individual to the same extent and in the same manner as an employer who is required to in relation to employees by or under the relevant legislation, including any associated approved codes of practice for the time being in force. Such a person should accordingly complete and sign the declaration at Section E9 of the application form.

5 DISCLAIMER

The Trustees of the Baily Thomas Charitable Fund specifically disclaim and accept no responsibility for any claim arising out of or incidental to the completion of projects by recipients of grants and it is a condition of any award that this is accepted.

CONTACT DETAILS FOR THE FUND and all subsequent correspondence should be sent to:

Mrs Ann Cooper
Secretary to the Trustees
The Baily Thomas Charitable Fund
c/o TMF Global Services (UK) Ltd
960 Capability Green
Luton
Beds LU1 3PE

The Baily Thomas Charitable Fund

GENERAL GRANT APPLICATION FORM

This application form is for your use to aid the preparation of your appeal in readiness for processing the application online via the Fund's website https://applications.bailythomas.org.uk/form1/ The Fund does not accept handwritten applications, if you do not have access to the internet please contact the Secretary to the Trustees.

Answers in excess of the number of words stipulated in section D will be edited.

Please note: this form is not to be used if you are applying for a research grant (please refer to the research guidelines on the Fund's website www.bailythomas.org.uk/grants/research-programme/research-grant/research-guidelines**).**

ORGANISATION DETAILS

A1 Name of Organisation _____

A2 Address

Town _____
County _____
Postcode _____
Country _____

A3 Telephone Number _____

A4 Fax Number, if applicable _____

A5 Email Address _____

A6 Organisation's Registered Charity Number _____
If your organisation is a School, PTA or exempt charity, please enter 123456 in this field

A7 Company Number, if applicable _____

A8 Website Address _____

The Baily Thomas Charitable Fund

CONTACT DETAILS

B1 Contact Full Name (Title/First/Last Name) _____

B2 Job Title/Office _____

The details supplied in the following question will be used for all correspondence. You will need to enter these details even if they are the same as those already entered in A2.

B3 Correspondence Address

Town _____

County _____

Postcode _____

Country _____

B4 Telephone number _____

B5 Fax number, if applicable _____

B6 Contact Email Address _____

An email acknowledgement and a copy of the application will be sent to this address

ORGANISATION FINANCIAL DETAILS

C1 Organisation background or additional financial information

*Please tell us any information relating to recent changes in your Organisation structure or use this space to provide any additional financial information with regard to the entries made below. You should use the most recent financial accounts when completing these questions and the information should correlate to the year end confirmed in **C2***

For the following questions if your Organisation is not a Registered Charity but the project is associated with a Registered Charity, you will need to enter the financial information of the associated Registered Charity

C2 Please enter the financial year/period end of your latest accounts _____

C3 Total Income/Receipts _____

C4 Total Expenditure/Payments _____

C5 Net Income or Net Receipts **(answer C5 or C6)** _____

C6 Net Expenditure or Net Payments _____

C7 Free Reserves/Unrestricted Funds _____

C8 Net assets _____

The Baily Thomas Charitable Fund

ORGANISATION FINANCIAL DETAILS cont'd

C9 Use of free reserves/unrestricted fund

The Trustees aim to ensure that the grants the Charity makes will make a difference. They do try and target their donations towards charities where the amount requested could not reasonably be afforded from the charity's own reserves or where there is insufficient income to cover the running costs that they are being asked to fund. Where an applicant has significant reserves the Trustees would request that the applicant state why the funding could not be paid out of these reserves. If you are seeking a grant in excess of 4 times your free reserves, please provide a statement on the use of your reserves.

PROJECT DETAILS

D1 Title of the project for which the funding is being requested

D2 Principal activities of the Organisation
(no more than 50 words)

These are usually defined in the Annual Report of your financial accounts

D3 Description of the project
(no more than 150 words)

The Baily Thomas Charitable Fund

PROJECT DETAILS cont'd…

D4 Aims and Objectives of the project
(no more than 80 words)

Please outline the aims of the project for which funding is being requested and the objectives that you hope to achieve for the learning disabled such as how they may be engaged, the opportunities that will be provided for them, what experiences they may have, any skills that may be acquired

D5 Have you read the Fund's Eligibility Criteria and definition of Learning Disabilities? *Please circle as applicable*

YES…./…..NO…

D6 Please confirm the number of individuals with **learning disabilities/intellectual disabilities** who will benefit from the project.

This can be shown as a number or %. Where this figure is 100% please further clarify the number that 100% represents.

D7 Please give a brief overview of the conditions and needs of the individuals who will benefit from the project.

We would be looking for you to demonstrate that the project fits the Fund's criteria. Please review the Eligibility guidance.

The Baily Thomas Charitable Fund

PROJECT DETAILS cont'd…

D8 Amount Requested £ .... p

D9 Please state the specific purpose for which the grant-aid is required
(no more than 30 words)

D10 Should a grant be awarded, please state the **exact** name of the Organisation in whose favour it should be drawn. It is extremely important that the **correct name** is stated.

*If you are **not** a registered charity but are completing this application as affiliated to a registered charity, the registered charity assume the responsibilities of the grantee and will be bound by the terms and conditions of any grant offered. Any grant payable can therefore only be paid to the registered charity and you must state in **D10**, their charity name.*

PROJECT COSTINGS – EXPENDITURE & INCOME

E1 What is the total cost of the project? £ .....

E2 Detail how the figure in **E1** is arrived at.
*If you have any supporting paperwork or a detailed breakdown relating to your comments in **E2,** you can upload a file to our website during the online application process*

E3 How much money, if any, have you already raised for this project?
If you have not raised any money please input '**0**' in the box.
£ .....

E4 From what source(s) has this income been obtained?
If you have entered zero in E3, please detail fundraising efforts. The Trustees will wish to see that you are actively fundraising from other sources.

The Baily Thomas Charitable Fund

PROJECT COSTINGS – EXPENDITURE & INCOME cont'd…

E5 Is the project receiving financial support from the statutory services? If **Yes**, give details. If **No**, have you established whether or not it is eligible for such support?

E6 Are you applying for a grant for the purpose of employing individual(s) with a learning disability in your own enterprise?

Please circle YES / NO

E7 If you have answered **Yes** to **E6**, have you downloaded and completed the Health & Safety declaration located on our website within the How To Apply heading and then General Applications Guidelines.

Please circle YES / NA

E8 Are you applying for a grant for the purposes of sponsoring or arranging the placement for employment of individuals with a learning disability at the establishment of a third party?

Please circle YES / NO

E9 If you have answered Yes to E8, do you agree to the following statement?

I acknowledge in connection with the Application for a grant from the Baily Thomas Charitable Fund for the purpose of placing an individual or individuals with a learning disability(s) that it is our responsibility to take all necessary steps for securing the health, safety and welfare of all such individuals to the same extent and in the same manner as an employer is required to do in relation to employees by or under the relevant legislation, including any associated approved codes of practice for the time being in force.

Please circle and sign below if applicable YES / NO / NA

Signed _____

The Baily Thomas Charitable Fund

REFEREE DETAILS

All referees must be independent and familiar with the applicant or project, but not directly associated with the organisation (i.e. not currently sitting on the Board of Trustees).

F1	Have you contacted your referees?	Y/N

An application cannot be heard until written references have been received. Please contact your referees and ask that they submit their reference within 14 days from your initial contact. Please view the help available within the website for full instructions and an example template http://www.bailythomas.org.uk/documents for your use. The onus is on the person completing the application to contact the referees.

	REFEREE ONE	**REFEREE TWO**
F2/F8	Full Name (Title/First Name /Last Name)	Full Name (Title/First Name /Last Name)
F3/F9	Job Title Position	Job Title Position
F4/F10	Contact Organisation	Contact Organisation
F5/F11	Address Town County Postcode Country	Address
F6/F12	Telephone Number	Telephone Number
F7/F13	Email Address	Email Address

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DOCUMENTATION

G1 With reference to Section C

Please provide a copy of your latest annual report and accounts. Should a more up-to-date set be available before the next scheduled Baily Thomas Charitable Fund Trustees' meeting, please forward a copy to the Secretary to the Trustees.

Enclosed: YES / NO

G2 With reference to Section E2

It is not usually required but if you have a schedule detailing your costings, this can be submitted.

Enclosed: YES / NO

G3 With reference to Section E6

If you have answered **Yes** to this question please attach a completed Health & Safety Questionnaire (your application will not be considered without it).

Enclosed: YES / NO / NA

G4 Any other documents (not photos) Enclosed: YES / NO / NA

G5 Please submit your Safeguarding policy document(s). Enclosed: YES / NO

The Baily Thomas Charitable Fund

Registered Charity No 262334 **A**

Questionnaire to be completed by persons applying for grants for the purpose of employing individuals with a learning disability

Health and Safety at Work Etc. ACT 1974

Please tick only one box for each question. For any questions where a tick is placed in the "No" box, please provide below the reason why you consider the question to be inapplicable to the circumstances pertaining at the particular place of work, and what, if any, alternative measures are in place to ensure proper regard is given to the Health and Safety of employees and those visiting the place of work.

	Yes	No
Have you prepared a written statement of your general policy with respect to Health and Safety at work?	☐	☐
Has this policy statement (and any revisions) been brought to the attention of all your employees?	☐	☐
Have you identified the health and safety hazards and assessed the risks to health and safety?	☐	☐
Have you recorded the significant findings of the risk assessment?	☐	☐
Have your employees been given a full and detailed safety induction course, e.g. what to do in case of fire?	☐	☐
Have you appointed one or more health and safety assistants from your organisation (or from outside) who are trained or knowledgeable about health and safety issues?	☐	☐

Name(s) of current appointed health and safety assistant(s)

(i)…… (ii)……..

Have you appointed one or more health and safety representatives?	☐	☐

Name of current representative(s)

(i)…… (ii)……

The Baily Thomas Charitable Fund

Registered Charity No 262334 **A**

Questionnaire to be completed by persons applying for grants for the purpose of employing individuals with a learning disability

Health and Safety at Work Etc. ACT 1974

	Yes	No
Is there an Accident Book available in the place of work?		
Are you aware of the need to make reports to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)?		
Do you have at least one appointed person available at all times who has basic knowledge of first aid?		

Name of current appointed person(s)

(i)……. (ii)…….

Do you provide suitable Personal Protective Equipment to your employees free of charge?		
Do you display "No Smoking" signs in appropriate places?		
Do you display a FIRE Notice with instructions in case of fire?		
Do you have Employers Liability Insurance?		

Name of Insurance Company……

Date of expiry of current insurance policy……

Explanation below for any "No's and/or for a description of any additional health and safety measures which may be in place.

Charitable Organisation (per A1 of grant application):……

Signed: ……. Date:……/……/……