

Neighbourhood Health The Health Improvement Fund – Application Form

Reference Number

To be filled in by ACHSCP staff

CLOSING – Friday 4th July (12 noon), applications after this time will not be considered

This is shared as a PDF to support you in viewing the questions in advance of completing the online application form.

For guidance on completing this application form please refer to “Guidance for applicants” available:

- Online – [please click here](#)

If you require additional application support:

- Email - HealthImprovement@aberdeencity.gov.uk
- Phone - 01224 045 735 - Chris Smillie (Public Health Co-ordinator) or 01224 069 421 - Suzi Thomson (Health Improvement Officer)

You can submit your application by:

- Email this word document to HealthImprovement@aberdeencity.gov.uk
- OR you can complete the online application by [clicking here](#)

Please ensure all questions are answered (1-21), failure to do so will mean your application will not be considered.

CONTACT DETAILS

Please give one main contact for your project. The main contact should be someone who can talk in detail about your project.

Organisation Name:

Contact Name:

Job/Volunteer Title (if applicable):

Postal Address:

Email Address:



Aberdeen City Health & Social Care Partnership
A caring partnership

Telephone Number:

Alternative contact (name/email):

ELIGIBILITY QUESTIONS

Prior to completing your application, please read the guidance document to ensure your project meets the Health Improvement Fund principles.

Q1. Projects must link with the public health and wellbeing related commitments of the Aberdeen City Health and Social Care Partnership. Which of the following does your project support? (Please select all that apply, your project must support at least one)

- ☐ Improve physical and mental health
- ☐ Support vulnerable groups and community resilience
- ☐ Reduce health risks
- ☐ None of the above

Q2. Which best describes the organisation you are applying on the behalf of?

- ☐ Voluntary or Community Organisation
- ☐ Registered Charity
- ☐ Constituted Group or Club
- ☐ Community Interest Groups (CIG)
- ☐ Social Enterprise
- ☐ Statutory Body e.g. NHS, Aberdeen City Council (including community councils)
- ☐ School
- ☐ Housing Association
- ☐ Individual aligned to an organisation or part of a constituted body
- ☐ Any other not for profit health and care providers
- ☐ Other

Q3. Please select the category which best describes your organisation (please only select one)

Further information to help you select the most suitable category can be found in the guidance notes - [click here](#)

- ☐ Small, volunteer-led community group with no paid staff (run entirely by volunteers)
- ☐ A small to medium-sized local organisation with limited staff and resources (small number of paid staff, primarily part-time)
- ☐ A larger local organisation with established infrastructure (multiple paid staff and dedicated infrastructure)
- ☐ A regional or national organisation operating in Aberdeen City (Operate across multiple areas or nationally, but deliver services in Aberdeen)

Q4. In no more than 2 sentences, please briefly describe your project.

For example, "A peer support group for Dads", "Building a sensory garden in the local park".



YOUR PROJECT

This is the section where you can tell us more information about the project.

Q5. Project/Idea name.

Q6. Which Locality area will your project support residents from?

☐ Citywide

☐ North: Dyce, Danestone, Oldmachar, Balgownie & Donmouth, Denmore, Bucksburn, Heathryfold, Middlefield, Kingswells, Northfield, Cummings Park, Sheddocksley, Mastrick, Summerhill

☐ Central: Tillydrone, Old Aberdeen, Seaton, Woodside, Hilton, Stockethill, Ashgrove, George Street, Froghall, Powis & Sunnybank, Midstocket, Rosemount, City Centre, Hanover, West End.

☐ South Culter, Cults, Bieldside & Milltimber, Hazlehead, Braeside, Mannofield, Broomhill & Seafield, Garthdee, Ferryhill, Kincorth, Leggart & Nigg, Torry, Cove.

In which geographical area will your project take place? (Specifically in which neighbourhood. For example, Northfield, Hilton, Kincorth).

Q7. Project Details.

Please provide an overview of the proposed project and how this will be implemented.

Q8. Project Need.

Please briefly explain how you know this project is needed and explain if you have carried out a survey or any scoping work in relation to your target group

Q9. Who are the main target group for your proposed project?

Please be as specific as possible, it may be beneficial to consider the protected characteristics - <https://www.equalityhumanrights.com/equality/equality-act-2010/protected-characteristics> .

Project Objectives

Q10. Please describe how your project demonstrates **at least one** of the following objectives

A. **Improve physical and mental health**- We want to help people in our community live healthier, happier lives.

B. **Support vulnerable groups and community resilience**- Sustained ability of a community to use the available resources to respond to, withstand and recover from adverse situation.

C. **Reduce health risks**- We want to help people make healthier choices and reduce harm.

D. **Collaborative decision making** - Exploring ideas and making plans with those affected by an issue (e.g. how your target audience have been involved in the creation of this project).

Project Benefits

Q11. How many people will benefit from this project?

Please provide an approximate figure.

Q12. What impact do you hope your project will have on the communities health?.

What benefits do you expect to see as a result of this project? (e.g. increased physical activity, improved mental health)

Q13. How will you measure the success of your project?

What evaluation will you undertake to know these benefits have occurred? (e.g. focus groups, surveys, word of mouth)

Project Resources

Q14. Partnership Working.

Partnership working is highly recommended, who else will you be working with and what will their role be? (e.g. names of other organisations, community groups or third sector support).

Q15. Volunteering.

Please let us know approximately how many volunteers will be involved in supporting your project.

Project Timelines

It is estimated that the outcome of applications will be confirmed around the 18th August. Projects must commence within 3 months of this date and funding utilised within 12 months.

Q16. Start date and duration of project.

When do you expect the project to begin?

When do you expect the project to end?

PROJECT COSTS

Q17. What is the total cost of your project?

Q18. How much are you bidding for from the Health Improvement Fund(up to £5,000)?

Q19. If the total cost exceeds the amount requested, how will the remaining costs be covered?
(e.g other grants, in-kind support, fundraising)

Q20. What will you spend your funding on? Please give a breakdown of the cost of your project. Please be as specific and detailed as possible. For example, if you are requesting money for gardening equipment - 2 planters = £x, 2 shovels = £x.

Additional rows can be added if required.

Item	Cost	Details
	Total cost	

Q21. How do you plan to continue the work when the funding stops?

ADDITIONAL INFORMATION

Just some final information. Your answer to these questions will not affect the outcome of your application.

Q22. If your bid to the Health Improvement Fund is unsuccessful, do you give us permission to pass this application on to other funds which may be better suited e.g. Community Mental Health and Wellbeing Fund (ACVO).

☐ Yes

☐ No

Q23. Is your organisation or project listed on A Local Information Service for Scotland (ALISS)?

You can find out more information about ALISS via the website - (<https://www.aliss.org/>)

☐ Yes

☐ No

Q24. Please tell us how you heard about the Health Improvement Fund i.e., website, social media, support worker etc.

--

PRIVACY STATEMENT

By submitting this form you are agreeing to the terms and conditions listed on the Health Improvement Fund Website (<https://www.aberdeencityhscp.scot/our-innovations/the-health-improvement-fund/>). Any personal information will be held securely and processed in line with data protection legislation. Further information on how your personal information is processed and how consent can be withdrawn can be found on the HIF website.

This document is also available in large print and other formats and languages, upon request. Please call NHS Grampian Corporate Communications on (01224) 551116 or (01224) 552245