

The City Bridge Trust

Investing In Londoners: Application for a grant



About your organisation

Name of your organisation: Redbridge Citizens Advice Bureau	
If your organisation is part of a larger organisation, what is its name? National Association of Citizens Advice	
In which London Borough is your organisation based? Redbridge	
Contact person: Mr Mark Kirk	Position: CEO
Website: http://https://www.citizensadvice.org.uk/local/redbridge/	
Legal status of organisation: Registered Charity	Charity, Charitable Incorporated Company or company number: 1091547
When was your organisation established? 09/04/1939	

Grant Request

Under which of City Bridge Trust's programmes are you applying? Reducing Poverty
Which of the programme outcome(s) does your application aim to achieve? More Londoners with Improved economic circumstances More people accessing debt and legal services
Please describe the purpose of your funding request in one sentence. To assist clients and GPs by taking referrals from GPs for those of their patients whose underlying problems might be addressed with our advice.
When will the funding be required? 01/01/2018
How much funding are you requesting? Year 1: £52,431 Year 2: £52,689 Year 3: £55,593 Total: £160,713

Aims of your organisation:

We provide free, confidential and impartial advice and campaign on big issues affecting people's lives.

Our goal is to help everyone find a way forward, whatever problem they face.

The Charity's objects are to promote any charitable purpose for the public benefit by the advancement of education, the protection and preservation of health and the relief of poverty, sickness and distress in particular, but without limitation, for the benefit of the community in Redbridge and surrounding areas.

Main activities of your organisation:

CAR provides advice to Redbridge residents, especially those who lack knowledge about their rights and responsibilities. We provide access to services to effect positive change in their lives. In 16/17, CAR helped 3231 clients, of whom 1310 received detailed advice; for those who gained financially, we noted outcomes of £2.65m, despite far from complete recording.

Our 45 volunteers reflect the diversity of our community and provide the bulk of our administration and advice, supported by supervisors. We actively recruit, train and support our valued volunteers on a continual basis increasing their confidence and employability. CAR projects include: welfare benefits, debt, employment advice and outreach projects for cancer patients and for social housing residents.

CAR leads Redbridge Advice Network to improve access to advice services for the community. It comprises over 30 agencies with six on the steering group, and encourages interworking by providing training and seminars on emerging advice needs.

Number of staff

Full-time:	Part-time:	Management committee members:	Active volunteers:
2	8	7	45

Property occupied by your organisation

Is the main property owned, leased or rented by your organisation?	If leased/rented, how long is the outstanding agreement?
Leased	2 years

Summary of grant request

NEED

Redbridge people need advice: none of CAR, our partner advice agencies, councillors or MPs can come close to meeting the demand for our help. It is well documented that levels of indebtedness and anxiety are continuing to rise.

GPs are short of time: nationally, they spend 19% (and rising) of their consultation time on non-health matters. Developing social prescribing will help to address that and to ensure more appropriate interventions for patients.

HOW DELIVERED

Our delivery model has GPs sending a patient's name and phone number to CAR.

We contact the client and arrange a productive consultation in a familiar surgery setting with a volunteer backed by experts.

Our project officer will focus on developing and managing relationships with GPs, as well as overseeing the operations. They will be supported by a volunteer coordinator and an advice supervisor.

We are ready to start, having initial GP practices, a project board and project roles mapped out, a plan, communications strategy, governance standards and a risk management plan.

PROJECT AIMS

We will enable GPs to add social prescribing to their portfolio of patient support tools. CAR will assist patients/clients, often with debt and welfare issues for which we can readily measure the benefits, which are very significant for the individual and the local community. We will help many with housing problems, often avoiding homelessness, and with employment difficulties. This assistance will reduce anxiety and have consequent health benefits. Those will, in turn, reduce individuals' reliance on their GPs, reducing appointments and prescriptions. Such social prescribing by GPs will be a more appropriate disposal for their patients and will enable GPs to use their time more productively.

WHY CAR

We have researched similar programmes elsewhere in England, and have gained invaluable experience through our own small pilot project.

CAR has a long and successful history of advice and outreach work, and of managing projects on behalf of funders. In 16/17, we helped 3231 clients, 1310 receiving detailed advice and accruing very significant benefits.

We have recently overhauled our operation to become more client-focussed, effective and efficient.

The project delivers the Trust's outcomes of Improving many Londoners' economic circumstances, enabling many to access debt and legal services.

TRUST PROGRAMME OUTCOMES

CAR will help many to reschedule debts and/or gain benefits they are entitled to. Clients will manage their money better with our assistance.

Others will be helped directly with housing problems and employment problems.

We will refer some to our local law firm partners for free initial advice on employment or family law issues, and to other partners who can give free specialist advice.

CAR satisfies the Trust's PRINCIPLES OF GOOD PRACTICE.

Service users are randomly surveyed for feedback, and will be for this specific project. We will convene focus groups of clients to identify problems and improvements to the methodology. Some clients become volunteers. And, of course, GP practices will be central to the management and development of the project, both formally and informally.

Our volunteers, staff and client profiles attest to our inclusiveness and openness to all, and accurately reflect the Redbridge population, one of the most diverse in London. Volunteers are at the heart of our operation. There is an induction programme and training programmes tailored to each role. Each volunteer has a mentor, and specialist support is always available when they are seeing clients. We have volunteer meetings, newsletters, and daily briefings and volunteers' work is reviewed with detailed feedback.

We are reducing our carbon footprint by moving our paper systems to electronic, installing a new printer to reduce waste, and a new smart meter for our electricity usage.

If you need any planning or other statutory consents for the project to proceed, what stage have the applications reached?

Do you have a Vulnerable Adults policy? **Yes**

What Quality Marks does your organisation currently hold?

Advice Quality Standard with Casework Accreditation

Outputs and outcomes

What are the main activities or outputs you want to deliver? Please include no more than 5. By activities or outputs we mean the services, products or facilities you plan to deliver. If you plan to deliver work over more than one year you should include activities over the full grant period requested. Try to be specific.

Train 27 volunteers over the grant period to give general advice in a surgery setting to clients referred by GPs, and to provide a daily referral service to participating GPs, following up with every client within 24 hours.

Engage 16 GP practices in active participation in our social prescribing referral scheme, 5 of which will host our appointments with clients.

Schedule 24 appointments per week (1200 per year), with specialist followups for those who need it that are underwritten by other funding arrangements.

Measure benefits to all involved, especially those to GPs and the wider health community which are not well documented elsewhere.

Communicate effectively with clients, GPs, volunteers and other stakeholders to discern improvements to the project and the model, and with potential funders and supporters with a view to the long term continuation of the service.

What main differences or outcomes do you hope the activities you have described above will achieve? Please include no more than 5. By differences or outcomes we mean the changes, benefits, learning or other effects that result from the work your project would deliver. These might be for individuals, families, communities or the environment.

The wellbeing of 1000 clients per year will be improved, and their anxiety and dependence on NHS services reduced (this allows for some missed appointments).

The economic circumstances of many of those clients will be improved: recent experience suggests direct financial benefits to over 30% of clients, housing advice including avoidance of homelessness to 20%, debt support including rescheduling to 12% and employment issues to 9%.

GPs and their staff will save time in consultations with 1000 patients per year, and have fewer followup appointments with them.

10 volunteers will gain paid employment through having had the training and experience provided by the project.

The local health community will be very well aware of the soft and hard benefits and cost benefits of this service, and factor it into their long-term planning.

Do you plan to continue the activity beyond the period for which you are requesting funding? If so, how do you intend to sustain it? If not, what is your exit strategy?

Yes. We expect to attract recurrent funding from the CCG in future, as happens elsewhere. That is presently unrealistic without further proof of concept and while their finances are under such pressure.

We will ensure that benefits are quantified and obvious, and made very clear to the CCG through our communications strategy.

Who will benefit?

About your beneficiaries

How many people will benefit directly from the grant per year?

1,040

In which Greater London borough(s) or areas of London will your beneficiaries live?

Redbridge (100%)

What age group(s) will benefit?

16-24

25-44

45-64

65-74

75 and over

What gender will beneficiaries be?

All

What will the ethnic grouping(s) of the beneficiaries be?

A range of ethnic groups

If Other ethnic group, please give details:

What proportion of the beneficiaries will be disabled people?

21-30%

Funding required for the project

What is the total cost of the proposed activity/project?

Expenditure heading	Year 1	Year 2	Year 3	Total
Staff costs (1fte)	32,645	33,298	33,963	99,906
External Quality Assurance checking	2,000	2,040	2,081	6,121
Project costs: recruitment,travel expenses,training,materials etc	6,300	5,814	5,930	18,044
Office equipment	1,000	1,000	0	2,000
External evaluation	0	0	2,500	2,500
CAR overheads (20%)	10,486	10,538	11,119	32,143
	0	0	0	0
	0	0	0	0
	0	0	0	0
TOTAL:	52,431	52,690	55,593	160,714

What income has already been raised?

Source	Year 1	Year 2	Year 3	Total
none	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
TOTAL:	0	0	0	0

What other funders are currently considering the proposal?

Source	Year 1	Year 2	Year 3	Total
none	0	0	0	0
	0	0	0	0
	0	0	0	0
	0	0	0	0
TOTAL:	0	0	0	0

How much is requested from the Trust?

Expenditure heading	Year 1	Year 2	Year 3	Total
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Finance details

Please complete using your most recent audited or independently examined accounts.

Financial year ended:	Month: March	Year: 2016
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Income received from:	£
Voluntary Income	140,018
Activities for generating funds	0
Investment income	62
Income from charitable activities	259,063
Other sources	287
Total Income:	399,430

Expenditure:	£
Charitable activities	388,311
Governance costs	4,895
Cost of generating funds	5,556
Other	0
Total Expenditure:	398,762
Net (deficit)/surplus:	668
Other Recognised Gains/(Losses):	0
Net Movement In Funds:	668

Asset position at year end	£
Fixed assets	2
Investments	0
Net current assets	109,865
Long-term liabilities	0
*Total Assets (A):	109,867

Reserves at year end	£
Restricted funds	4,872
Endowment Funds	0
Unrestricted funds	104,995
*Total Reserves (B):	109,867

*** Please note that total Assets (A) and Total Reserves (B) should be the same.**

Statutory funding

For your most recent financial year, what % of your income was from statutory sources? 91-100%

Organisational changes

Describe any significant changes to your structure, financial position or core activities since the date of your most recent accounts:
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The planned £42,596 16/17 deficit enabled us to radically change our operational model without reducing service, and to effect a successful CEO changeover.

The planned £42,225 17/18 deficit will smoothe a funding shortfall while maintaining

Previous funding received

Please list the funding received by your organisation from the following statutory sources during the last THREE years.

	Year 3 £	Year 2 £	Most recent £
City of London (except City Bridge Trust)	0	0	0
London Local Authorities	124,178	192,329	171,365
London Councils	0	0	0
Health Authorities	26,000	37,423	37,423
Central Government departments	0	0	0
Other statutory bodies	156,568	158,540	118,070

Previous grants received

Please list the grants received by your organisation from charitable trusts and foundations (other than City Bridge Trust) during the last THREE years. List source, years and annual amounts. Please include the 5 largest only.

Name of Funder	Year 3 £	Year 2 £	Most recent £
Big Lottery (ASTF programme)	156,568	92,323	0
Big Lottery (Reaching Communities)	0	66,317	80,070
Trust for London	0	0	38,000
Santander	4,510	0	0
	0	0	0

Declaration

I confirm that, to the best of my knowledge, all the information I have provided in this application form is correct. I fully understand that City Bridge Trust has zero tolerance towards fraud and will seek to prosecute and recover funds in every instance.

Please confirm: Yes Full Name: **Mark Kirk**

Role within **CEO**
Organisation: