



INVERCLYDE COMMUNITIES' MENTAL HEALTH AND WELLBEING FUND FOR ADULTS

**Guidance for Multi-
Annual Applications
2025**



Scottish Government
Riaghaltas na h-Alba
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Guidance for Applicants – Grant Application Form – 2025

General information

How do I apply?

All information on the application process is available on the CVS Inverclyde (CVSI) website www.cvsinverclyde.org.uk including downloadable application forms and programme guidance. In the event of any difficulty in accessing these forms please contact the Funding Team at funding@cvsinverclyde.org.uk or call us on **01475 711733**.

Which application form should I use?

Please check that you are using the correct form for your funding needs.

- There are two application forms: one for annual grants and one for multi annual grants.
- There are two budget templates: one for annual grants and one for multi annual grants.

Eligibility Criteria

Prior to completing an application form, please ensure that your organisation/group meets the eligibility criteria as set out in the Inverclyde Communities Mental Health and Wellbeing Funding Guidelines which are available at www.cvsinverclyde.org.uk.

Project Duration

Multi annual project for 25/26 must start before the 31st of March 2026 and must finish and incur all expenditure by 31st January 2028. Do not apply for funding if you cannot start activity by 31st March 2026.

Preparation

Before drafting your application ensure that you read:

- Inverclyde Communities Mental Health and Wellbeing for Adults Funding Guidelines
- Inverclyde Communities Mental Health and Wellbeing for Adults FAQ's
- Inverclyde Communities Mental Health and Wellbeing for Adults Guidance for Applicants for (either annual or multi annual)
- The grant application form (either annual or multi-annual)
- Budget template (either annual or multi-annual)

Please ensure you start working on the application in sufficient time for you to complete it before the deadline. Applications received after the stated deadline will not be assessed.

Supporting Documentation

In addition to completion and submission of a signed grant application form the following documentation **MUST** be submitted by the published deadline:

- A copy of your latest annual accounts. New organisations can submit a forecast of income and expenditure for their first year of operation instead of annual accounts.

- A copy of your organisation's governing document such as constitution, or articles of association.

Do not submit any other documents with your application other than those listed above.

General tips

1. Read the application questions in full before completing your answer.
2. Do not exceed the word limit as any additional words may not be read and content will not be appraised.
3. If you have any questions that are not answered by the guidance or FAQs, please email funding@cvsinverclyde.org.uk at the earliest opportunity. Please note that we may be unable to respond in time if you leave it close to the deadline.
4. Ensure that your project fits with the overarching aims of the funding programme which are to support **community-based initiatives** that promote and develop good mental health and wellbeing; and/or mitigate and protect against the impact of distress and mental ill health.
5. The **outcomes** we expect to achieve through the funding include:
 - People are better able to look after and improve their own mental health and wellbeing.
 - Community based services are centred on helping to maintain and improve the quality of life of people using them.
 - Reduction in social isolation faced by at risk groups through promoting good connections.
 - People who provide unpaid care are supported to look after their own mental health and wellbeing.
6. Where possible, ask someone within your organisation to read the application before submitting it.
7. Ensure that an authorised signatory is available to sign your application form in time for it to be submitted. Electronic signatures are acceptable. The person signing must have authority to sign documents on behalf of your organisation.
8. Submit all additional documents requested as part of the application process.

Additional Guidance for Multi Annual Applications

Multi annual funding will be awarded with the following caveat: the value of the grant award for year two is an indicative confirmation and is not guaranteed. All indicative funding commitments are subject to the outcome of any spending review by the Scottish

Government and approval of the annual Budget Bills by the Scottish Parliament during this period.

Only the strongest applications will be awarded multi-annual funding. Applicants who apply for multi annual funding and are unsuccessful will be moved into the annual funding category therefore may still be awarded a grant depending on the score awarded by the appraisal panel.

Guidance on completing the application form

Please carefully read this guide which provides information on the detail expected of applicants for each question. If you have any queries or aren't sure, then please contact the Funding Team at funding@cvsinverclyde.org.uk or call us on **01475 711733**.

Section 1 - Contact Details

Please provide the contact details of someone within your organisation/group who can answer any questions regarding the application. We are most likely to contact them via email so please provide an email address which will be checked regularly.

If you do not have a website, please include a link to your organisation's social media page or leave it blank.

Section 2 - Organisation Details

2. A Please provide the official name of your organisation as per the constitution or governing document.

2. B Select the relevant box to confirm organisation type. If none of the options apply, please use the 'other' box to provide details.

2.C Please select the statement which best describes where your organisation currently delivers services.

2.D Please tell us whether your organisation received a grant from Inverclyde Communities Mental Health and Wellbeing Fund for the year 24/25.

2.E Only answer this question if you answered "yes" to question 2D. If you wish to apply for funding to continue the project funded in 2024/25 please select the first box. If this application is for a different purpose, please select the second box.

2.F Please provide details from your latest annual accounts. In the first column detail the accounting period for which these accounts relate. In the second column detail the total annual income as shown in your most recent accounts from all sources. Please remember to attach your accounts with your application form. Go to 2.G if you do not have financial accounts.

2.G If you are a new organisation, please detail the start date of your organisation and financial year end. Please provide your estimated total income for your first financial year in the second column. You must attach an estimated income and expenditure profile for

your first year of operation. If you need help with this, please email us at funding@cvsinverclyde.org.uk no later than the 14th October 2025.

2.H In the event that your application for multi annual funding is rejected, please confirm whether you would like your application to be assessed for one year funding instead. Please state yes or no.

2. I Please provide a brief description of your organisation's main activities and services in no more than 300 words. We want to understand the who, what and why of what you do.

Section 3 - Grant Activities

3.A Please insert a title for your project. This may be used in marketing and communications so make sure it is suitable, and where possible do not duplicate the name of another local service or initiative.

3.B Please indicate the timescale of your project including specific start and end dates. Please note that your project **MUST** commence by 31st March 2026 and complete, incurring all expenditure by 31 January 2028.

Section 4 –Project Description

Provide a brief description of your project to include key aims, activities and how these will contribute to improving health and wellbeing **(100 words)**.

Section 5 – Project Need

5.A We want to understand how you know that the proposed activity/project/service is needed within your community **(500 words)**.

When writing your answer consider the following:

- Describe the health and wellbeing need that you have identified in your community.
- Describe the health and wellbeing needs of groups 'at risk' groups'.
- Tell us about identified gaps in local community provision and how you know these exist.
- Tell us about any consultation or co-production activities you have undertaken with your beneficiaries (people who could benefit from your project) and how this has informed your thinking.
- You may also want to identify need through showing how your project activities meet needs identified within local strategies, reports, or consultation. This is not essential.
- Tell us about any geographical challenges faced in the local area that you plan to deliver in, this could be because of rurality, socio economic considerations, accessibility issues etc.

5.B Continuation Projects Only. We want to know what you have learned from your 2024/25 project and how this will inform and improve a further year of delivery **(350 words)**.

5.C Continuation Projects Only. Please provide a brief case study demonstrating the impact that the 2024/25 project has had on an individual in your community. This case study must reflect activity supported by the ICMHWF **(250 words)**.

5. D Please confirm why multi annual funding is necessary to deliver activity using no more than **150 words**, explaining the difference that this will make to activity. Think about how a longer duration impacts on intended outcomes.

Section 6– Your Project

Please provide a description of project activities **(500 words)**. When writing your answer consider the following:

- Clearly describe the project activities you are asking for funding to support. Please only detail activities that the grant will directly support, **not** your wider organisational activities.
- Be specific about how you will deliver the project; group sessions, and/or one to one support, the frequency, and duration of support; involvement of volunteers etc. If this work includes therapeutic interventions provide more detail on clinical supervision or related governance requirements.
- Detail the areas across Inverclyde where project activities will be delivered.
- Describe the people who will benefit from these activities, the challenges they face and how the activity proposed will help them. Remember that direct beneficiaries must be at **least 16 years of age**.
- We like to see partnership and collaborative approaches as we know these can achieve better outcomes for beneficiaries, so detail any organisation you will work alongside and tell us what they will do.
- Demonstrate how this project is additional to your existing activities/services.
Examples include:
 - increased delivery – such as additional numbers of people benefitting, additional hours of delivery, or additional elements of delivery which enhance provision.
 - support to reduce barriers to participation for groups ‘at risk’.
 - testing, piloting or delivering new activities.

Section 7 – Fit with Inverclyde Community Mental Health and Wellbeing Fund

Tell us how your project fits the purpose of the fund **(500 words)**. Consider the following when preparing your answer:

- Refer to the overarching aims of the Fund and demonstrate how activity contributes to these, telling us about the intended impact of your project in terms of the mental health and wellbeing of people living in Inverclyde.
- Refer to the priorities for year 5 and 6 of the Fund and tell us how activity contributes towards these.
- Demonstrate how the project is additional to current services.
- If this is a continuation project refer to prior activity

Section 8 – Beneficiary and Volunteer Numbers

8.A Please provide an estimate of the number of people you expect to support over the lifetime of the project and break this down by project year. This should be the unique number of people. Therefore, if your project runs for 24 months and the same person attends a group session once every month, only count them once, NOT every time they participate i.e.: They would attend 24 times but account for 1 person in your estimate of people supported. The number given included MUST relate only to those people being supported by this funding NOT the number of people that your overall organisation supports.

8.B If your project will involve volunteers in delivery, please give the estimated number of volunteers involved over the duration of the project and break this down for each project year. As per the guidance for 8.A. only record individuals once. If your project does not involve volunteers, please enter 0 in the box.

8.C Please provide an estimate of the number of activities that will be delivered over the duration of your project. The definition of an activity is the number of instances of support that take place. For example a project delivering monthly nature walks would record each walk as an activity so would estimate 12 activities in the year. If a project is working with individuals on a one to one basis the number of activities is the number of times the project is expected to interact with that individual. For example a project may offer one to one support with wellbeing, in this instance the number of activities would be the number of times the individual will meet with a member of staff. We understand that this may be difficult to estimate however please try to be as accurate as possible as this information will be used in project monitoring.

Section 9 – Project Type

9.A Please select one of the options given which best describes the proposed project. Where your project type is not listed please select other and provide details.

9.B Please select which of the priority activity will be addressed through your project. Please tick all that apply. Where you have identified an additional priority please select other and describe in no more than 10 words.

Section 10 – Project Outcomes

10.A Provide 2 outcomes that you expect to achieve with a ICMHWF grant. Outcomes are the changes that occur which can be attributed to your project activity. Outcomes must include WHO the change is for (eg. Carers), WHAT is changing (e.g their quality of life) and HOW (eg. Improving). Examples of the types of outcomes that can be measured include:

- Improvements in health or quality of life
- Attainment of intervention goals
- Service user life satisfaction

For example:

- Reducing the loneliness and social isolation faced by 12 women over the age of 70 through facilitating a weekly arts and craft group
- Increasing the emotional resilience of 30 young adults from the Lesbian, Gay, Bisexual and Transgender and Intersex (LGBTI) communities
- Reducing the distress faced by 25 people at risk of self-harm through helping them to better manage their stress by using coping techniques, enabling them to better identify and manage the triggers which cause them to self-harm.

10.B Tell us how you will monitor activity and measure progress towards the outcomes described at 10.A (**300 words**). A variety of tools can be used which must measure/quantify the changes achieved by project activity and involve an initial assessment to understand the starting point from which progress is to be measured. The outcomes described must be measurable within the timescale of the project and may include use of tools such as.

- Formal evaluation tools such as The Recovery Star which measures progress towards key outcomes.
- Questionnaires such as the generalised anxiety disorder (GAD-7) or The Warwick-Edinburgh Mental Wellbeing Scale.
- Beneficiary evaluation forms or interviews with staff, detailing the outcomes that participants achieve relating to mental health and wellbeing resulting from their involvement in the project. Simple questions or statements, with rating scales, are a good way of assessing levels of improvement. For example, asking a participant on a scale of 1 – 5 of how hopeful they feel about their future, at the start, middle and end of their time on the project.

- Internal or external evaluations.

Section 11 – Target Groups

11.A Please select the option that best describes your project approach – general population (means not targeted at specific groups of the population); targeted refers to projects which are open to all but have a focus on particular group); restricted refers to projects which are aimed directly at specific group(s).

11.B Targeted and Restricted Projects Only. Please indicate up to 3 groups your project will support

11.C All Projects. Please select one or more of the family groups listed.

Section 12 – Reducing Inequality

Please confirm which of the statements provided apply to your project.

Based on the statements selected please explain how project activity will contribute to each. Do not select a statement if you cannot explain how the project will achieve this. **(300 words)**.

Section 13 – Geographical Targeting

We want to understand whether your organisation or group intends to submit applications to Mental Health and Wellbeing Fund programmes operating in other local authority areas. If you intend to submit bids to other local authority areas, please select yes and detail the relevant local authority area(s). If you intend to apply for funding in Inverclyde only, please select no

Section 14 – Fair Work First

For each of the Fair Work First criteria listed please select the most appropriate response for your organisation; Yes (fully deliver against the criteria); Working Towards (implementing plans towards fully delivering the criteria); No (no implementation of criteria). Use the 'other' box if your organisation implements other workforce initiatives not listed.

Section 15 - Declaration

Please read the statement and confirm you comply with all requirements. Please sign and date the form. Electronic signatures are acceptable. Include the full name and position within the organisation. If the person signing is not an employee, please indicate their role e.g. board member or volunteer.

Budget – Separate Template

Please ensure that you are using the correct budget template. Separate templates are available for annual and multi annual requests.

Please complete the budget for the project, estimating realistically how much you intend to spend on each expenditure item, and where appropriate input the amount of that requested from the Fund for each item. This could be £0 when the expenditure item is match funded from another source. Please complete expenditure per project year.

Formulas embedded in the worksheet will automatically calculate total costs and total grant requests.

Revenue costs include costs such as staffing costs, volunteer costs, administration, room hire or overheads. Please group your costs as indicated on the form. Please note that we do not need to understand every purchase you intend to make under a specific heading.

Capital costs include costs such as building refurbishment, IT costs and large equipment, machinery, or vehicle purchases. There are specific rules regarding capital expenditure therefore please check the fund guidelines and FAQ's before applying. If you are unsure as to what constitutes revenue or capital, you should seek advice before completing your application form.

| What can be funded? (Eligible costs) | What cannot be funded (Ineligible costs) |
|---|---|
| Events (one off) | Alcohol |
| Equipment | Contingency costs |
| Room/hall hire of community spaces | Electricity generation and feed-in tariff payment |
| Small capital expenditure up to £5k | Loans, endowments, or interest payments |
| Staff salaries including employer costs (one off or fixed term) | Overseas travel |
| Transport costs | Profit-making or fundraising activities |
| Training | Political or religious campaigning |
| Utilities and running costs | Retrospective activities |
| Volunteer Expenses | Statutory services |
| | VAT (reclaimable) |

*If you are requesting capital funding towards building costs then your organisation must either own the building or have a lease with at least 5 years remaining.

Please calculate total expenditure and tell us how much your grant request is. Funding of up to 100% of eligible project costs is available to a maximum of £15,000 (one-year projects) or 100% of eligible projects to a maximum of £30,000 (multi annual projects). If your grant request is less than the total project cost tell us how you intend to cover the 'gap' in funding and the date the contribution was confirmed. We will need clarification that this match funding is in place before awarding any grant.

Submission

Applications and supporting documentation must be submitted by the deadline. The deadline is **Friday 24th October 2025 @ 10am**. Please return your completed form to the Funding Team at CVS Inverclyde by email: funding@cvsinverclyde.org.uk

Please include the **name of your organisation** in the subject line of the email and remember to attach your application form, budget template, Annual Accounts or projected income and expenditure profile, and a copy of your governing document.

Any queries should also be directed to the Funding Team at funding@cvsinverclyde.org.uk or call [01475 711733](tel:01475711733).

Good luck!