

£30m Funding for Children's Palliative Care – FAQs – revised September 2010

1. Can two hospices apply for joint funding – would this count as a partnership?

A: The application could be a single, joint one, but DH cannot make the funding available jointly. If the Department is to fund two hospices, working in partnership, the application will have to show which costs will be incurred by which hospice. DH is making a template for applications available and this allows for the costs of a single project to be paid to more than one organisation.

2. Hospices have to relate to a number of networks, because they provide services in areas covered by more than one Strategic Health Authority. How would network "approval" work – would the hospice have to apply to both networks?

A: Applications don't have to be made through networks – they can be direct to the Department of Health. But DH is looking for proposals to be supported by networks and where a project is relevant to more than network, it would have to be supported by them all.

3. Is partnership across countries possible e.g. North Wales and NW England, NE and Scotland? Could funding for the English part of the work be submitted?

A: Yes – but the work to be funded would have to relate to England only. There are some potentially tricky issues here (eg when a product developed for use in England could be used elsewhere) – it would be sensible to talk to DH at an early stage about proposals like this.

4. Does family involvement have to mean asking families directly, or can this mean using local family groups/councils?

A: If groups are genuinely representative, they would provide the sort of evidence of family involvement that the Panel will be looking for.

5. Can an organisation which applied for Round 1 apply for Round 2?

A: Yes.

6. My application was not recommended for funding in Round 1, should I resubmit for Round 2?

A: In Round 1, almost all those applications that were recommended by the Panel and which met the requirements for public funding were funded. There was no prioritisation of applications and hence no cases where applications were suitable for funding but "below the line". The circumstances in which applications were recommended by the Panel but not funded were:

- The Panel identified a small number of applications that had merit but which needed more work and which they recommended be re-submitted for Round 2. Those applicants for whom this is the case have been notified.
- There were a very small number of cases where the Panel recommended that an application be funded but where the Department was unable to agree funding at that stage. These applicants have been notified and DH continues to work with them on their proposals. Where this is the case, applications are still being considered as part of Round 1 and there is no need for re-submission.

In other cases where applications were not funded through Round 1, it is very unlikely that they would be funded through Round 2, unless significant changes were made. DH recommends that any organisation thinking of re-submitting an application contact them to discuss on an individual basis why the application was not funded.

7. Can the money be carried over into 2011-12, if it is clear that the project is on course to be finished?

A: No. There are no circumstances in which DH can pay for work done after 31 March 2011.

8. What happens if there are extenuating circumstances such as last year's H1N1 which impact on the delivery of services?

A: The funding can be only for activities that are completed by 31 March 2011. If activities for which funding was agreed are not carried out, for whatever reason by this date, payment will not be made / will have to be paid back.

9. What is the position on capital funding?

A: This grant is a revenue grant and may only be used for revenue expenditure purposes. Any proposals that would involve capital funding over £5,000 should be discussed with DH ahead of them being submitted.

10. What does children and young people mean?

A: The key beneficiaries of the project should be aged 0-19.

11. Can the services be disease specific?

A: Yes.

12. Can adult hospices access this funding e.g. provision of bereavement support for bereaved children (those bereaved of parents etc)?

A: Yes, but it might be sensible to talk to the Panel or DH about specific proposals ahead of submitting them.

13. What is the process and timing for decision-making? Are DH officials or Ministers involved in the decision-making process? How quickly will the money be released after the submission dates?

A: The closing date for the first round of applications (Round 1) is 31 July and for the second round (Round 2) 30 September. The Panel will consider applications as soon as they get them and advise the Department. In taking final decisions, DH officials will also consider technical issues, such as the financial viability of organisations applying for funding. Ministers will not be involved in the decision-making process. DH expects to be able to allocate funds to Round 1 applications in late August / early September and Round 2 applications in late October. Once the Department has notified organisations that their application has been successful, the speed at which the money can be released will depend on the organisation involved, as there are various funding routes.

14. What kind of reporting/monitoring is required on project outcomes?

A: Applications should include provision for local evaluation of the success of the project eg. quality of life measures, reduction of stress and anxiety of family members, changes to hospital admissions rates, lengths of stay and appropriateness of admissions. Evidence of impact, including in relation to equality, across the whole of the local population should be provided. All successful projects will be asked to provide an end-of-project report and DH will be providing a template to help with this. The Panel is planning a national meeting in March 2011 for presentation and dissemination of what has been achieved through this funding.

15. Can ACT/Children's Hospices UK help us with our bids?

A: This is a matter for them. The Department will provide those looking to make applications with all the information and support it can.

16. Can I talk to a real person, not an anonymous DH mailbox?

A: The DH Children's Disability Services Team, led by Sally Anderson, manages the mailboxes for the programme. They are shared mailboxes, to enable more than one person to deal with queries at any one time. The person who deals with a query does give their personal details, so organisations can follow up specific questions.

17. Will national projects be funded?

A: The press notice announcing the funding indicated that the money was to "develop local children's palliative care projects". The recently published NHS White Paper outlined the infrastructure of the new NHS with and highlighted the focus on localism. Therefore, we envisage applications, including those as part of local collaborations, to reflect this aim.

18. How will the panel deal with bids that are about the same activities?

A: The Panel will consider this on a case-by-case basis.

It may be that two or more areas want to do similar things – if it is necessary to fund more than one project to achieve the benefits in the different locations, the Panel could recommend this.

And if one particular element of a proposal is essential to that project, but overlaps with a different proposal, the Panel may recommend that both projects be funded in full, notwithstanding the overlap.

However if one or more projects are about creating a particular resource that could be shared across areas or if there appears to be some similar duplication across proposals, the Panel may want to put those proposing them in touch with one another, to discuss how the duplication might be resolved.

19. What about projects that could be suitable for national rollout or which produce products that could be suitable for national rollout?

A: The Panel will consider these on a case-by-case basis. The forthcoming changes in the NHS infrastructure will increase the amount of local decision-making in the NHS.

20. Will the Panel identify areas where no proposals are put forward for funding from the £30 million?

A: It will review the position after the first round and consider whether action is needed. DH and the Panel are not looking for full geographical coverage. All areas will be able to access products created through the funding and the findings from evaluating the projects.

21. As part of the evaluation, will projects have to report on exactly how they spent the money, including against the different categories identified in their proposal?

A: We will be asking all successful projects to provide an end-of-project report. DH will be providing a template to help with this. However if you are unable to use funds for the agreed purposes, you will have to notify DH as soon as this comes to light and return the unspent portion.

22. Some projects are being turned away at this stage. Can they insist on being considered by the Panel?

A: No project has been turned away. Some organisations have asked for advice about whether a particular proposal falls within the criteria for funding and where asked, DH has given a view on this.

All proposals that are put forward will be sent to the Panel, but if the Department decided that a particular project could not be funded within the criteria for the programme, the Panel could not over-ride that decision. If such a project was something that the Panel considered worthwhile, they might want to discuss with the proposer and DH whether its outcomes could be achieved in alternative ways that would be consistent with the criteria for funding.

23. What is the position on paid-for communications?

A: In general, this funding will not cover paid-for communications, defined broadly to include (this list is not exhaustive): ongoing, updating or maintenance costs of websites and other electronic communications; online and offline advertising including advertorials; public relations; printing and publications; market research; website development; conferences and exhibitions. There is an absolute prohibition on communications activities exceeding £25,000 in connection with any one project.

Depending on the specific case, funding may be awarded for training and the preparation of training materials; and activities that are integral to achievement of an operational project (eg consulting with children, young people and their families as part of the development of a pathway).

There will be need to be a strong value-for-money case to support any paid-for communications that are funded, including consideration of alternative ways of achieving the particular objectives proposed. Applicants should bear in mind that on-line content is typically more cost-effective than issuing DVDs and that workshops and events generally need to be focused carefully if they are to be effective.

If you want advice in relation to a specific proposal you are developing that would involve funding paid-for communications, please e-mail:

childrens30mfundingforpalliativecare@dh.gsi.gov.uk

24. I have been told that my first round application will be funded. When will the money arrive?

A: If you are a PCT or a SHA and you have accepted the offer, we intend to pay you via the Resource Limit Adjustment (RLA) notified on 30 September.

If your organisation's application will be funded through through section 64 of the Health Service and Public Health Act 1968, or you are a NHS Trust the process is that once you have accepted and offer and returned a completed Supplier Maintenance Form, we will issue a Grant Award Letter. Once you have returned the form enclosed with that letter, the agreed funds will be paid.

25. Will agreed funding be staged?

A: No. Each application will be funded as a lump sum. However if you are unable to use funds for the agreed purposes, you will have to notify DH and return the unspent portion. Please contact DH as soon as possible if this is the case.

26. When will the outcomes from Round 2 be notified?

A: That will depend on the number of applications and the number of issues that have to be followed up with applicants. The expert advisory Panel will consider applications on 7 and 8 October.