

Life Chances Fund - Application Guidance

The Life Chances Fund (LCF) is an £80m top-up fund, whose objective is to help those people in society who face the most significant barriers to leading happy and productive lives. The £80m has been committed by central government to provide contributions to outcomes-based contracts. These contracts must be locally commissioned and aim to tackle complex social problems.

Application Process

When a thematic call out is issued, proposals for SIBs in the relevant policy areas can be submitted for consideration. Initially applicants are required to submit their proposals through an Expression of Interest (EOI) and, if successful through a Full Application (FA).

1. Expression of Interest

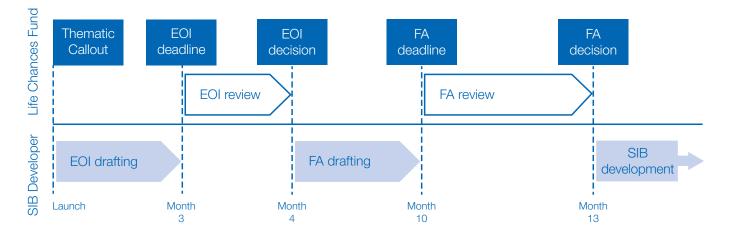
- The initial stage of the process will ensure that applicants are clear on what it is they are applying for and how realistic a proposal they are making.
- It will ensure applicants meet the fundamental criteria for applying to LCF.
- A decision will be taken on each EOI form within four weeks (depending upon volume of applications).

2. Full Application

- Proposals approved through the EOI submission will be required to complete a Full Application with more detailed information regarding the proposal.
- Further information regarding the FA will be shared when details regarding the process have been finalised.

Successful applicants will receive an in-principle agreement to fund outcomes and can then enter into commissioning service provision and launch.

The below diagram gives indicative timelines for the process.



Expression of Interest (EOI) form

The EOI form captures high level information regarding the proposal, to ensure applicants are clear on what they are applying for and that the Life Chances Fund Team are comfortable that it meets its key principles.

The content of the form and required information is outlined below.

About Your Organisation

This section asks for some background information about the organisation you are submitting the application on behalf of.

Vhat t	ype of organisation is it?
Lo	cal commissioner
Se	vice provider
Int	ermediary / advisory body
Ot	ner
/hat e	ector does your organisation fit into?
Pu	ector does your organisation fit into? olic sector
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4.	If your organisation is not a public sector body, what is the current financial position? (please select one option and fill in the amounts from your accounts or projection)
	Information from the latest accounts approved by your organisation
	12 month projection (if you've been running less than 15 months)
	Account year ending (dd/mm/yyyy):
	Total income for the year (£):
	Total expenditure for the year (£):
	Surplus or deficit at the year end (£):
	Total savings or reserves at the year end (£):
Abo	ut You
This s	section asks for some background information about you.
5.	Name
6.	What is your position within the organisation?
7.	email address
8.	Daytime contact number
Abo	ut Your Project
	section asks for more information about the proposal that applicants are developing.
	cants are asked to provide as much information as they are able to give for each question or y indicate where they are unable to do so.
9.	What is the name of your project?
10.	Please provide a short summary of your project and how it fits with the priorities for the Life Chances Fund.

V	When would you like your project to start?
٧	When would you like your project to finish?
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	What is the social issue that you are looking to address? (please select more than on box if appropriate)
	Drug and alcohol dependency
	Children's services
	Early years
	Young people
	Healthy lives
	Older people's services
	Other
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۷	What proportion of payments do you expect to be made on an outcomes basis?
	Less than 50%
	50-75%
Ī	75-100%
L	
	What are the outcomes you are looking to achieve and what are the key changes for participants?

How will you measure these outcomes?
Please outline the intervention(s), or provide examples of the sort of intervention(s), y intend to use to deliver the outcomes.
Please outline what you have done / will do to develop your service so that it support the people you intend to help.
Please list the local commissioner(s) who will pay for the outcomes and what confirmation you have received that they will be willing to pay for them?
Please provide the name of the lead contact at the local commissioner(s)
What are the total estimated costs and the total estimated savings (to the named commissioner and to wider government) of the intervention outlined in Q16?
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