

# COMMUNITY CHECK-IN NOTES

Tuesday 30 June

Grant fundraising – practical advice

## Organisations represented:

- AKU Society
- Alex TLC
- Alström Syndrome UK
- Angelman UK
- Ataxia UK
- Behcet's UK
- Gaucher UK
- Pitt Hopkins UK
- Ring20
- The Smith-Magenis Syndrome Foundation UK
- Unique – the rare chromosome disorder support group
- Wolfram Syndrome UK

## Genetic Alliance UK staff attending:

- Jayne Spink (JS), Chief Executive
- Nick Meade, Director of Policy
- Lauren Roberts, Director of Support
- Natalie Frankish, Policy and Engagement Manager - Scotland
- Emma Hughes, Policy and Engagement Manager – Wales
- Izzy Rundle, Communications and Support Officer

## Presentation from Steph Prentis (SP), Senior Fundraising Consultant – Charity Fundraising Ltd, regarding their experiences of fundraising during COVID-19 and practical guidance for organisations

- Charity Fundraising Ltd have generated around 39 million pounds for 260+ charities
- Currently charity fundraising is a challenging environment.
- There are currently more than 800 emergency response funds available for core funding but hard for specialist organisations to access.

Genetic Alliance UK

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[www.geneticalliance.org.uk](http://www.geneticalliance.org.uk)

Registered charity numbers: 1114195 and SC039299  
Registered company number: 05772999

- Demand for grants is high and timeframes are short but this means funding award turnaround is fast.
- Route for funding for Health and Social Care clients includes resilience funders, National Lottery Fund, Garfield Weston, pharmaceutical companies if existing relationships.

#### **Charity fundraising experience has shown:**

- It works well to exploit existing relationships with funders and highlight your organisation's ability to intervene in the invisible impact of Covid-19.
- Go for smaller / shorter pots that can build up quickly.
- Organisations using reserves being looked on favourably / organisations with low financial stability prioritised.

#### **Four key areas to focus on:**

- Covid-19 has a major impact on individuals with underlying health conditions and those who have had to shield.
- Covid-19 has exposed huge inequalities and work is needed to close the gap and tackle these issues.
- Current situation is fast changing with inconsistent information so greater awareness of need to signpost / advocate / challenge and access for people's rights.
- Recognition that Covid-19 is directing resources away from Health and Social Care organisations.

#### **Practical things to do:**

- If not a fundraiser by role then make sure you dedicate time every week to do applications / write strategy.
- Develop a strategy for grant fundraising and use clear objectives that link to service objectives.
- Think about wider steps and developing other streams.
- Collect data from work you have been doing over the last few months that shows challenges of beneficiaries and how you have been addressing them.
- If needed, conduct a quick online survey that gathers data that shows need / addresses challenges / impact of the work you have done.
- Talk to existing funders as this can help highlight pots of funding that no-one knew existed.
- Look at template proposals from core funding / projects and use as the method to create a crib sheet for future funding applications. Guidance from the Garfield Weston process is useful as it is very comprehensive and will give you everything you need.
- Charity Fundraising Ltd are providing free consultancy support of one hour free surgery and follow up resources (no obligation).

## **Questions:**

### **Question: Previously too much or too little money in a charity's reserves was bad for applications, are funders now being more permissive?**

(SP) Now if there is too little in reserves and you can demonstrate that funding will help your sustainability while delivering services that is seen relatively favourable.

Funders are not looking so favourably on organisations holding large reserves and you need to demonstrate how will use them up if you do have them.

**Question: What is a reasonable reserves policy in the current climate?**

(SP) During the last recession reserves of 12 months became acceptable as people needed that kind of security. This is potentially likely to happen again that so funders might in future accept larger reserves. Currently showing around six months of reserves seems to be viewed favourably.

**Comment** – We have had some success showing last year’s accounts / management accounts. In some cases we have been given double what asked for!

(SP) Applications in some cases have been easier. If they are asking about reserves think about comments above. The challenge is the sheer volume of applications and small pots – having to do more applications than you would have previously, work harder by capacity rather than complexity.

**Question: I’m not a fundraiser and I’m doing everything at the moment. Currently I’m trying to do applications, can I use my hour to look over this?**

(SP) Yes absolutely, link will be shared.

**Comment** - We’re a small charity and had some success with small pots - especially with existing funders.

**Question: As we move out the high urgency period how do you see things changing / how funders will approach it?**

(SP) No-one knows yet, but I suspect focus will be on the recovery phase, the long term impact of Covid-19 on people who have been left behind by Health and Social Care/ research etc. There is a lack of information for people about how to move forward – I would expect funding to look at addressing those inequalities. Think about how your organisation addresses these and start to gather evidence about impact on your families / how you can address these.

**Question: We’re a very small volunteer led charity, our condition affects lungs and respiratory systems so we are very affected. We’re getting to the point where demand for involvement and support is outstripping what we can provide currently – is funding available for human resources? Can we apply for funding for a part time role to help?**

(SP) Yes, you can apply for funding for staffing because capacity issues when you’ve always had volunteers is quite a compelling case for support. Funding that has been available have often been based on initiatives - these can have staff members involved in them. I also suspect that we will move away from this and start to recognise the wider impact of Covid-19. Some funders, like Henry Smith, are not focusing on Covid-19 at all as they think it will be over by the time they have made the award (takes six months). Henry Smith are specifically asking people not to talk about Covid-19.

**Question: We’ve done what we can to adapt but we want to go back to our actual projects, when can we do that? Any ideas of other funders focusing on things that aren’t Covid-19?**

Look at Tudor and Garfield Weston. The National Lottery Funding is allowing non Covid-19 applications but are likely to take longer. October seems to be when a lot of funders are talking about other funding streams coming back on – might be an arbitrary date but seems to be suggesting this is where things might change a bit.

The issue is not always the virus, it's the impact of lockdown / what Covid-19 has exposed, such as health inequalities etc. Covid-19 has shown funders what these issues are, if you can show you've been trying to tackle these issues for some time it makes your ask stronger

**Question: We haven't put in any applications yet as we've been told we haven't got a sufficient business plan and people would not fund a part-time role etc. We're getting mixed messages about whether to apply or not, but we've lost three volunteers recently so our capacity is going down while our demand is going up. Are there any recommendations what we should do?**

(SP) surprised that getting messages not to apply. All applications we've put in over the last few months have had some kind of staff costs – for example, volunteer coordinator. There is only so much you can do with volunteers – work out what the job is, plan out their activities into a project so you know there is genuine work they need to do and then start applying. You'll be able to talk more clearly about why you need them

## **Open floor for discussion about new issues arising**

- Genetic Alliance UK have written joint letter with BSGM, Unique and others covering the issues relating to shielding, sending tomorrow.
- Patient experiences report live until the end of the month – JS requests that all groups share with their members.
- EHCP – comments from our community coming in that children are expected to go back to school but Local Authority will not be providing taxis / transport so being denied access.
- Update from Nick Meade about common's education inquiry ready to go in this week – we can share the EHCP point with Dr. Linney from RCPCH and make sure that our response is up to date to include the ECHP transport issue / issue around parents being fined if they do not send children in.