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| **Communities Mental Health & Wellbeing Fund Grants****2021-2022** |
| **Organisation Name:** **Monitoring Form****Level 1 Grants (up to £5,000)** |

Funded through:



**Name of organisation or lead partner:**

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 **Funding amount received:**

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|  |

**Do you consent to your organisation name, funding amount and application project summary being listed on our website?**

|  |
| --- |
| **Yes** |[ ]
| **No**  |[ ]

**What did your project achieve?**

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**What measures did you input to ensure inequalities were addressed, particularly amongst the “at risk” groups you identified in your application?**

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**What engagement did you experience from the identified “at-risk” groups?**

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**Project key outcomes:**

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| **Reducing social isolation and loneliness** |[ ]
| **Enhancing suicide prevention** |[ ]
| **Addressing mental health inequalities**  |[ ]
| **Building local community resilience** |[ ]

**How do you feel you met the intended outcomes? What difference has the project made?**

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| **What challenges did you encounter, and what changes (if any) were made to the project?** |  |
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| **What learning will you take forward into future work? Will any element of this project continue?**  |  |
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**Please give us a detailed breakdown of your project costs** (continue on separate sheet if needed)

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| --- | --- | --- |
| Item (e.g. room hire) | Budget | Actual Spend |
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|  |  |  |
|  Total Project Cost  |  |  |

Name: Position:

|  |  |  |
| --- | --- | --- |
|  |  |  |

Date:

|  |
| --- |
|  |

Please return this form by Monday 11th April to: funding@dvva.scot

Communities Mental Health and Wellbeing Fund

Dundee Volunteer and Voluntary Action

Number Ten

10 Constitution Road

Dundee

DD1 1LL

**If you would like to share any photos, stories or digital content to help us share your work and promote future funding please submit to** **funding@dvva.scot**