



Portishead Town Council

Grant Application Decision Form

For internal office use only - Ref: #5 NM

Attach to front of corresponding full Grant Application					
<p>DECISION FORM - to be completed to support the Community Matters Committee review and consideration of the grant application</p>					
Name of group / organisation					
Wellspring Counselling Ltd					
Name/ title of project/ activity/ event					
Affordable Counselling and CBT (Cognitive Behaviour Therapy)					
PURPOSE - Why is this group/ organisation applying for funding					
<p>To continue to offer an ongoing essential local service for adults and young people age 11-25. Financial support with the ongoing cost of running the overall service is needed, as a result of Covid-19 which has increased costs and reduced income from sessions. Sustaining and expanding the Young People Service. Paying for more qualified Counselling hours and some additional admin/ management time improving access for vulnerable young people who aren't able to access timely Counselling support elsewhere.</p> <p>Portishead Town Council has in previous years supported this group with a grant of £900 last year.</p>					
BENEFIT - How will the people and communities of Portishead benefit					
<p>Portishead counselling activity continues with 6 remote sessions a week for Young People. Wellspring have 4 qualified YP Wellbeing Practitioners providing early intervention CBT (remotely currently) in local schools and setting up other sessions out of school hours. Includes 2 days a week in St Katherines Pill, where many of the students are residents of Portishead.</p> <p>Currently 52 Portishead residents' benefit from counselling services with a further 23 on the waiting list. Around 65% (c50 Portishead people) cannot afford to pay and are subsidised by Wellspring at a cost of £40 per session, accordingly a grant of £1,500 is around £30 per disadvantaged resident that may benefit.</p>					
RECOMMENDATION					
1) Approve: (tick relevant box):	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 5px;">YES</td> <td style="border: 1px solid black; text-align: center; width: 40px; height: 30px;"><input checked="" type="checkbox"/></td> <td style="border: 1px solid black; padding: 5px;">NO</td> <td style="border: 1px solid black; width: 30px; height: 30px;"></td> </tr> </table>	YES	<input checked="" type="checkbox"/>	NO	
YES	<input checked="" type="checkbox"/>	NO			
2) Amount to be paid: 1500.00					
3) Payment terms: Single Payment by 30 th Sept 2020					

4) Comments:

SIGNED (on behalf of Community Matters Committee):

Name:

Role:

DATE: