**Early Years and Childcare**

**Childcare Reforms Expansion funding**

**Capital Funding 2024**

**Application Form**

**This form should be completed in full and submitted with all supporting documents to** [**childcare.expansion@essex.gov.uk**](mailto:childcare.expansion@essex.gov.uk)

**This application is for:**

**A setting in a Priority One area**

**A setting in a Priority two area**

**A setting in Priority three area**

(Please use the Priority Area spreadsheet – your application may be declined if this box is empty)

**Ward and Postcode of your proposed project**

**Total Number of FEEE1W/ FEEE2W places to be created:**

**Anticipated date for places to be available:**

**Amount of funding applied for:**

Please refer to the service specification and priority area document to ensure you do not exceed the maximum places or funding available

**Project overview:**

Please provide a brief summary of the project (50 word limit)

**Section 1: Your Details**

**1.1 Organisation Name**

The name of the organisation, group or body making the application as it appears on your constitution or governing document

**1.2 Address**

Registered Address of your organisation

**1.3 Name of the childcare provider**

If different from above OR if a new company will be set up for the purpose of this project

**1.4 Project Address**

Address of the proposed project in this application

**1.5** **Email address**

for all communication related to this application

**1.6** **Name**

of person submitting this application

**1.7** **Do you have legal authority to make this application on behalf of the organisation**

**\* This is a mandatory question, and your application cannot proceed without this box being selected**

**1.8** **Telephone number**

**Section 2: Your organisation**

**2.1 Details of your Ofsted registration (if applicable):**

Ofsted URN

Date of last visit

Grade

**\* Applications will only be accepted from providers with a current Good or Outstanding Ofsted grade, OR from new/not yet inspected providers who can evidence how this will be achieved.**

**2.2**  **If you are currently a childcare, please indicate the type**

Childminder

Community Interest Company (CIC) Company Reg No.

Limited Company Companies House Reg No.

Registered Charity Charity Commission Reg No.

School DfE URN

Sole Trader

Partnership

Other – please explain:

The information provided in this application form will be reviewed by a panel of subject matter experts.

Please provide as much information as you can **within each section**, keeping within the **word limit** (information provided outside of the word limit cannot be reviewed). Criteria is listed for each section and linked to the scoring criteria provided in the application pack. Not all panel members will be reviewing all sections of the application or all supplementary documents. If you have supplied additional information pertinent to a particular question, please note this in the relevant section.

Section 5 of this form details what supporting evidence and documents are required. Please ensure that all documents are submitted with your application and if possible, please provide in word or excel format. Ensure that each attachment is clearly titled with your **setting name** and the **content/purpose** of the document, *for example: Daisy Pre-school, site plan OR Daisy Pre-school, FEEE Policy*. **The application will not proceed to evaluation if documents are not provided**.

**Section 3: The Project**

**3.1 Outcomes**

Please describe below how your proposed project will meet the evaluation criteria and

desired outcomes of the funding:

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| **Evaluation questions and criteria** |
| **1.The Offer** |
| How will you develop a service that meets the requirements laid out in the service specification  **Attach a copy of your admissions policy (if applicable)**  Criteria:   * Located within a Priority 1 or 2 area area or able to demonstrate demand and how you will meet the needs of these families within these areasas detailed in the service specification * Accessibility for families living within priority areas. * Total number of childcare places available in the setting * Breakdown of ages and services being offered * Number of fully funded places you will offer, breaking down FEEE1w and FEEE2w places * How will all FEEE places be offered (flexibility, free at point of access and meeting contract requirements etc.) * how all Working Families Entitlements will be offered, up to 30 hours for children from the term after they are nine months * How a family could access a fully funded place without having to pay additional charges or purchase additional hours * What the alternative is to paying additional charges associated with funded hours, if a parent is unable or unwilling to pay. * Implementation of the Early Years Foundation Stage * Ofsted registration and ability to achieve and maintain good or outstanding Ofsted grading * Value for money (price per place)   ***The limit is 750 words. If you exceed this, only the first 750 will be reviewed.*** |
|  |
| |  | | --- | | **1a Evidence of need** | | **Please evidence the need and demand for additional FEEE1W and FEEE2W places in this setting. Please explain how you will meet this need, but not to the detriment of other local settings.**  **This evidence could include:**   * Use of Childcare sufficiency data * Analysis of waiting lists and enquiries * Own surveys, and market research * Competitor analysis * Marketing plan * Use of local knowledge   ***The limit is 300 words. If you exceed this, only the first 300 will be reviewed.*** | |  | |
| **2 Mobilisation – Capital building project** |
| Provide a plan that details how the capital building project will be mobilised and the steps undertaken to prepare for this application.  \*Please note that funding must be spent and project completed by June 2025  **Please complete and attach EYBid1 form**  **Please attach supporting documents listed in Section 5**  Criteria:  (As applicable)   * (for expansion or re-modelling projects) Full details and plans of existing building * (for new build projects) Full details of site, proposed location on the site and access routes * Building and site ownership/lease arrangements and agreements in place/approval to undertake alterations * Details of proposed building work * Proposed schedule of works and timeline * Planning requirements * Quotes * Risks and issues * Experience of management of building projects or how expert knowledge will be provided (qualified project manager required for projects over £50).   ***The limit is 500 words. If you exceed this, only the first 500 will be reviewed.*** |
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| **3. Mobilisation – Service Delivery** |
| Provide a plan that details how service delivery will be mobilised and the timescales for full delivery including identification of risks and mitigations.  Explain how you will recruit, retain, induct and provide ongoing support to your workforce to enable them to provide a high-quality service for local children and their families.  Criteria:  (As applicable)   * Research that demonstrates local knowledge and need * Company structure * Marketing * Installation of equipment and resources * Ofsted registration * Capacity within the organisation to expand and mobilise * Risks and issues * Staff recruitment (safer recruitment) * staff qualifications * induction policies * ongoing staff training and commitment to CPD * ongoing staff supervision   ***The limit is 500 words. If you exceed this, only the first 500 will be reviewed.*** |
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| **4. Quality** **Assurance – Please complete the Quality Assurance Visit Form** |
| **5. Delivery of Funded Early Education Entitlements Policy** |
| Please attach a copy of your FEEE policy, a sample invoice, the information you give to parents. This must include a pricing structure and details on how FEEE hours can be accessed.  Please detail:   * the information you give to parents, and when you provide this. * how you offer the FEEE entitlements * how you deliver the Working Families Entitlements to meet local needs |
|  |
| Please answer the following questions to demonstrate FEEE contract compliance: |
| |  |  | | --- | --- | | Do you require parents to pay a deposit? | Yes / No | | Child accessing FEEE2 hours only (funded only place) |  | | Child accessing FEEE2 hours and paying for additional hours |  | | Child accessing FEEE3&4, FEEE2W & FEEE1W hours only (Funded only place) |  | | Child accessing FEEE3&4, FEEE2W & FEEE1W hours and paying for additional hours |  |  |  |  | | --- | --- | | Do you require parents to pay an admin / registration fee? | Yes / No | | ChIld accessing FEEE2 hours only (funded only place) |  | | Child accessing FEEE2 hours and oayng for additional hours |  | | Child accessing FEEE3&4, FEEE2W & FEEE1W hours only (Funded only place) |  | | Child accessing FEEE3&4, FEEE2W & FEEE1W hours and paying for additional hours |  | |
| **6. Previous Experience of providing childcare** |
| Provide details of previous experience of Early Years and Childcare leadership, including knowledge of the Ofsted regulation and inspection framework.  New providers who are unable to evidence previous experience may be offered an interview to provide detailed information about their ability to meet the specification requirements.  Criteria:   * Previous experience of delivering or leading high-quality, Good or Outstanding Early Years provision or details of how this expertise will be secured – for new providers this may be evaluated through an interview * Qualifications and training * Previous Ofsted outcomes where available * Experience of delivering the EYFS for children (from birth to 5 years where applicable).   ***The limit is 500 words. If you exceed this, only the first 500 will be reviewed.*** |
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| **7. Core Values** |
| Please tell us about the core values of your organisation and how you would work with partners within the local community to ensure that the services delivered are meeting **local** need.  Criteria:  (Where applicable)   * Parental engagement/partnership with parents * Inclusion and Diversity * SEND 0-25 Code of Practice 2014 * Equality Act 2010 * Partnership working * Early Years Pupil Premium * Funded Early Education Entitlement * Communication and engagement with relevant stakeholders   ***The limit is 500 words. If you exceed this, only the first 500 will be reviewed.*** |
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| **8. Safeguarding** |
| How would you ensure that the children in your care are protected from harm.  **Attach**   * **copy of your organisations publicly available safeguarding policy** * **list of other related policies** (we will request copies if necessary)   Criteria:   * SET procedures * Essex Safeguarding Children Board (ESCB) * Policies and procedures * Continuous Professional Development (training) * Whistle blowing * Safer recruitment/DBS * Information handling/ data protection   ***The limit is 500 words. If you exceed this, only the first 500 will be reviewed.*** |
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| **9. Business Plan and Cashflow Forecasts** – Please include your Business Plan and 3 years Cash-flow forecasts. Template documents are available to download and use. Please refer to the Guidance document and templates  [Information and guidance about FEEE1W and FEEE2W (essex.gov.uk)](https://eycp.essex.gov.uk/funding/childcare-reforms-feee1w-feee2w-and-wraparound-childcare/information-and-guidance-about-feee1w-and-feee2w/) |

**Section 4: Costs**

1. Using the table (4.1) below please give a detailed breakdown of how much money you are requesting in column A (exclusive of VAT). Use column B to detail the VAT cost and column C to detail the total amount you are requesting for that particular item (A + B). Use column D to detail the total of any contribution you will be making to the funded activity.
2. If the total build cost exceeds the level of funding available, please provide a plan or information to show how you will fund the shortfall (4.2).
3. If you are successful, you will be required to provide the details of a bank account or cost centre which is **separate** from the main finances of the organisation.

4.1

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| --- | --- | --- | --- | --- |
| **Item**  Each item should correspond to the estimate or quote of your preferred supplier | **Cost of item**  **(Net of VAT)**  **(A)** | **Value of VAT**  **(B)** | **Total amount applied for**  **(C)** | **Total contribution from applicant**  **(D)** |
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| **Total** |  |  |  |  |

Please note: if this table is left blank, or incomplete, or says ‘see quote for cost’, your application will be declined.

**4.2**

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| **For projects where cost exceeds funding available, please provide details of how the shortfall in funding will be met.** |
| ***Maximum 50 word limit*** |

**Section 5. Required information**

**Please answer the following questions in support of your application**

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| **Insurances**  Please confirm that you have or will obtain:  (a) public liability insurance with a limit of indemnity of not less than [five] million pounds [(£5,000,000)] in relation to any one claim or series of claims arising from the Project; and  (b) employer's liability insurance with a limit of indemnity of not less than [five] million pounds [(£5,000,000)] in relation to any one claim or series of claims arising from the Project.  (c) Professional Indemnity Insurance with an indemnity limit of two hundred and fifty thousand pounds (£250,000)  *We do not need copies of the documents* | Yes / No  Yes / No |
| **GDPR – Information Commissioner’s Office**  Please provide your ICO Registration Number  or  confirm that as a new provider you will register | ICO Registration Number: |
| **Number of new places**  Please confirm the number of **new FEEE1w / FEEE2w** places to be created by this project.  If this grant will part fund a project, please indicate the proportion of all new places that will be created with the funding. | (please refer to service specification and priority spreasheet to ensure it does not exceed the maximum no of places to be created)    Current number of places registered with Ofsted    Proposed number of places to be registered with Ofsted |
| |  | | --- | | **Project Manager**  **Please confirm:**  **The total project value is under £50,000 so does not require a Project Manager**  The total project value is over £50,000:  Please provide contact and qualification details of a suitably qualified project manager (with a construction specialism) who you will appoint as Project Manager | | Yes / No  Yes / No  Details of Project Manager: |
| **Dates**  Please confirm the proposed start and end dates of your capital project | Start Date  End Date |
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| **Required Supporting Documentation**  Please select the yes/no box to indicate whether a document is attached and provide the name of the file or document.  Please name each file / document following this example:  **‘SETTING NAME Document Name’**  **Only documents named in this way will be accepted** | |
|  | |
| **Admissions Policy (if applicable)** | attached  Document Name |
| **Legal Status** Registered Charity: attach a copy of your organisation's constitution.  Limited Company - attach evidence which could be your Memorandum and Articles of Association or certificate or incorparation  Partnership or Sole Trader please confirm this in section 2 above. | Attached  Document Name |
| **Funded Early Education Entitlement (FEEE) Policy**  **Information for parents**  **staffing structure**  **Sample invoice** | attached  Document Name |
| Attached YES / NO  Document Name  attached  Document Name  attached  Document Name |
| **Safeguarding Policy**  **List of safeguarding related policies** (we will request copies if necessary) | attached  Document Name |
| attached  Document Name |
| **Quality Assurance Visit Form** | Attached Yes / No  Document Name |
| **Staffing Structure** | Attached Yes / No  Document Name |
| **EYBid1 form** | Attached Yes/No\_\_\_\_\_\_  Document Name\_\_\_\_\_\_ |
| **Business Plan** | attached  Document Name |
| **3 years cashflow forecasts** | attached  Document Name |
| **Plans/Drawings**  Please provide plans/drawings of the proposed works  Projects on school sites should also include a **full site plan of the school** | attached  Document Name  e.g ‘SETTING NAME Plans’, ‘SETTING NAME Drawings’, ‘SETTING NAME site plan’ |
| **Lease Agreement (where applicable)**  Please provide a copy of your lease agreement or evidence that is being progressed | attached  Document Name |
| **Freeholder Consent Form**  Please provide a completed Freeholder Consent Form – a letter or email giving consent will **not** be accepted  NB projects on school sites (including academies) may require planning consent from the Dept for Education and/or Essex County Council | attached  Document Name |
| **Programme**  Please provide a programme (indicating key timescales for completion and milestones) | attached  Document Name |
|  |  |
| **Quotes**  Three (3) detailed 'like for like' quotes that are dated within the last six months, include VAT and are still valid.  Name of Preferred Supplier and quote number | attached  Document Name  Document Name  Document Name  **(**Name of document should be ‘SETTING NAME quote 1’, SETTING NAME quote 2 etc |

**Declaration**

**I/We understand and agree to the following:**

1. I understand that if I have not submitted all of the requested supporting documents and checklists, and labelled as per the guidance; **my application will be declined.**
2. The information given in this application and in supporting documentation is true to the best of my knowledge.
3. If funding is received, that information provided in the application form is **material to a funding agreement** which I/we will be required to sign to govern the use of the grant.
4. I/We agree to complete and submit the Project Monitoring form as requested by Early Years and Childcare. I understand if these are not completed and returned, it could delay or stop future payments of this grant.
5. If funding is received it will **only be used for the purposes stated in this application,** and this organisation will take all reasonable precautions to ensure that grant monies received will not be misused or misappropriated in any way.
6. I/We accept that any funding that cannot be evidenced as being spent on the items that were agreed by the Funding Panel must be returned to Essex County Council.
7. If I/we do not spend the entire grant on this service we will promptly return the unspent amount to the Essex County Council when requested, failure to do so will mean access to future grants will be denied.
8. I/We understand that we may not receive all of the funding requested in this application and that the Early Years and Childcare Funding Panel decision is final.
9. I/We understand that Essex County Council is not liable or responsible for health and safety for our service or any items purchased with funding awarded.
10. I/We will comply with any relevant legislation affecting the way we carry out our service.
11. I/We will acknowledge this grant from Essex County Council in our annual report, the accounts, which cover the period of the grant and in any publicity material we produce about the service. I/we will show the grant separately in our annual accounts.
12. I/We will inform Essex County Council in the case of any changes to that detailed above and ensure clear records are maintained in accordance with the terms and conditions under which the grant may be made. All accounts and records must be available for inspection by Essex County Council’s Officers and staff or any approved auditor.
13. Records of expenditure and monitoring forms will be completed and returned Essex County Council on request.
14. I/We have kept a copy of this application for our records.
15. I/We confirm other sources of funding have been explored and we have discussed how much we are prepared/ able to contribute.
16. There is a valid lease/licence agreement for the business (where applicable).
17. I/We confirm that we have either a separate bank account or a separate cost centre
18. I/We confirm that all staff meet Ofsted requirements (qualifications and ratios).

*I confirm that I/we have the authority to make this application. I/we understand that you may ask for additional information at any stage of the application process.*

**Signature of main contact (This must be the person named in section 1)**

**Signed** – electronic signature is acceptable

**Name**

**Date**

**Data Protection**

Essex County Council will process your personal information included in this document in accordance with the Data Protection Act 1998. The Council will not disclose such information to any unauthorised person or body and will only use such information for the purposes of administering your application. The information will be retained only for as long as necessary to do so and then securely destroyed. The council may also use this data in connection with the prevention or detection of fraud or other crime.