



COMMUNITY GRANTS FUND APPLICATION

Please answer all questions which are relevant to your organisation – failure to do so may result in a delay in the determination of your application

PROJECT (In no more than 25 words)	To offer counselling to young people throughout the Shrewsbury area – referrals made by schools to support pupils struggling with bereavement and low-level mental health.	GRANT AMOUNT REQUESTED	£10,000
--	--	-------------------------------	----------------

Contact Details

Q1 Name of organisation making application:

Crane Quality Counselling

Name of contact for this application:

Title: Mrs.

First Name: Lin

Surname: Foley

Position held in the organisation:

Contact Address, including full postcode:

Postcode:

Contact Telephone Number:

Email address:

About your organisation

Q2 What type of organisation are you?

Tick (✓) relevant category:

Registered Charity:	(X) Charity Registration Number: 1175610
Voluntary Organisation:	()
Company Limited by Guarantee:	(X) Company Number: CEO12007
Other – Please specify:	Not applicable

Q3 When was your organisation established?

September 2017

Q4 Briefly describe your organisation.

**Describe your organisation, including how many members/users you have, whether there is a subscription fee and the usual activities/services you provide.
If you are a new organisation, describe the services/activities you plan to provide.**

Crane Quality Counselling currently has a staffing level of 5 salaried posts from management to administration (all part-time). 14 part-time counsellors; 1 part-time clinical Supervisor practitioner and approximately 10 volunteers. The number of cases worked with during 2024/25 is 289 adults and 132 children delivering over 1,555 counselling sessions. We are applying for funding to continue supporting children – all adult clients are asked to make a small payment or donation towards their appointments.

Q5 If you are a subsidiary of a larger organisation, please state which one.

Not Applicable

Q6 Does your organisation have an agreed Constitution or Memorandum of Association?

Yes – copy attached

Q7 What is your primary source of funding?

Until March 2025 we received some funding for children to be seen in school. From April 2025 all funding from Shropshire Council due to financial cutbacks, has been withdrawn.

We continue to raise finances through our fundraising activities to try to enable us to maintain our ability to work with and to support children. All adult appointments are paid for by the client at a reduced rate.

Details of the project or activity you are planning

Q8 Describe the projects/activity you plan to use this grant for.

i. Try to be specific about what you will do and how you will do it.

We will write to all Shrewsbury schools informing them that funding has been made available for them to make referrals to us for their pupils who need urgent support. Appointments will be offered during the school day, and our counsellors will travel to the appropriate school to deliver the support. Those children who prefer to be seen out of school, will be seen at our counselling rooms at The Roy Fletcher Centre. Number of appointments and sessions per child, will depend on funding available but ideally will receive a minimum of 6 sessions each.

ii. Please state how you have identified this need and how the project will benefit the people of Shrewsbury, together with the estimated time span. If you are seeking continuation funding for this project, please provide evidence for this continued need.

We have for the past four years been delivering this service across schools in the Shropshire Council geographical area but, with funds of approximately £25K per annum being withdrawn, we are working tirelessly to raise money to enable us to continue this desperately needed service as waiting lists for this support by statutory organisations are so long or no longer accepting referrals. Continued funding would be so appreciated. Shrewsbury children need help now, not in 2 years' time.

iii. How many people from the Parish of Shrewsbury do you expect to benefit directly from your project or activity?

72 (18 x 4 sessions each) for each £2,500 allocated

iv. Please indicate which of the key pillars of the Council's Vision are met and how:

Pillars	Met	How
Building Resilient Communities For Shrewsbury	X	By helping and supporting children at a young age with their mental health, anxiety, well-being and improve their behaviour.
Supporting Shrewsbury Residents To Live Active And Healthy Lives Through The Provision Of Quality Services	X	If we receive funding to support our future adult generation, we will help to support and achieve this goal.

Preserving Shrewsbury's Heritage	X	Shrewsbury's heritage is not just about bricks and mortar; it's also about supporting our next generation to help preserve and build those bricks and buildings and lead more fulfilling lives.
Creating A Greener And Better-connected Shrewsbury	N/A	
Maintaining A Sustainable, Resilient And Efficient Organisation	Working to achieve	If funding was available, we will work towards achieving this by helping and supporting children at a young age with their mental health, anxiety, well-being and improve their behaviour.
Taking Positive Action To Tackle Climate Change	N/A	

Q9 What criteria will be used to measure the success of the project and how many people from the Parish of Shrewsbury do you expect to benefit from it?

We will collate statistics on numbers of clients / children we have supported and be available to help them in the future as each child moves towards adulthood. Offering this support early will hopefully lead to them becoming better adults/parents etc.

Health & Safety

Q10 What, if any, special safety issues are related to your project/activity?

Please provide the following information:

i. What kind of insurance does your organisation have?

We have £10 million cover policies – covering employer's liability and public liability insurance cover. We are also members of the BACP, our counselling professional body. All counsellors, supervisor and some staff are insured with BACP cover to enhanced level.

ii. Do the leaders have the relevant qualifications and/or experience?

Yes. (See above). Our counsellors all have to be registered with the BACP in order to work for Crane Quality Counselling supported by a qualified and experienced Clinical Supervisor Practitioner.

iii. What policies does your organisation have in place (i.e. Health and Safety, Child Protection/Safeguarding, working with vulnerable adults, Equal Opportunities, CRB Checks etc.)? *You may be required to submit copies of your policies.*

We have a complete set of policies mentioned above in place and would be happy to submit copies if required.

Funding of your project

Q11 Previous Applications

If you have applied for and received funding from Shrewsbury Town Council in the past please provide details of the amount, the year and briefly what the funding was used for.

Year	Project Description	Award £
2024/25	Young People's Counselling (Spreadsheet attached of achieved outcomes)	2,500

Q12 Project Funding

Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested: £10,000 and provide a detailed breakdown as to how you have reached this figure

Project Expenditure Please list all items of expenditure for your project	Amount of Project
Admin costs – setting appointments/checking completed client forms,	£200
Counsellors' salary costs/travelling expenses per case (72 clients)	£8,640
Admin staff salary costs	£600
Supervision of counsellors	£500.00
Leaflets, advertising, liaising with schools	£60.00
Total	£10,000
Project Income Please list how the project shall be funded	
Grants and donations (Shrewsbury Town Council)	£10,000
NB. Less funding will cause fewer children to be supported now that Shropshire Council funding has been withdrawn.	£
	£
	£

	£
What is the difference? This should be the same as the amount of Grant you are applying for	£10,000

Q13 Covering a Shortfall

If the Town Council makes an offer less than the amount requested, how will that impact on the Project and how will you cover the shortfall?

The number of children who require counselling support will unfortunately have to be reduced accordingly. We continue to try to raise monies through fundraising events and, if successful, all monies raised will enable more children to be seen free of charge.

Q14 Sustainability

What plans do you have in place to ensure that your organisation becomes more sustainable and less reliant on grant funding, particularly from the Town Council?

Crane Quality Counselling works hard to raise monies to be self-sufficient. However, there are other, regular bills to be paid – rent, insurance, telephone, IT, Utility bills to name but a few. As a small, local charity we work extremely hard to be self-sufficient and are now in our 8th year of maintaining our services to children and the whole family.

Your Accounts

Q15 Please provide the following details from your most recent annual accounts
Please see attached accounts

Total Income	£
Less Total Expenditure	£
Surplus / Loss	£
Savings (Reserves, Cash, Investments)	£

Please provide a copy of your most recent annual audited accounts or, in the case of newly established organisations, the projected income and expenditure for the next twelve months.

You need to include these documents with this application

Account Details

Q16 Please provide your bank or building society account details

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. **These people should not be related.**

Account name: [REDACTED]

Sort Code: [REDACTED] Account Number: [REDACTED]

Bank/building society name: [REDACTED]

Bank/building society address:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Who are the signatories and what position do they hold in your organisation?

- | | | |
|---|-------------------------|--|
| 1 | Name: [REDACTED] | Position: Co- Chief Executive Officer |
| 2 | Name: [REDACTED] | Position: Co-Chief Executive Officer |
| 3 | Name: [REDACTED] | Position: Finance (Hollies Bookkeeping) |

Any Other Information

Q17 Any other information which you consider to be relevant to your application.

We do hope your Committee will look favourably at our application – you will see by the amount of work we have undertaken and continue to do so, that the need for this service remains at an all-time high. Thank you.

Declarations

Q18 Declaration

Please give details of a senior member of your organisation.

For example, this may be your Chairperson, Treasurer or Secretary. They must read the application and sign below. (This must not be the main contact name in Q1).

I confirm, on behalf of Crane Quality Counselling.

That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.

I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the basis that if successful, the organisation will be bound to use the grant only for the purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.

Post held in organisation: [REDACTED]

Title: [REDACTED] First Name: [REDACTED] Surname: [REDACTED]

Organisation address:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Postcode: [REDACTED] Telephone: [REDACTED]

Signed: [REDACTED] Date:15th July 2025.....

Q19 Signature of Person Completing the Application

This must be the signature of the person named in Q1 as the main contact and not be the same person who has signed in Q18

I confirm that, to the best of my knowledge and belief, all the information in this application from is true and correct. I understand that you may ask for additional information at any stage of the application process.

Signed: [REDACTED] Date: 15th July 2025

Checklist

- | | |
|---|--------------------------|
| 1. Have you answered every question? | ☐ |
| 2. Have all signatures been completed? | ☐ |
| 3. Have you included a copy of your constitution? | ☐ |
| 4. Have you included a copy of your most recent audited accounts? | ☐ |
| 5. Please state any supporting documents you are submitting: | ☐ |

Please return your completed application form to:

**Town Clerk
Shrewsbury Town Council
Livesey House
7 St John's Hill
Shrewsbury
SY1 1JD**

Telephone: 01743 281010
Email: Helen.ball@shrewsburytowncouncil.gov.uk