

Grant Application Guidance Notes

The Grants Committee accepts applications for financial help from physically disabled people resident in Edinburgh and the Lothians.

When applying for funding towards the cost of specialised equipment we would ask that the applicant has been assessed using the equipment prior to the application being submitted.

WE DO NOT GIVE GRANTS FOR THE PURCHASE OF POWERCHAIRS OR SCOOTERS.

GRANTS TO PAY ROUTINE BILLS OR DEBTS WILL NOT BE CONSIDERED

Subject to exclusions, grants can be for anything not covered by statutory sources.

Applicants requesting computer equipment may be subject to an assessment by Ecas.

Wherever possible Ecas purchases goods and holidays direct from the supplier. Full details should be stated on the application form. Funding will not be given for small pieces of domestic equipment.

RETROSPECTIVE PAYMENTS WILL NOT BE MADE

HOLIDAY APPLICATIONS

Applicants are warned not to make any commitment, financial or otherwise, prior to hearing the outcome of their application.

Please allow 8 weeks in advance of departure date when submitting an application form. Late applications may not be considered. Holidays may not be funded in full. Ecas strongly recommends you insure your holiday.

RETROSPECTIVE PAYMENTS WILL NOT BE MADE

Medical Criteria

Ecas follows the EHRC guideline that: "You are disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities.

- 'substantial' is more than minor or trivial, e.g. it takes much longer than it usually would to complete a daily task like getting dressed
- 'long-term' means 12 months or more, e.g. a breathing condition that develops as a result of a lung infection."

However, please remember that Ecas only provides support to people who have a physical disability. We regret that the following conditions do not meet the criteria for the Ecas Grants scheme:

Arthritis, back pain, cardio-respiratory conditions, obesity, psychiatric disorders, learning difficulties, behavioural disorders, developmental delay, Down's syndrome, autism, visual or hearing impairment, cancer, diabetes, HIV and epilepsy.

Further information overleaf

Additional information is available by contacting Ecas:

Tel: 0131 475 2344/ 07500 221618

Email: hello@ecas.scot

Website: www.ecas.scot

Ecاس Covid Relief Grant Fund

Who can apply? We accept applications from physically disabled people resident in Edinburgh and the Lothians.

How can I apply? You can download an application form from our website www.ecas.scot, phone 0131 475 2344/ 07500 221618 or email hello@ecas.scot

What will funding be considered towards? Applications should be for something that will enhance the applicant's life. Past grants have been for: washing machines, fridge-freezers, cookers, lap-top, furniture, car adaptations, sheds, iPads, holidays, flooring. Funding will not be given for small pieces of domestic equipment. Grants cannot be made retrospectively. Grants to pay bills or debts will not be considered. Any application for funds for maintenance or repair for battery packs, power chairs or scooters must be accompanied by evidence of third party insurance. Grants for power packs retrofitted to manual wheelchairs considered only if sponsored by an occupational therapist (see Appendix 1, last page of grant form). Subject to exclusions, grants can be for anything not covered by statutory sources.

How much can I apply for and how often? Standard grants of up to £750 for grants are considered; successful applicants must leave a gap of at least 2 years before reapplying. Mid level grants of up to £1000 are considered; successful applicants must leave a gap of at least 3 years before reapplying. Higher grants up to £1500 are considered; successful applicants must leave a gap of at least 4 years before reapplying. The maximum holiday grant award is £1,500. Grants above £1,500 will be considered on an exceptional basis.

Can applications be simplified? Some sections can be omitted by people in receipt of certain benefits, provided they enclose a copy of their award letter. If in doubt contact the Ecاس office.

How long does an application take? Whenever possible decisions will be given within 8 weeks of receiving all the paperwork. If your form is incomplete or lacks enclosures we will need to resolve the issues and this may take some time but we regret that we cannot process any grant application until all relevant information is received.

Who can sponsor the application? Applications that require a sponsor may be sponsored by social workers, health visitors, district nurses, support workers, occupational therapists, physiotherapists or family doctors. If in doubt please call the Ecاس office to check. Applications for power packs must be sponsored by an occupational therapist (see Appendix 1, last page of grant form).

For a full list of frequently asked questions visit www.ecas.scot or call the office and a copy can be posted out to you.

Other Ecاس Services

Activities In person group sessions offer adults the chance to improve their health, wellbeing and learning through: art, craft, computing, yoga, taichi, music for fun, reading and creative writing. Activities cost £2.30 per session, new members can try an activity for two weeks before signing up. Some activities can be accessed online via zoom. Available across Edinburgh and Lothian.

Befriending Service Matches individuals based on hobbies and interests. Our service provides social support for adults isolated due to a physical disability across the City of Edinburgh.

For information on any Ecاس activity or an application form visit:

www.ecas.scot or email hello@ecas.scot or tel 0131 475 2344/ 07500 221 618

Grant Application Covid Relief Fund

Case



Ecas, Norton Park, 57 Albion Road, Edinburgh, EH7 5QY

TEL: 013 4715 2344/07500 221618 WEBSITE: www.ecas.scot

EMAIL: hello@ecas.scot

Applicants are warned not to make any commitment, financial or otherwise, prior to hearing the outcome of their application. Regrettably, Ecas does not have the resources to approve all the applications received, or to wholly fund many applications.

Personal Details (Compulsory)

Title *Mr/Mrs/Miss/Ms/Other*delete as appropriate

Fore name

Surname

Date of birth*

*(We need your date of birth in case we need to contact your doctor in relation to your application)

Address
(including post code)

Telephone
Number

Amount requested from Ecas
(For power packs, see
Appendix 1)

£

Total Cost

£

The grant would be used for the following – give as much detail as possible
If possible enclose a quote or a printout showing details of the item(s)

HOLIDAY APPLICATIONS – PLEASE GIVE THE FOLLOWING INFORMATION

Date of departure

Holiday Destination

Income – If you receive Income Support (IS), Pension Credit (PC) or Housing Benefit (HB) do not complete this page – instead send a copy of your most recent award letter

Only complete if you do not receive IS, PC or HB (see above)

Please give all amounts in weekly figures

	Applicant		Other Household Members	
	£	P	£	P
Please give amounts in weekly figures				
Earnings				
Attendance Allowance, DLA or PIP				
Inc ap ac ity Be ne fit				
C o unc il T ax Be ne fit				
Ho using Be ne fit				
Jo b se e ke rs Al lo wa nc e or E mp lo ym en t Su pp or t Al lo wa nc e				
Wo rki ng T ax Cr e di t				
Pe ns ion (re ti re me nt, Wi do ws or Oc cu pa ti o na l)				
Ch il d Be ne fit				
Gu ar di an' s Al lo wa nc e				
Ch il d Su pp or t Ma in te na nc e				
Inv e st me nt in co me				
Other – please specify				
Total				

Expenditure Please give all amounts in weekly figures –

only complete if you do not receive IS, PC or HB (see above)

	Applicant		Other Household Members	
	£	P	£	P
Mortgage/rent				
Council Tax				
Gas & Electricity				
Telephone				
Food/Household				
Insurance				
Hire Purchase				
Rental (tv, video, etc)				
Loans				
Travelling Costs (Give details)				
Cable/Satellite/Internet/Television				
Child Maintenance				
Pension(s)				
Other (Please give details below)				
Total				

Details of impairment (Compulsory)

Please explain the applicant's impairment, the effect on the applicant and thus how they meet the medical criteria of Ecas as explained in the accompanying guidance notes.

Medical certificate:

This does not need to be completed if the applicant encloses a copy of the most recent DIA (Higher Rate) award letter. For ALL other applications including those awarded PIP (Enhanced Rate), this section must be completed by a GP or hospital doctor.

Please give details of the effects of the applicant's main disabling condition including duration and severity, plus any other factors relevant to this application. We regret that the following conditions do not meet the criteria for the Ecas Grants scheme: **Arthritis, back pain, cardio-respiratory conditions, obesity, psychiatric disorders, learning difficulties, behavioural disorders, developmental delay, Down's syndrome, autism, visual or hearing impairment, cancer, diabetes, HIV and epilepsy.** Please see the guidance notes on the front of the application form for more information.

Doctor's full name
(please print)

Doctor's official stamp

Doctor's signature

Date

Notes to applicants

- Please allow up to 8 weeks for administration of a grant application
- Ecas will normally purchase the item direct from the supplier. Ecas will not give funds directly to the applicant.
- If Ecas is only partly funding an item Ecas will not release the funds until the rest of the money has been raised.

Sponsor's report – A requirement for all applications relating to power packs (to be completed by occupational therapist). Not required for non power pack grants if the applicant encloses an award letter for PC/ IS/ HB AND for DIA (Mobility at HIGHER rate). In all other cases including those awarded PIP (Enhanced Rate), this section is to be completed by the qualified professional supporting the application (e.g. social worker, health visitor, occupational therapist, community care assistant or physiotherapist). Please read the guidance notes carefully before completing. If you wish to submit information in support of this application, please do so on a separate sheet.

I am satisfied that the particulars on this form are correct, that the applicant has the impairment described above, that the impairment meets the Ecas medical criteria and that this grant would be an appropriate use of charitable funds.

Name of Sponsor (please Print) Mr/ Mrs/ Miss/ Ms

Organisation and Position

Address (including post code)

Telephone Number (including Code)

email

Sponsor's Signature

Date

Statements by Applicant (or parent or guardian if applicant is under 16) (Compulsory)

1. I accept the Client Data Protection Notice:
Ecas will use the information that you supply on this form, including information about your health and finances, to assess your eligibility for our services and to administer our client records. By signing and returning this form, you consent to Ecas processing your data for those purposes. You also consent to us contacting your doctor (or other medical professional whose details you provide) and sponsor for further information in relation to your application.
2. I confirm that the information I have provided is accurate to the best of my knowledge.
3. **(Delete if inappropriate) I last received a grant from Ecas in** **(MM/YYYY).**
4. **Children's capacity statement:** Your parent or guardian must sign this form on your behalf if you are under 16 years of age.

Applicant's or Parent's Signature

Date

APPENDIX 1: Occupational Therapists Sponsoring an Application for a Power-Pack.

Before a grant application is submitted, please agree to the following conditions listed below:

- Any grant applications for power-packs retro fitted to a manual wheelchair must be for those operated by a trained 3rd party family member or wheelchair attendant only.
- All applications must be sponsored and signed off by an occupational therapist. Only power-packs supplied by Ecas' preferred supplier will be considered. In most cases the TGA Powerpack Duo/HD will be the preferred power-pack option.
- Before a grant is submitted, attendants/family members responsible for pushing the chair with the power-pack attached must either trial equipment at Longstone, the Disabled Living Centre in the SMART building at Astley Ainslie Hospital or any other Support and Rehabilitation Service out-with Edinburgh. Users to demonstrate the ability to carry, attach, charge, disassemble the power-pack to/from the manual chair. Users also to demonstrate safe operation.
- For applicants not assigned an occupational therapist: Trials to be arranged at the Disabled Living Centre in the SMART building, Astley Ainslie Hospital or other Support and Rehabilitation Service out-with Edinburgh. An occupational therapist based at the SMART building or other Support and Rehabilitation Service must sponsor the application noting users' ability to carry, attach, charge, disassemble the power-pack to/from the manual chair. Users to also demonstrate safe operation.
- The engineer delivering the power-pack from the supplier is required to witness the family member/attendant's ability to carry, attach, operate, charge, disassemble the power-pack.
- Agree that Ecas will accept no liability after the power-pack has been delivered to the grant recipient.
- The applicant takes responsibility for ongoing maintenance and repairs from the date of delivery. However, 12 months' insurance which covers roadside recovery, accidental damage, theft, liability and legal fees is included (terms and conditions apply). Continuation of insurance by the applicant after 12 months is strongly recommended.
- **Maximum cost for TGA Power-Pack Duo including delivery, installation and insurance is £999. Please input this amount on page 3 of grant application if this model is chosen.** Please speak to Ecas grants administrator directly regarding other power-pack models.

Applicant Details (Information needed to confirm powerpack requirements)

Name: Height: Weight: Age:

Manual Wheelchair Make/Model: Wheelchair prescribed by Health and Social Care Partnership (HSCP): Yes/No
Permission from HSCP to fit power-pack to wheelchair: Yes/No/NA

As the designated Occupational Therapist for the applicant, I can confirm that the applicant has agreed to the above information and they are happy to proceed with their application.

Occupational Therapist

Name: Date:

Signed: