

**The ROYAL Borough of Greenwich**

**APPROVED LIST OF PROVIDERS FOR HOLIDAY ACTIVITIES AND FOOD SERVICE**

**(“HAF Providers”)**

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Provider Application Form

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**August 2023**

1. **Application form** 
   1. Applicants can apply to deliver one or more of the listed categories. Please select what types of provision you are applying for on the application form (section 6). Successful applicants can be assigned to one or more types of provision. Clarifications may also be sought in writing via email.
   2. Please type your answers in the boxes provided, expanding as necessary. You should complete all sections.
   3. See Appendix 1 for the complete scoring guidance that will be used by evaluators to score this Provider Application.
   4. Provider details (3.1, 3.2) will not be scored however failure to answer any of the questions or include documents required will mean that your application will not be assessed. We may contact you to clarify.
   5. Supporting policies as outlined in 3.4 must be submitted with your application for the Approved Provider List.
   6. Answers to section 4 will be scored out of 5, see Appendix 2 for details on the scoring for this question.
   7. Section 5 should be completed using the Excel spreadsheet provided in the application pack, titled “APL Application Training”. Please submit this along with your application. Answers for section 5 will receive a score of up to 10 based on the number of trained staff, and relevance / quality of training.
   8. Applications will be evaluated based on 100% quality. Please ensure that your responses are succinct and only include relevant information to support your application, and complete declaration that you will provide proposed quality of service at Council’s prices as set out for each category.
   9. Applications will be evaluated, and successful applicants will be invited for an interview. The evaluation process is anticipated to take up to five weeks. You will receive an acknowledgement email when the HAF team receive your application. You will be notified about the outcome of your application within five weeks from the date of submission of completed application.
   10. For those organisations who are applying outside the timetables first round then you will receive an acknowledgement email upon receipt of your application and notified when the next evaluation process will take place. The evaluation process to join the Approved Provider List will only take place twice per year.
2. **Process Timetable**  
     
   The following documents should be submitted as part of your application to the Approved Providers List:

* Provider Application Form
* APL Application Training spreadsheet
* All Policies and documents (Section 3.4)
* Winter 2023 bid (separate form, see website)

These documents should be completed fully and submitted to:   
[holiday-programme@royalgreenwich.gov.uk](mailto:holiday-programme@royalgreenwich.gov.uk)**Applications are due Friday 15th September 2023, 5pm**   
  
Applications received after the deadline will not be accepted for this round.

1. **Provider details**

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| **3.1 Provider details** | **Answer** |
| Name of organisation/provider |  |
| Legal status of organisation;  (e.g. charitable company limited by guarantee, private limited company) |  |
| Registered company address |  |
| Registered company number  (if applicable) |  |
| Registered VAT number  (if applicable) |  |

|  |  |
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| **3.2 Contact details** | |
| Provider contact details for enquiries about this application. | |
| Name |  |
| Phone |  |
| Mobile |  |
| E-mail |  |

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| **3.3 Ofsted registration if applicable (please tick the relevant box)** | | |
| 3.3.1 | Registration with Ofsted | ▢ Yes  ▢ No **(If No, please provide details)**  Please provide the registration number and date of registration: |
| 3.3.2 | Type of Ofsted Registration | Please list registers e.g. Childcare Register, Early Years Register, Voluntary Register |
| 3.3.3 | Ofsted grade: | ▢ Outstanding  ▢ Good  ▢ Met  ▢ Requires Improvement  ▢ Not Met  ▢ Inadequate  ▢ Not yet inspected |
| 3.3.4 | Ofsted report | Link to latest Ofsted report where applicable: |

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| **3.4 Policies and Procedures: Please submit all documents to** [**holiday-programme@royalgreenwich.gov.uk**](mailto:holiday-programme@royalgreenwich.gov.uk) **along with your application.** | | |
| 3.4.1 | Does your organisation have a child protection / safeguarding policy? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.2 | Does your organisation have a named, qualified first aider? | ▢ Yes (Please provide name)  ▢ No (If No, please provide details) |
| 3.4.3 | Does your organisation have a Health and Safety Policy, including emergency procedures? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.4 | Does your organisation have safer recruitment procedures? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.5 | Do your staff and volunteers have a current DBS (Disclosure and Barring Service)? | ▢ Yes (Please provide date of issue and DBS certificate number for each staff member and volunteer working on the programme in a separate document (Word or Excel)  ▢ No (If No, please provide details) |
| 3.4.6 | Does your organisation have an updated risk assessment, (including covid-19 risk)? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.7 | Does your organisation have public liability insurance? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.8 | Does your organisation have an Equality and Diversity policy? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.9 | Does your organisation have a Whistleblowing policy? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.10 | Does your organisation have a Data Protection Policy and Procedure (GDPR)? | ▢ Yes  ▢ No (If No, please provide details) |
| 3.4.11 | Does your organisation have a Food Safety Management System? | ▢ Yes  ▢ No (If No, please provide details) |

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| **3.5 Geographical cover and venue** | | |
| **3.5.1** | Please list the geographical areas you currently cover and could potentially cover? (e.g. Charlton and Blackheath). If you cover more than one area, please outline all areas. | Please list: |
| **3.5.2** | Do you have any secured permanent venue / venues. | Yes ▢ No ▢  If Yes, please provide address of venue(s):  If No, please provide details of the usual venues you work within: |

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| **3.6 Additional features** | | |
| **3.6.1** | **Please confirm whether your organisation/ provision has the following features** | |
| A | Is your organisation registered as a Food Business with any locations / venues in Greenwich? | Yes ▢ No ▢  If Yes, please provide details, such as your Food Hygiene Rating Score and permanent locations you are registered with:  If you have been registered with a non-permanent venue previously, please provide details: |
| B | Do you have two staff who currently hold Level 2 Food Safety and Hygiene certificates? | Yes ▢ No ▢  If Yes, please provide their names: |
| C | Do you have two staff who currently hold Allergen Training certificates? | Yes ▢ No ▢  If Yes, please provide their names: |

1. **Experience**  
     
   Please detail your organisation’s experience delivering holiday activities or other out of school programmes for children and young people. This question will be scored out of 5 and evaluated as described in section 1.5. See the scoring guidance for more information on what to include in this answer.  
     
   Please type your answer in the box provided.

**Do not write more than 700 words**

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1. **Training and specialisms**   
     
   Please provide details about relevant training your organisation’s staff and volunteers have received in the last three years. You should only include training for the specific staff who would be involved in the delivery of HAF services and those still employed by your organisation.

You should provide the training title, number of staff, and date of completion for A to F. Please use the Excel spreadsheet in the application package to complete this section

1. Relevant training for Physical Activity or Sports
2. Relevant training for nutrition, food preparation or food safety
3. Relevant training for enrichment activities
4. Relevant training for safeguarding including the Designated Safeguarding Lead (DSL)
5. Relevant training for signposting and referrals
6. Any other relevant training
7. Please list any relevant specialism e.g British Sign language, Forest School trained, support for children with special educational needs, disabilities or medical needs etc.
8. **Categories - Please mark all categories you will be applying for. Please ensure you have read the definitions for** **targeted and specialist SEND (Appendix 4 of the Guidance Notes) prior to selecting the category / categories you are applying for.**

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| --- | --- | --- | --- | --- |
| **Category** | **Description** | **Description** | **Confirm the hourly rate you can deliver for? (****maximum values are shown below)** | **Please indicate the category/categories you are applying to deliver** |
| **1** | Generic HAF provision | The provision of planned HAF services for school aged children 4-16 years, who are in receipt of FSM.  This provision includes service for CYP with no additional needs and those who may have targeted SEND requirements, but no children with specialist SEND. | £\_\_\_\_\_\_\_\_\_\_/ hr  The maximum hourly rate is £7.50/hr. | Yes ▢ No ▢ |
| **2** | Generic HAF provision with 1-5 spaces for specialist SEND | The provision of planned HAF services for school aged children 4-16 years, who are in receipt of FSM.  This provision includes mainly generic HAF provision for CYP with no additional needs and targeted SEND, but the organisation has capacity and skill to accept 1-5 CYP who have specialist SEND requirements. | Generic  £\_\_\_\_\_\_\_\_\_\_/ hr  SEND Specialist  £\_\_\_\_\_\_\_\_\_\_/ hr  The hourly rate is a maximum £7.50/hour for generic and targeted provision.  The hourly rate is a maximum £25/hour for specialist SEND provision | Yes ▢ No ▢ |
| **3** | HAF provision for CYP with high level SEND | The provision of planned HAF services for school aged children 4-16 years, who are in receipt of FSM.  This provision only accepts CYP who have either targeted or specialist SEND requirements. This provision would not accept any CYP who have no identified SEND.  Maximum spaces = 20 | Generic  £\_\_\_\_\_\_\_\_\_\_/ hr  SEND Specialist  £\_\_\_\_\_\_\_\_\_\_/ hr  The hourly rate is a maximum £7.50/hour for generic and targeted provision.  The hourly rate is a maximum £25/hour for specialist SEND provision. | Yes ▢ No ▢ |

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| **Declaration** | |
| **Declaration to be signed by the applicant** | |
| I confirm that, to the best of my knowledge, the information given in this document (and any supporting information) is correct. I understand that the Council will use the information to assess my service in order to develop the Approved List of HAF Providers for HAF Service. | |
| **Signed (applicant)** |  |
|  |  |
| **Date** |  |
| **Email Address** |  |
| **Phone number** |  |

**Appendix 1: Provider Application Questions and Scoring Guidance**

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| **Section and Question** | **What we are looking for** | **Possible Score** |
| 3.1 Provider details | Name of organisation, legal status, registered company address, company number and VAT (if applicable) | N/A – will not be scored |
| 3.2 Contact details | Name, phone, mobile, e-mail | N/A – will not be scored |
| 3.3 Ofsted registration | Are they Ofsted registered? If yes, do they have a rating of good or outstanding? | 2 |
| 3.4.1 Safeguarding Policy | Do you have a Safeguarding Policy?  Does the safeguarding policy include everything that is required as per Royal Borough of Greenwich guidance?  Is it up to date? Does it include the date for review?  Does it include the details of Designated Safeguarding Lead? | 5  Failure to score a minimum of 3 out of 5 on this policy will result in exclusion from consideration for funding |
| 3.4.2 - 3.4.11 Policies and Procedures | How many of the required policies and procedures have they submitted evidence for? If they haven’t submitted, have they given a reasonable explanation? | 10 |
| 3.5.1 Geographical cover | Is the venue in a place of high FSM levels? | N/A - will not be scored |
| 3.5.2 Venue | Do they have a secured venue(s)? If they don’t have a confirmed venue, have they provided sufficient details about how they plan to secure one? | 1 |
| 3.6.1 A Food Business Registration | Are they currently registered as a food business in Greenwich at a Greenwich venue? Do they have a Food Hygiene Rating scored of at least 4? | 2 |
| 3.6.1 B Food safety training | Do they have two named staff with level 2 food safety training? | 2 |
| 3.6.1 C Allergen training | Do they have two named staff with allergen training? | 2 |
| 4 Experience | Experience of offering a range of activities both venue and community based that supported CYP? Have they given examples and information about previous experience? Have they given examples of types of activities? Do they have experience of skills development which support a wide range of CYP? Evidence of using parental and CYP feedback to inform service development?  (Scored 0-5 using guidance in Appendix 2) | 5 |
| 5.A | Relevant training for Physical Activity or Sports | Up to 10 |
| 5.B | Relevant training for nutrition, food preparation or food safety | Up to 10 |
| 5.C | Relevant training for enrichment activities filled in on the spreadsheet. | Up to 10 |
| 5.D | Relevant training for safeguarding | Up to 10 |
| 5.E | Relevant training for signposting and referrals filled in on the spreadsheet. | Up to 10 |
| 5.F | Any other relevant training filled in on the spreadsheet. | Up to 10 |
| 5.G | Any relevant specialisms filled in on the spreadsheet. | N/A will not be scored |
| 6 Categories | Have they ticked at least 1 category? | N/A - will not be scored |
| **Total possible score** |  | **89** |

**Appendix 2: Scores used for section 4 on Experience in the application form**

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| --- | --- | --- |
| **Score** | **Acceptability** | **Participant response demonstrates** |
| 0 | **No Response**  (Unacceptable) | * No response received * The response does not address the questions posed |
| 1 | **Weak**  *(Serious Reservations)* | A response which is unacceptable or contains shortcomings; e.g. shows very poor understanding of the Council’s objectives, provides insufficient or contradictory evidence for evaluation, does not address the stated requirements. Has insufficient evidence that the specified requirements can be met. Significant omissions. |
| 2 | **Poor**  (Minor Reservations) | A response which shows some understanding of the requirements but does not address key issues; e.g. proposals do not address all key criteria, shows only a basic understanding of the project requirements, evidence is vague, not enough evidence of experience in the relevant sector. Submission has some minor omissions against the specified requirements. Proposal achieves basic minimum standard in some respects but unsatisfactory in others. |
| 3 | **Acceptable**  (Meets expectations) | The information is wholly acceptable, and the information provided fulfils the normal requirement/expectation; e.g. proposals demonstrate clear understanding of the Council’s requirements, clear evidence of understanding and the proposal is acceptable. |
| 4 | **Good**  (Above Expectations) | The information exceeds normal expectations. The proposal submitted provides good evidence that the specified requirements can be met. Full and robust responses. |
| 5 | **Excellent** (Outstanding) | The information is exceptional or exemplary in relation to the Criterion being scored; e.g. proposals consistently going beyond the needs of the project, evidence of understanding clear and consistent throughout the proposal. Proposal submitted provides strong evidence that the specified requirements can be met. Added value is demonstrated. |

**Appendix 3: Greenwich levels of households on FSM**

  
