



Asset Based Community Development (ABCD) Round 1 2022-2023

Progress Update

Welcome to the ABCD Projects interim monitoring form

Thank you for taking the time to complete this form.

Many projects have been unable to run as planned due to the Covid-19 pandemic. Some projects have been unable to engage with users or carry out any activities. However, your update will still be useful, and we appreciate you taking the time to provide it.

Before completing the survey please ensure you have all of the required information to hand as you will not be able to leave the survey then return at a later time. This includes any photos or other files which you wish to upload. When completing the survey, please ensure that you provide a response for any question which is marked with an * as these are mandatory questions. This is an interim report, it is OK for you submit rough numbers of people who've used your project.

If you have been unable to run you project at all - for text based responses, if there is nothing you can say please simply state the reason why. For number based responses please simply put a 0 (zero) in the boxes provided.



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About you and the project

Please tell us the basic details about your project and the person acting as the main contact

* 1. Name of your organisation? Please provide the name of the organisation running this project.

* 2. Name of the project which received this funding.

What name did you give the specific project receiving this funding?

* 3. Contact name? Please tell us the full name of the person to contact regarding this project

* 4. Contact telephone number? Please provide a telephone number for the main contact for this project.

* 5. Contact email address? Please provide the email address for the main contact on this project.

6. Roughly when did you receive the ABCD small grant?

Please choose a date from the calendar

Date

* 7. Which Community Partnership Area(s) does your project cover? You may select more than one.

- Together 4 Health CP4
- Central 5 CP5
- Horton and City Health Collaboration CP6
- WOW CP7
- Affinity Care CP8
- Craven
- Wharfedale

* 8. Which round of funding was this part of?

In most Community Partnership areas there have been more than one round of funding, please say in which round you received this funding

- Round 1
- Round 2
- Round 3
- Round 4
- I don't know



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Evaluation

Please let us know how you feel the project went, who benefited from your project and what impact it had on people. If you have photos, videos or other media you will be able to include this below.

* 9. How is your project going?

Please write here what you hoped to achieve and how the project is going compared to how you hoped.

10. Here is where you can upload files which support your evaluation. Be as creative as you like, why not use photos, video, include a report from the local media etc

You can only upload one file here.

No file chosen

* 11. Do you have more files to upload?

Yes No



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More files to upload

Here you can upload more files if you wish

12. Do you have more files to upload? You can add another one here.

No file chosen

13. Do you have more files to upload? You can add another one here.

No file chosen

14. Do you have more files to upload? You can add another one here.

No file chosen

15. Do you have more files to upload? You can add another one here.

No file chosen



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Monitoring information

* 16. How many people have you reached so far? This is the number of people who have benefited from your project.

This may be in person, for example people attending a group you run, or indirectly, such as people using a public space which you manage.

If you have been unable to reach any people put a "0" in the box

* 17. Please enter the numbers of people against how would they describe their gender, in each box. Please only put what people have told you themselves.

If so far you've had no people identifying as one of the genders (or stating that they prefer not to say) please put a 0 (zero) in this box

Male

Female

Prefer not to say

* 18. Please enter the numbers of people against their self-reported age ranges. Please only put what people have told you themselves.

If so far you've had no people within an age range enter a "0" (zero) in the box

0-10 years	<input type="text"/>
11-18 years	<input type="text"/>
19-30 years	<input type="text"/>
31-50 years	<input type="text"/>
51-65 years	<input type="text"/>
65+ years	<input type="text"/>

* 19. What methods have you used to enable people to report the impact of this project on their health and well-being? For example, this might be via a questionnaire, verbally when you are providing support or regular monitoring done by you.

Please tell us here which methods you are using. If you have not been able to engage with any people please say why.

* 20. What are people saying?

Tell us what people have said so far about how the project has improved or affected their health and wellbeing.

If you have not been able to engage with any people please say why.

21. Is there anything else you would like to say?

Please add any final thoughts below.



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Finally

* 22. We have just introduced this online form for providing feedback on your ABCD project. We would like to know how difficult or easy you found using the form?

Please rate the form using the star ratings below on a scale of 1 to 5, with 1 star being very difficult to use and 5 stars being very easy to use. There is also a space to add comments if you wish.

Very difficult to use	Quite difficult to use	Neither easy nor difficult to use	Quite easy to use	Very easy to use
★	★	★	★	★

Please say more if you wish



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Thank you, please click "Done" to submit your form.

Thanks for completing this ABCD evaluation form. Your feedback will help us to tell funders how the grant money was used and the impact it had on local communities.

If you would like to contact with The VCS Alliance regarding this project please email David Holt (Project Manager) david@thevcsalliance.org.uk