

#### **GRANT MAKING POLICY**

The purpose of this policy is to set out the principles, criteria and processes that govern Greenwich Hospital's grant awards.

A grant is defined as a financial award made by Greenwich Hospital (GH) from its funds to support charitable activities, as authorised by Greenwich Hospital's objects and our governing legislation.

Greenwich Hospital follows the agreed Cobseo Funding Principles also adopted by the Royal Navy and Royal Marines Charity, the Army Benevolent Fund and the Royal Air Force Benevolent Fund:

#### 1. Evidence of need.

- Evidence of the need, and a beneficiary-centric approach to delivery that prioritises support for the beneficiary over which organisation should respond, and targets those most in need.
- Demonstrate the importance of the charitable service to the sector, both in terms of direct support to beneficiaries, and in substituting for gaps in statutory provision.
- Whether regional or national delivery is envisaged, and the rationale if replicating services that are already being provided noting we look to the state as the first choice for delivery.
- Consideration of the delivery options and rationale for the proposed way forward.
- Whether the need is temporary or enduring, and the likely impact (eg alleviating, resolving or preventing).
- Any risk of reputation damage to the sector.

# 2. Impact and effectiveness of delivery.

- Evidence of cooperation, partnerships, efficiency and rationalisation, particularly where there are other organisations operating in the same sector.
- Evidence of plans being in place to ensure beneficiary needs are met, including on a sustainable basis where the need is enduring.
- Evidence of the effectiveness of the proposed services (eg evaluation processes in place).
- Engagement with, and adherence to, sector support infrastructure where necessary (eg Casework Steering Group tenets for caseworking).

# 3. Efficient use of resources and an effective organization.

- Evidence of financial sustainability, both now, and with developed plans in place to sustain services in the longer term.
- Complementary fundraising arrangements are in place.
- Engagement with other funders to bring in additional investment that will enhance support to beneficiaries.
- An effective reserves policy is in place. This is assessed with a high degree of context and subjectivity. Reserves need to be sufficient, but not excessive. Liquidity can be as important a factor as value.

# 1. Objects of Greenwich Hospital

Greenwich Hospital is a Crown body providing charitable support to serving (including reserve) and retired personnel of the Royal Navy (including the Royal Marines and Royal Fleet Auxiliary) and their families. Its objects arise from the founding charter of 1694; these are interpreted permissively and broadly by the Greenwich Hospital Director and Advisory Board for the present day:

# "The reliefe and support of seamen serving on board the Shipps or Vessells belonging to the Navy Royall who by reason of Age, Wounds or other disabilities shall be uncapable of further Service at Sea and being unable to maintain themselves".

This is interpreted to permit funding to serving and former serving personnel in **acute need** for:

- The prevention or relief of poverty;
- The advancement of health or the saving of lives;
- The relief of those in need, by reason of youth, age, ill-health, disability, financial hardship or other disadvantage.

# "And for the Sustentation of the Widows and the Maintenance and Education of the Children of Seamen happening to be slain or disabled".

This is interpreted to permit funding to families (spouses/partners and children), particularly through funding of **education** (including vocational training) for:

- The prevention or relief of poverty;
- The advancement of education;
- The advancement of citizenship or community development;
- The relief of those in need, by reason of youth, age, ill-health, disability, financial hardship or other disadvantages.

# "Also, for the further reliefe and Encouragement of Seamen and Improvement of Navigation."

This is interpreted to permit funding to enhance the **welfare** of serving and former serving personnel, their partners and families, and for the operational effectiveness of the Royal Navy:

- The advancement of citizenship or community development;
- The advancement of amateur sports;
- The promotion of religious or racial harmony or equality and diversity;
- The promotion of the efficiency of the armed forces of the Crown.

#### 2. Definition of Need

All grants are made in response to evidenced need. Need, in respect of a Beneficiary or Beneficiaries, is defined by one or more of the following attributes:

- Where there is a personal or collective disadvantage when compared with non-armed forces citizens due to military service as envisaged or referred to within the Armed Forces Covenant.
- Where someone is suffering from an impediment or other challenge, including but not exclusively: mental and physical ill-health, isolation and loneliness, old age, bereavement, addiction, lack of education, challenges gaining employment (including self-employment), homelessness and relationship breakdown.
- Where there is justification for the provision of academic or empirical evidence-based research into the needs set out above in order to better inform understanding of need and funding decisions.

#### 3. Greenwich Hospital Grant Making Governance

- 3.1 The Secretary of State for Defence has ultimate responsibility for all grant-making decisions, which have been delegated to the Director of Greenwich Hospital.
- 3.2 The Advisory Board advises and assists the Director of Greenwich Hospital by offering expert professional advice, concerning grant-making and joint funding partnership agreements. Members of the Advisory Board can recommend an approach to all grant-making decisions in line with GH's charitable purposes or propose restrictions in funding agreements.
- 3.3 Decision-making recommendations lie with the Advisory Board, its Charity and Education subcommittee or GH staff within Greenwich Hospital's agreed framework of delegation in relation to grant-making.
- 3.4 Each decision-making level reserves the right to apply conditions to any grant.
- 3.5 The decision-making levels reserve the right not to approve any recommendation to award a grant if they determine that the resulting award will not be charitable, falls outside the charity's priorities or criteria for funding, would conflict with GH's stated policies, would not deliver appropriate outcomes or might damage its reputation.
- 3.6 Those within the decision-making framework will ensure that any conflicts of interest are declared. Conflicts will be managed by ensuring that the individual with a conflict of interest refrains from involvement in any decision relating to a grant application or consideration of a monitoring or impact report. Conflicts of interest will be formally noted in the minutes of meetings where grants or monitoring/impact reports are being considered.

#### 4. Grant-making criteria

4.1 GH is a Crown body that makes grants to support activities that further Greenwich Hospital's objects. Grant awards are therefore generally restricted to organisations and individuals currently or formerly serving within the Royal Navy (including the Royal Marines and Royal Fleet Auxiliary), their partners and families. Organisations do not have to be registered charities to apply for a grant.

4.2 Greenwich Hospital awards grants in the following categories:

- **Organisational Awards**: to registered charities, Community Interest Companies, social enterprises, commercial businesses or other organisations delivering support, activities, accommodation or research as authorised by Greenwich Hospital's objects and governing legislation.
- Strategic Awards: to charities and organisations to distribute funds and deliver support on our behalf for the benefit of current or previously serving Royal Navy, Royal Marines and Royal Fleet Auxiliary, their partners and families.
- Individual Awards: to individuals who are serving or have previously served in the Royal Navy, Royal Marines and Royal Fleet Auxiliary, their partners and families.

- 4.3 There are no specified lower limits to the amount of grant that can be awarded by GH, neither is there an upper limit. Applicants may be advised of an amount to bid for.
- 4.4 Grants cannot be made retrospectively to organisations, therefore applicants are advised to only apply for projects that will start after or will still be continuing after the outcome of a decision-making process. Retrospective grants may exceptionally be awarded to individuals.
- 4.5 Whilst some grants may be paid immediately, other grants may be deferred pending recommended action or the fulfilment of a specified condition. Grants may also be withdrawn where an organisation is not able to utilise the grant within a year of confirmation of an award.

#### 5. Grant-making processes

- **5.1** Each organisation or individual applying for a grant must pass the due diligence process before a grant is approved. Due diligence consists of the following steps:
  - Confirming that an organisation undertakes eligible charitable activities and is eligible to receive a grant;
  - Confirming that any grant award will be used in line with Greenwich Hospital's objects;
  - Checking the financial health of the organisation and ensuring that a grant award will be effectively managed;
  - Checking that appropriate Governance arrangements are in place and are actively used and reviewed;
  - Confirming that the appropriate policies and processes are in place in relation to the grant application's focus;
  - Confirming that the applicant organisation's approach to Equality, Diversity and Inclusion is in line with the requirements of the Equality Act 2010 and Greenwich Hospital's policy;
  - In the case of grants awarded to individuals, ensuring that the recipient lies within Greenwich Hospital's beneficiary group and that the individual is in sufficient financial or other hardship to benefit from the award being made.
- 5.2 Once all checks have been completed, contact is made to explore the organisation's intended delivery approach, to agree on appropriate monitoring requirements and outcomes in order to ensure the measurement of the impact of the funding, and to agree on how funds may be spent. In the case of an individual, this may be done on GH's behalf by an identified and approved case working organisation.
- 5.3 Each individual will be assessed according to level of need and hardship. Education Bursary awards are usually considered on level of income and assets not exceeding £100,000 per annum, although an assessment of total disposable income may be made.
- 5.4 Each grant award will either go through a two-person approval process or be approved through one of the decision-making panels. The current responsibility for the approval of grants is as follows:
  - Grants up to £2,000 Charity and Education Co-ordinator, Grants and Data Co-ordinator
  - Grants up to £5,000 Grants Managers
  - Grants over £5,000 and up to £20,000 Charity Team (meets weekly to consider applications)

- Grants over £20,000 and up to £250,000 Charity Scrutiny Panel (meets termly to consider applications). The Grants Director is authorised to approve grants up to £50,000 out of committee by exception.
- Grants over £250,000 GH's Charity and Education Committee on behalf of the Advisory Board. Applications must first have been reviewed and recommended by the Charity Scrutiny Panel.
- 5.5 The Director has the authority to approve all grants out of committee but will delegate as appropriate.
- 5.6 In addition to responding to nominations to support individuals or organisations, GH may at its discretion invite or commission proposals or combine funds (both internally and with other grant givers) to jointly support projects or programmes that support GH's priorities.
- 5.7 Grant recipients are encouraged throughout the process to engage with GH if they need to change the use of a grant or to request an extension in the grant delivery date.
- 5.8 If a grant is not claimed within six months of the initial award, GH will seek to rescind the grant, following consultation with the applicant. Rescinding a grant would not prevent an organisation from re-applying for an award once they were able to utilise the funds, providing the resubmitted application is approved by the appropriate forum.
- 5.9 At the time of a grant award, if conditions for the grant award are stipulated, those conditions may need to be met before the release of any funds.

#### 6 Grants Programmes

Greenwich Hospital offers the following Grants Programmes:

#### 6.1 Acute need

- Individuals:
  - Acute need grants through Mosaic Case Management System when over £5,000 AND when referred by RN charities or by Royal Navy Family & People Support;
- Organisations:
  - Strategic block grants to charities making individual acute need grant payments;
  - Block grants to charities/organisations providing direct support to individuals and families in acute need:
    - To enable wounded, injured and sick beneficiaries to fulfil their potential and achieve independence if feasible;
    - To improve physical or mental health;
    - To prevent escalation of need or deterioration in health or to provide support to terminal illness and end of life care;
    - To provide support to families in need or to partners and children with health, bereavement, social or educational needs;
    - To enable financial stability and independence;
    - To maintain or enhance family relationships;
    - To improve transition to civilian life;
    - To combat addiction;
    - To continue to support those who need ongoing care post-transition to civilian life.

# 6.2 Education

- Individuals:
  - Means-tested Royal Hospital School bursaries to children of serving or former serving RN personnel attending RHS in cases of pastoral or educational need;
  - Means-tested bursaries to other schools or colleges for children of serving or former serving RN (including RM and RFA) personnel in cases of pastoral or educational need;
  - Means-tested bursaries to universities for serving personnel in conjunction with the RN Learning & Development Organisation.
- Organisations:
  - Block grants to charities/ organisations providing non-means-tested life skills and social mobility-enhancing opportunities for the children of serving personnel, enabling beneficiaries to thrive;
  - Block grants to charities or organisations providing support to service children (notably those with Special Educational Needs), schools and teaching staff;
  - Block grants to charities/ organisations providing employability and life skills-enhancing or preventative education to serving or former serving RN personnel and partners.

# 6.3 Welfare

- Organisations:
  - Block grants to charities advocating or working for the health & wellbeing of the RN community;
  - Block grants to organisations/charities for initiatives to promote camaraderie and wellbeing and combat loneliness and isolation;
  - o Block grants to RN organisations to promote equity, diversity and inclusion;
  - Block grants to RN or charity major infrastructure projects over £100,000 where public funding is not available.

#### 6.4 Research

- Direct funding of research which enables a more comprehensive understanding of need and more effective planning for the use of resources and delivery of support;
- Restricted funding to organisations for research, which enables improved support of their target cohort.
- 6.5 As Greenwich Hospital evaluates the impact of its service delivery, other grant programmes may be added or removed to ensure the maximum benefit to RN, RM and RFA serving and former serving personnel and their families.

# 7 Monitoring, Reporting and Publicity

- 7.1 All applicants receiving a grant will need to identify and seek agreed outcomes, monitor them and report back the benefits and impact of the award. Templates will be provided to all applicants to support the reporting process, and outcomes will be agreed upon before the grant letter is exchanged.
- 7.2 Grants up to £20,000 will need to submit a brief monitoring report highlighting how funding has been spent, and the benefits of the award, with any photographs or documents evidencing the benefits. Applicants receiving a grant of over £20,000 are required to submit a detailed impact report including the measurement of Outcomes/Key Performance Indicators (KPIs) and set out how they have met those indicators.

- 7.3 At the conclusion of a grant award, all applicants in receipt of over £20,000 will need to submit a final report, normally within one month of the end of the grant. If a final monitoring report is not submitted, GH cannot consider any future grants until the final report is received.
- 7.4 In the case of multi-year awards, or if an award is payable in instalments within one year, the payment of subsequent grant instalments will be dependent on satisfactory progress having been demonstrated. GH reserves the right to withdraw, withhold or request the refund of a previous instalment in full or in part on receipt of unsatisfactory progress reports or failure to spend the full grant award without good reason.
- 7.5 Monitoring visits by the GH Grant team may take place at any time during the specified timescale of a grant award and, in the case of building projects, up to nine months after the building works have been completed.
- 7.6 Funded organisations may be asked to take part in publicity to highlight the funding work of GH. This may include but is not restricted to names and photographs provided by the organisation being used, and the publication of the impact of their grant on the GH website, impact reports or publications within the Royal Navy or Royal Marines sector. GH will ensure compliance with GDPR (General Data Protection Regulation) when using any publicity.
- 7.7 Organisations are expected to use the GH logo and name to acknowledge an award. The logo and support for any wording acknowledging a grant can be obtained through the Grants team.
- 7.8 GH expects to receive copies of any published articles, papers or other outputs which may result from a grant award. Grantees are expected to ensure that GH has sight of and the ability to input into any documentation it has funded prior to publication.

#### 8. Amendments

GH may vary the terms of this policy from time to time to reflect any changes in priorities and grant programmes that may be on offer.

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