**BTSE Associate Membership Application Form**

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**Bromley Third Sector Enterprise**

**Aims**

The aims of Bromley Third Sector Enterprise (BTSE) are to:

* Provide a single point of access and signposting to the voluntary and community sector (VCS) health and social care provision in the London Borough of Bromley
* Provide co-ordinated provision of services under single BTSE contracts
* Enable the VCS to be a core provider of health and social care services in and around the London Borough of Bromley
* Enable local VCS provider organisations to jointly bid for contracts and other funding that they would be unlikely to secure on their own
* Deliver integrated, cost-effective services that deliver the best possible outcomes for people in Bromley and surrounding areas
* Ensure that people’s needs are seen holistically and addressed, within contracted services, by the right person, in the right place and at the right time

**Associate Membership Information**

Associate membership of BTSE is open to legally constituted Voluntary and Community Sector organisations which primarily deliver health, wellbeing and/or social care services for the benefit of the people and community within the London Borough of Bromley.

**Why Become an Associate Member?**

Local VCS providers which can add value to actual or potential future opportunities as sub-contractors may apply to join BTSE. This may include bringing in specialist skills, expertise, working with a particular client group and delivering good geographical coverage and community connections.

We already have a small – but growing - body of Associate Members and wish to extend the offer to more organisations. The benefits of becoming an Associate Member include:

1. potential opportunities to contribute to BTSE services:
* Bromley Well sub-contracting for niche services
* Potential opportunities through Innovation Fund bids
* Social Prescribing - opportunities to provide services within existing and/or new commissioned initiatives
1. influence the development of BTSE/Bromley Well direction of travel

**How to become an Associate Member**

To be considered to become an Associate member of Bromley Third Sector Enterprise, the first step is to simply fill in our membership form (below) and return it by email to BTSE c/o [admin@communitylinksbromley.org.uk](file:///C%3A%5CUsers%5Ckm_wo%5CDownloads%5Cadmin%40communitylinksbromley.org.uk) or by post to BTSE c/o Community Links Bromley, Community House, South Street, Bromley, BR1 1RH

**Application for Associate Membership of Bromley Third Sector Enterprise**

|  |  |
| --- | --- |
| Name of Organisation |  |
| Address and post code |  |
| Website |  |

*Please provide contact details for 2 individuals within your organisation*

|  |  |
| --- | --- |
| *Lead Contact:* Name |  |
| Role/Position |  |
| Email |  |
| Phone number |  |
| *Contact 2:* Name |  |
| Role/Position |  |
| Email |  |
| Phone number |  |

***Please tick all boxes as appropriate***

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Are you a legally constituted Voluntary and Community provider and operate as a not for profit organisation  |  |  |
| Does your organisation have as part of its purpose the delivery of health, wellbeing and/or social care services, including to people within the London Borough of Bromley? |  |  |
| Are you a registered charity? |  |  |
| If Yes, please provide your charity number |  |
| Is your organisation part of a national charity (networked/affiliated/federated\*)? |  |

*\* delete as necessary*

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| **What client group do you provide services for?** |
| Older People |  | People with mental health issues |  |
| Adults with long term health conditions |  | Carers including young carers |  |
| Breaking down barriers to employment |  |
| Adults with physical disabilities |  |
| Adults with learning disabilities |  | Education and training |  |
| Other (please specify): |  |

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| **What issues does your organisation address?** |
| Health |  | Employment |  |
| Relief of poverty |  | Disability |  |
| Accommodation/ housing |  | Education/ Training |  |
| Religious activities |  | Social care |  |
| Other (please specify): |  |

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| **How do you deliver your services?** |
| Training/ workshops |  | Online resources |  |
| Telephone advice |  | Mentoring |  |
| Email advice |  | Advocacy |  |
| One to one advice |  | Providing information |  |
| Other (please specify): |  | Support Work |  |

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| **What is your Annual Income? (£)** |
| Under 5,000 |  | 5,001-20,000  |  |
| 20,001-100,000  |  | 100,001-250,000  |  |
| 250,001-500,000 |  | Over 500,001  |  |
| Other (please specify): |  |

|  |
| --- |
| **How many employees do you have?** |
| None |  | 1-5 |  |
| 6-10 |  | 11-25 |  |
| 26-50 |  | 51 and over |  |
| Other (please specify): |  | Unknown |  |

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| **Does your organisation have the following in place?** |

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Appropriate insurance in place for your activities, staff and volunteers |  |  |
| Information and data confidentiality policy and data protection policy and procedures which are appropriate for your organisation/group/activity and comply with all current legislation. |  |  |
| Safeguarding Policies and Procedures which are appropriate for your organisation/group/activity and comply with all current legislation. |  |  |
| Equal Opportunities Policies and Procedures which are appropriate for your organisation/group/activity and comply with all current legislation. |  |  |
| DBS checks for staff, trustee and volunteer roles that are eligible. |  |  |
| Health & Safety Policies, Risk Assessments and Procedures which are appropriate for your organisation/group/activity and comply with all current legislation. |  |  |
| Operate within a recognised constitution, set of rules or written governing document. |  |  |

**Subject to BTSE approval, we agree to become an Associate Member of Bromley Third Sector Enterprise. We confirm that we will actively support BTSE’s aims.**

**I confirm that I am authorised to sign on behalf of the organisation**

Signed………………………………………………………Date…………………….

Print Name……………………………………………………………………………..

 Role/Position…………………………………………………………………………….

 Organisation……………………………………………………………………………..