Strong and Resilient Communities - Community Support - Small Grants for Volunteer Involving Organisations Activity

FINAL REPORT

Organisation Name:				
Agreement ID: Your Activity				
Please select the option/s that best describes the activity/ies undertaken. Please select all that apply:				
 □ Training for volunteer managers to increase their skills in volunteer management e.g. building volunteer engagement and retention to increase volunteer numbers □ Training for volunteer managers to understand the needs of objective cohorts □ Training for volunteer managers to facilitate activities for objective cohorts □ Training for volunteers to understand the needs of objective cohorts □ Training for volunteers to facilitate activities for objective cohorts □ Engagement of consultants to review policies and processes such as recruitment and retention processes □ Other (please describe your activity): 				
How:				
Please select the option/s that best explains the approach and methodology you adopted in delivering those activity/ies. Please select all that apply:				
Needs analysisConsultation				
☐ Risk assessment				
Staffing – recruitment, onboarding, prioritising diversity				
☐ Theory of Change				
Program Logic and/or evaluationMonitoring activities				
Other (please explain):				



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Did yo	our activity align with the National Standards for Volunteer Involvement? Please select all apply:
	Yes, the activity aligned with Standard 1: Volunteering is embedded in leadership, governance and culture
	Yes, the activity aligned with Standard 2: Volunteer participation is championed and modelled
	Yes, the activity aligned with Standard 3: Volunteer roles are meaningful and tailored
	Yes, the activity aligned with Standard 4: Recruitment is equitable, and diversity is valued
	Yes, the activity aligned with Standard 5: Volunteers are supported and developed
	Yes, the activity aligned with Standard 6: Volunteer safety and wellbeing is protected
	Yes, the activity aligned with Standard 7: Volunteers are recognised
	Yes, the activity aligned with Standard 8: Policies and practices are continuously improved
	No, the activity did not align with the National Standards for Volunteer Involvement
	our activity align with the strategic objectives of the National Strategy for Volunteering? e select all that apply:
	Yes, the activity aligned with Strategic Objective 1.1: Focus on the Volunteer Experience
	Yes, the activity aligned with Strategic Objective 1.2: Make Volunteering Inclusive and Accessible
	Yes, the activity aligned with Strategic Objective 1.3: Ensure Volunteering is Not Exploitative
	Yes, the activity aligned with Strategic Objective 2.1: Diversify the Understanding of Volunteering







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	Yes, the activity aligned with Strategic Objective 2.2: Reshape the Public Perception of Volunteering	
	Yes, the activity aligned with Strategic Objective 2.3: Recognise the Inherent Value of Volunteering	
	Yes, the activity aligned with Strategic Objective 2.4: Enable a Community-Led Approach	
	Yes, the activity aligned with Strategic Objective 3.1: Make Volunteering a Cross-Portfolio Issue in Government	
	Yes, the activity aligned with Strategic Objective 3.2: Build Strong Leadership and Shared Accountability	
	Yes, the activity aligned with Strategic Objective 3.3: Commit to Strategic Investment	
	Yes, the activity aligned with Strategic Objective 3.4: Recognise the Importance of Volunteer Management	
	No, the activity did not align with the strategic objectives of the National Strategy for Volunteering	
Whe	re:	
Please list the postcodes serviced by your activity/ies		

Your Impact

Please specify the number of people your organisation supported from each of the cohort groups.

	Number
Objective Cohorts	Supported
Young people 12 to 18 years who are disengaged, or at risk of disengaging,	
from education	
People with disabilities and/or mental health conditions	
Women who experience, or are at risk of experiencing isolation or	
discrimination	
People who are unemployed	

















Outcome

Which of the outcomes did your program achieve? Please select all that apply:

Outcome	Achieved Yes/No
Increased capability and capacity for volunteer involving organisations to uplift volunteer capability, including volunteer knowledge, skills and volunteer numbers	
Increased social, civic and economic participation This could include but is not limited to: more engagement in social activities, education, volunteering, or paid work	
Reduced levels of social isolation or increased sense of belonging in communities This could include but is not limited to: more connections with friends, family and community	
Improved sense of wellbeing This could include but is not limited to: improved physical and mental health	
Engagement in education, training and work-ready services This could include but is not limited to: enrolling in training courses, attending workshops, accessing resources to build employment skills	
Improved work skills This could include but is not limited to: interview skills, writing skills, computer skills, communication skills, and time management skills	
Increased opportunities for paid work This could include but is not limited to: invitations to job interviews, internship opportunities, offers for paid or voluntary work	
Engagement with community services and activities This could include but is not limited to: attendance at community events or contact with community organisations	
Improved connections to services that further support their social, civic and economic participation This could include but is not limited to: accessing physical or mental healthcare, community social groups, and volunteering	

Please describe, in at least 150 words, how you know that your program has achieved those outcomes.				



















Your Learnings

Please outline, in at least 150 words, any lesso adopted to achieve better results in the future.	

Your Story

Please include a case study that illustrates the impact your program has had on the community. This can be included in video, audio or written format.

Your case study should include:

- Who was involved? (e.g. client, participant, volunteer. You may use a pseudonym, but please do not use real names) Give some information about them – do they belong to one or more of the objective cohorts?
- What was the problem at the beginning of your grant activity? (e.g. a need to build capacity and/ or capability, out of date policies and procedures, a desire to increase inclusivity)
- What activities did you undertake that affected the person/people involved?
- What change did you see?
- Link this back to the objectives and outcomes of the activity where appropriate

Indigenous Organisation Type Classification

Organisation Type	Classification	Please select one
Aboriginal and Torres Strait Islander Community Controlled Organisation	These are organisations that are incorporated, not for profit, at least 51% Aboriginal and Torres Strait Islander owned and at least 51% Aboriginal and Torres Strait Islander controlled (Board members or equivalent).	

















Aboriginal and Torres Strait	These are organisations that are at least 51% Aboriginal	
Islander Operated and	and Torres Strait Islander owned and at least 51%	
Controlled organisation	Aboriginal and Torres Strait Islander controlled (Board	
	members or equivalent).	
Other Aboriginal and	These are organisations that are at least 50% Aboriginal	
Torres Strait Islander	and Torres Strait Islander owned OR at least 50%	
organisation	Aboriginal and Torres Strait Islander controlled (Board	
	members or equivalent).	
None of the above		

Grant Process Evaluation

For each of the items below, please rate your satisfaction with that process on a scale from 1-5, where 1 is very unsatisfied, and 5 is very satisfied.

Accessibility of documentation

1 2 3

2 3 4 5

Communication with Volunteering Peak Body

1 2 3 4 5

Clarity of expectations

1 2 3 4 5

Reporting and acquittal requirements

1 2 3 4 5



















Please provide any other feedback you have below:			

This report is submitted and endorsed by:	This report is accepted by:
Organisation:	Organisation: Volunteering Queensland
Name:	Name:
Signature:	Signature:
Position:	Position:
Date:	Date:

















