

Strategic Priority Grants 2025 - 2028

Introduction

In order to complete your application please:

- Download the [Strategic Priority Grants 2025-2028 guidelines](#)
- Read the [Strategic Priority Grants FAQ](#)
- Read the Council's Strategic Direction [here](#)
- View the video on Outcomes/Outputs [here](#)
- Come to a drop-in session (see the timetable in the Guidelines or on the [website](#))
- Contact Community Development Advisor - Funding, Cindy Nguyen on 06 356 8199 or email communityfunding@pncc.govt.nz

We recommend you register your organisation on [SmartyFile](#) to help manage your application.

Organisation Details

*** indicates a required field**

Organisation details

Name of organisation *	FRANK helpline
Physical address	32 The Square Palmerston North Palmerston North 4410 New Zealand
Postal address	32 The Square Palmerston North Palmerston North 4410 New Zealand
Phone *	06 356 8199 Must be a New Zealand phone number.
Email *	info@frankhelpline.co.nz Must be an email address.
Website	
Social media	
GST number (if applicable)	
Is this a joint application? *	<input type="radio"/> Yes <input checked="" type="radio"/> No Is this application on behalf of more than one organisation?

Primary contact person

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Application No. SPG-25/28-001 From Cindy Nuong - DRAFT

Name * Frank Harrow

Position in organisation Manager

Phone * 06 356 8199
Must be a New Zealand phone number.

Email * info@frankhelpline.co.nz
Must be an email address.

Secondary contact person

Name *

Position in organisation

Phone * Must be a New Zealand phone number.

Email * Must be an email address.

Organisation status

Are you a registered charity? *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Have you received Council funding in the past two years? *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Are you registered with the Companies Office? *	<input type="radio"/> Yes <input checked="" type="radio"/> No This includes registered incorporated societies or charitable trust boards.	Do you have central government Social Services Accreditation? *	<input type="radio"/> Yes <input checked="" type="radio"/> No Organisations must be accredited before they can be funded by agencies like Oranga Tamariki, Ministry of Justice or the Department of Corrections.
Are you a social enterprise? *	<input type="radio"/> Yes <input checked="" type="radio"/> No Social enterprises are purpose-driven organisations that are in business to deliver social and environmental impact.		

**Charities Commission
registration number**

New Zealand Charities Register Information

Reg Number
Legal Name
Other Names
Reg Status
Charity's Street Address
Charity's Postal Address
Telephone
Fax
Email
Website
Reg Date

Must be formatted correctly.

Conflicts of interest

All conflicts of interest (whether actual, potential or perceived) must be declared. All Council officers involved in the funding process are also required to declare any conflicts of interest.

Are there any Palmerston North City Council staff members or elected members in your organisation? *

Yes No

Are you aware of any other conflicts of interest which could affect this proposal? *

Yes No

Capability, capacity and experience

If you have not been funded by Council in the past two years, or do not hold a Social Services Accreditation, then you need to provide evidence of that you have the capability, capacity and experience to deliver your proposal.

This includes evidence that you have:

- a relevant track record of successful delivery;
- the necessary networks or profile to give you credible access to the community;
- community support for, or involvement in, your organisation;
- evidence of support from your recognised regional or national body (where relevant).

This evidence could include a copy of your annual performance report, any support letters you have, information about the structure of your organisation, a copy of your strategic plan, or information about the relationship between your organisation, key partners, and the wider community.

Please also identify an independent referee that we can contact to confirm this information.

File upload

No files have been uploaded

Referee

Phone

Must be a New Zealand phone number.

Email

Must be an email address.

Projects, Activities, Services Detail

*** indicates a required field**

Details

Click the '**Maximise**' button to view this question in full screen.

Provide a concise description of the proposed projects, activities or services you want us to support *

Our organisation seeks funding to expand and improve our 24/7 mental health helpline. The helpline provides immediate emotional support, crisis intervention, and referral services for individuals experiencing mental health challenges.

With the requested \$10,000, we aim to increase the helpline's capacity by

- extending operating hours;
- training additional staff;
- improving outreach efforts to reach more vulnerable populations.

Must be no more than 250 words.

We encourage you to use bullet points to list your projects, activities or services.

What are the intended outcomes you expect to result from these projects, activities or services? *

- Increased access to mental health support: By expanding our service hours and capacity, we anticipate a 30% increase in the number of individuals accessing mental health support.
- Increased referrals to long-term mental health services: At least 200 callers will be successfully referred to long-term mental health resources, such as therapy or counselling services, contributing to ongoing care and support.
- Improved mental well-being for callers: 80% of callers will report feeling less distressed after using the helpline, based on follow-up surveys.
- Reduced feelings of isolation and stigma: Through outreach and anonymous helpline services, we expect a measurable reduction in feelings of isolation among callers and improved attitudes towards seeking mental health care.

Must be no more than 500 words.

Please provide details.

Please identify any priority community or communities that your projects/ activities/services will benefit. *

- Māori
- Pasifika

- Ethnic communities
- People of refugee background
- People with disabilities
- Children and young people
- Older people
- Rainbow communities
- Other

If Other, please explain here

Example: Geographic, neighbourhood or other communities

Goals and Outcomes

*** indicates a required field**

Funding outcomes

Our funding outcomes are based on Goals 2,3 and 4.

- GOAL 2: A CREATIVE AND EXCITING CITY
- GOAL 3: A CONNECTED AND SAFE COMMUNITY
- GOAL 4: A SUSTAINABLE AND RESILIENT CITY

See the Council's Strategic Direction [here](#).

Proposed outcomes

Please tell us about the outcomes you expect to result from your projects, activities, or services AND how those align with Council's Goals (2,3 and/or 4) and Outcomes (use the drop-down options).

Please choose the funding outcomes that best align with your core purpose.

For example: your intended outcomes may align with Goal 3 - 'A connected and safe community', Outcome 2 - 'the support they want to live healthy lives'

There is a pre-filled example in the first row that you can type over it and click on "x" to delete the example Goal/Outcome.

Click the '**Maximise**' button to view these questions in full screen. You can add additional rows by clicking the '**Add More**' button.

Your intended outcomes

Alignment with Council's Goals and outcomes

<p>What changes do you expect will occur as a result of your projects, activities, or services (e.g. People feel more connected within community; the community have opportunities to celebrate their cultures, people feel more confident to present their work, people learnt new skills and knowledge)? Please be brief. One per row. Must be no more than 50 words.</p>	<p>Which of Council's Goals and Outcomes does this contribute to? No more than 1 choice may be selected.</p>
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Customers have more opportunities to access mental health support.	Goal 3: A connected and safe community > Goal 3, Outcome 1: access to services and facilities that are inclusive and appropriate for their needs *
Customers have more opportunities to be successfully referred to long-term mental health resources, such as therapy or counseling services, contributing to ongoing care and support.	Goal 3: A connected and safe community > Goal 3, Outcome 1: access to services and facilities that are inclusive and appropriate for their needs
Customers feel less distressed after using the helpline, based on follow-up surveys.	Goal 3: A connected and safe community > Goal 3, Outcome 2: the support they want to live healthy lives
Customers reduce feelings of isolation and stigma, and improve attitudes toward seeking mental health care.	Goal 3: A connected and safe community > Goal 3, Outcome 2: the support they want to live healthy lives

Measuring your success

Please tell us how you will measure your intended outcomes above.

Please list each intended outcome per row.

There is a pre-filled example in the first row that you can type over it.

Click the **'Maximise'** button to view these questions in full screen. You can add additional rows by clicking the **'Add More'** button.

Please remember to regularly press **save**.

Intended Outcomes	How you measure this outcome
One per row. Add more rows if you want to list more. Must be no more than 50 words.	Must be no more than 50 words.
Customers have more opportunities to access mental health support.	We will collect data on the number of calls answered, the duration of calls, and the reasons for calls. This data will be analysed to monitor trends in service use.
Customers have more opportunities to be successfully referred to long-term mental health resources, such as therapy or counselling	We will monitor the number of successful referrals made to long-term mental health services.
Customers feel less distressed after using the helpline, based on follow-up surveys.	After each call, a brief survey will be offered to measure caller satisfaction and emotional improvement.
Customers reduce feelings of isolation and stigma, and improve attitudes toward seeking mental health care.	After each call, a brief survey will be offered to measure caller satisfaction and emotional improvement.

Budget

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*** indicates a required field**

Proposed three-year-budget

Please provide a budget for the three years from 1 July 2025 to 30 June 2028. The budget should identify exactly how the Strategic Priority Grant would be spent.

Are you GST registered? *

- Yes - Do NOT include GST in your budget
 No - Include GST in your budget

Upload the budget *

No files have been uploaded

Confirm the amount per year you are requesting from Council. Please do not adjust your figures for inflation. Inflation will be automatically applied in years two and three.

Amount requested year one *

\$10,000.00

Must be a dollar amount.

Year one is 1 July 2025 - 30 June 2026

Amount requested year two *

\$10,000.00

Must be a dollar amount.

Year two is 1 July 2026 - 30 June 2027

Amount requested year three *

\$10,000.00

Must be a dollar amount.

Year three is 1 July 2027 - 30 June 2028

Supporting information

Supporting information

Please provide a copy of your latest strategic plan, if applicable.

If you have any additional material you would like us to refer to, please enter it in the sections below.

File upload

No files have been uploaded

Please provide additional information if you would like to.

FRANK helpline

Expanding Access to FRANK Helpline Support through a 24/7 Helpline

Our organisation seeks funding to expand and improve our 24/7 mental health helpline. The helpline provides immediate emotional support, crisis intervention, and referral services for individuals experiencing mental health challenges. With the requested \$10,000, we aim to

increase the helpline's capacity by extending operating hours, training additional staff, and improving outreach efforts to reach more vulnerable populations.

Project Objectives:

- To ensure individuals in need have access to mental health support anytime, day or night.
- To reduce the stigma around seeking mental health help by providing anonymous, judgment-free support.
- To connect individuals to long-term mental health resources, including counselling and therapy, where necessary.

Target Population:

The helpline will serve individuals across our region, particularly focusing on underserved populations, such as:

- Low-income communities
- Individuals in rural areas with limited access to mental health services
- People experiencing mental health crises, such as anxiety, depression, or suicidal thoughts

Must be no more than 150 words.

Feedback

*** indicates a required field**

Time taken to complete application

We are working to make our application processes easier. You can help us by keeping track of roughly how long it takes you to complete your application, and give us feedback on the application form.

Hours spent completing your application *

1

Must be a number.

Please fill this out just before you submit your application.

Provide feedback on the application form

Must be no more than 200 words.

Declaration

*** indicates a required field**

Declaration

You must agree to the below statements before submitting your proposal: *

- I have authority to commit to the following conditions on behalf of the applicant group.
- I understand that the Palmerston North City Council is bound by the Local Government Official Information and Meetings Act 1987.
- I consent to Palmerston North City Council recording the details provided in this proposal and retaining and using these details for considering the proposal.

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- I have obtained the consent of all people involved to provide any personal contact details in this application. I understand that I have the right to access this information. This consent is given in accordance with the Privacy Act 2020.
- I authorise Palmerston North City Council to seek such information as they may require to complete the consideration of this proposal.
- I understand that Palmerston North City Council may disclose to, or obtain from, any government department or agency, private person, or organisation any information about my organisation for the purposes of gaining or providing information relating to my organisation.
- I will advise Palmerston North City Council of any significant change to our organisation's situation (including finances) between the date this proposal is submitted and the date I am notified of the Council's decision.
- I confirm that we have the following financial controls in place: two signatories to all our bank accounts; a current cashbook or equivalent; a treasurer; a spreadsheet/journal that tracks different funding sources; regular financial reporting to our governing body.
At least 8 choices must be selected.

Authorisation

I declare that the details contained in this proposal are correct and that I have authority to commit to the above conditions. *

- Agree

Your name *

Frank Harrow

Position in organisation

Manager

*