IWK Community Grants Application Package for 2013/2014

Deadline: November 30, 2012

Introduction
IWK Community Grants

Since it began in 2000, the mandate of IWK Community Grants program is to return a portion of IWK Foundation donations to the community to help establish outcome-based community health programs that address six priorities. Grants are awarded on an annual basis across the Maritime provinces and distributed at the discretion of the Community Grants Committee (CGC).

Community Grants Priority Areas:

1. Supporting the healthy growth and development of children 0-6 years, including the pre-natal period
2. Preventing child/youth obesity
3. Supporting parents of children 0-16 years in their parenting role
4. Addressing the needs of "at risk" youth
5. Improving women's wellness across the adult and senior years
6. Reducing the incidence/severity of child and youth injuries

Application Process

1. Applicants must complete the application template to ensure review of their application – applicants who do not adhere to the template will not be considered. Additional information may be included as an addendum.

2. Applicants must submit eight (8) hard copies of the completed application form. Applications must be received by the IWK Primary Health office postmarked on or before November 30, 2012 for the 2013/2014 grant period. **Late or incomplete applications will not be accepted.**

   Please send application packages to:
   Julie Harrington, Coordinator
   IWK Community Grants Program
   Primary Health Office
   3rd floor, Goldbloom Pavilion
   IWK Health Centre
   P.O. Box 9700, 5850/5980 University Avenue
   Halifax, NS, B3K 6R8

   For drop-off please call Julie Harrington at 470-7165, or Leah Dore at 470-7320.
   ***Please do not leave packages at any other location within the IWK Health Centre except the Primary Health office.

3. The IWK Community Grants review and approval process takes several months to complete. Applications may be approved for some or all of the funding being requested. Unfortunately due to limited funds, not all applicants receive funding. All grant applicants, however, will be notified as to the final status of their application by mid-March 2013. Please note that for fiscal reasons, grant monies for the 2013/2014 funding year are not available before April 1, 2013.

4. Successful grant recipients will be asked to sign a Letter of Agreement to establish the reporting schedule, the distribution of funds, restrictions and/or guidelines surrounding the use of funds,

and any agreed upon stipulations between the CGC and the recipient. It is the responsibility of the recipient to inform the Coordinator of any changes in expenditures of the funds or the objectives of the project. Recipients who do not comply with the reporting process will have their funding revoked and may be asked to return funds that have already been awarded. The CGC reserves the right to delay and/or withdraw funding if the stipulations of the Letter of Agreement are not being met, or if it is suspected that the funds are not being spent appropriately.

Application Criteria

Please review the following criteria carefully to ensure that your project is eligible for an IWK Community Grant:

1. The proposed program must address at least one of the following IWK priorities:
   - Supporting the healthy growth and development of children 0-6 years, including the pre-natal period
   - Preventing child/youth obesity
   - Supporting parents of children 0-16 years in their parenting role
   - Addressing the needs of "at risk" youth
   - Improving women's wellness across the adult and senior years
   - Reducing the incidence/severity of child and youth injuries

2. Who can apply?
   - Applicants must be a non-profit or charitable group with an appropriate governance structure.
   - Private, for-profit groups, schools or an individual will not be considered.
   - District Health Authorities/Health Regions are encouraged to partner with community organizations, but the community organization must take the lead as applicant.
   - National organizations may only apply under a local chapter located within the Maritimes.
   - Organizations with incomplete grants from the Community Grants program from previous years may not be eligible to re-apply - permission would need to be granted by the IWK Community Grants Committee on a case-by-case basis.
   - No organization will be considered for an IWK Community Grants more than two consecutive years.

3. The successful applicant must demonstrate financial accountability. ***Please note: All applicants who are requesting more than $10,000 must submit an audited financial statement for their organization.** It is expected that the proposed project will be completed within one year, though extensions may be granted on a case-by-case basis.

4. Community Grants are intended to be seed or start-up **program** funding. We will not consider applications for:
   - Operational funding or long-term programs
   - Capital purchases (i.e. infrastructure, equipment, furniture, technology) unless such purchases are required for the implementation of a specific program
   - Purchase of playground equipment
   - Funding towards capital campaigns or foundations

6. Applications for programs which include in-kind partnerships and matching funding will be given priority. When applying for a grant on behalf of a partnership or group of organizations, each organization must provide a letter of support from its respective leader, in the grant application package. When applying as part of a partnership, the lead applicant must be based in the Maritimes.

Application Form

Project Name:

Group/Organization Name:

Mailing Address:
Street Address City Postal Code ☐ NS ☐ NB ☐ PEI

Organizational leader (i.e. Executive Director):
(*the person who has signing authority for your organization)*

Name & Title:

Address (if different from above):

Email:

Phone contact:

Contact person:
(***the person who would be responsible for preparing ongoing reports on this project)***

Name & Title:

Address (if different from above):

Email:

Phone contact:

Which of the following IWK priorities does your project address? *(please check all that apply)*

- ☐ Supporting the healthy growth and development of children 0-6, including the prenatal period
- ☐ Preventing child/youth obesity
- ☐ Supporting parents of children 0-16 years in their parenting role
- ☐ Addressing the needs of "at risk" youth
- ☐ Improving women's wellness across the adult and senior years
- ☐ Reducing the incidence /severity of child and youth injuries

Applicants must be a non-profit or charitable group.
If you are a registered non-profit, please provide your charitable number here: _____

Has your organization received an IWK Community Grant in the past? If so, please summarize year and project:

Where did you hear about the Community Grants program?

Total Funds Requested in this Application:

Please provide the information requested below with as much detail as possible to help the IWK Community Grants Committee evaluate and consider your project.

A: Organizational Description:

1. Describe your organization's mandate/purpose.

2. Provide a clear description of your organizational structure (i.e. board of directors, # of staff, staff and volunteer structure, national/provincial affiliations).

3. Please indicate how your organization is funded, and describe all funding sources including government, corporate and fundraising.

4. If you are requesting a grant of more than $10 000, please include an audited financial statement for your organization.

B: Project Description - **Provide a clear outline of your project, including the following:**

1. A short summary/description of your program, with start and end dates

2. Project goals and objectives

3. A detailed implementation plan, including timeline for achieving specific objectives

4. Target audiences for your project:
   - Who are they?
   - How many people will you reach?
   - What communities will you reach?
   - What benefits will they receive from the project?
   - How will you attract participants?

5. Project contributors:
   - Please list specific community partners, organizations, agencies, etc. who will be assisting with this project
   - Please include letters of support from major partners detailing their contribution to the project

6. Evaluation plan - detail how you intend to measure the success of the project

7. Expected long term sustainability and growth of your program

5. Alternate plan - If you do not receive the total amount of funding requested, what would your alternate plan be?

6. Which determinant(s) of health is your project addressing (see Appendix A) and what impact will your program have on each?

C: Budget Request

Please complete the following tables, as applicable, in as much detail as possible. For in-kind donations, please include the service provider and the estimated cost of the services being provided. For matching funds, include the name of the provider of the funds and the amount of funding contributed.

Table A: Staff Salary/Honorarium Expenses

Staff Role	Salary (# hrs, rate per hr), Honorarium	In-kind from your organization	Matching Funds from partners	Total Requested Funds
Table A Total				

Table B: Other Project Expenses

Expenditure	In-kind from your organization	Matching Funds from partners	Total Requested Funds
Travel (bus tickets, personal vehicle $0.4015/km max. etc.)			
Supplies			
Advertising			
Photocopying			
Printing			
Postage			
Equipment rentals/leasing			
Space rental			
Other costs (please specify)			
Table B Total			

Total Funds Requested (Table A Total + Table B Total) = $_____

Please note: If you are applying for a grant of more than $10 000, you must attach an audited financial statement for your organization to this budget page.

D: Signatures

Please note: this application must have TWO signatures in order to be complete.

On behalf of _____, I verify that all information represented in this application is accurate.
(organization name)

_____	_____
Signature of Organizational Leader*	Second Signatory**
_____	_____
Position, Organization	Position, Organization
_____	_____
Please print or type name	Please print or type name
_____	_____
Date	Date

* *Organizational Leader is the Executive Director or person who has signing authority for your organization.*

** *The Second Signatory can be the Chair of the Board, Treasurer, or a major project partner. If you are unsure, please contact the IWK Community Grants Coordinator for clarification.*

Determinants of Health [1] Appendix A

Income and Social Status
Health status improves at each step up the income and social hierarchy. Higher income determines living conditions such as safe housing and ability to buy sufficient good food.

Social Support Networks
Support from families, friends and communities is associated with better health. These networks help people solve problems and deal with adversity, as well maintain a sense of mastery and control over life circumstances.

Education and Literacy
Health status improves with level of education. Education contributes to health and prosperity by equipping people with knowledge and skills for problem solving, and helps provide a sense of control and mastery over life circumstances. It increases opportunities for job and income security, and job satisfaction. And it improves people's ability to access and understand information to help keep them healthy.

Employment / Working Conditions
Unemployment, underemployment, stressful or unsafe work are associated with poorer health. People who have more control over their work circumstances and fewer stress related demands of the job are healthier and often live longer than those in more stressful or riskier work.

Social Environments
Social stability, recognition of diversity, safety, good working relationships, and cohesive communities provide a supportive society that reduces or avoids many potential risks to good health.

Physical Environments
At certain levels of exposure, contaminants in air, water, food and soil can cause a variety of adverse health effects. In the built environment, factors related to housing, indoor air quality, and the design of communities and transportation systems can significantly influence our physical and psychological well-being.

Personal Health Practices and Coping Skills
Actions by individuals can prevent diseases and promote self-care, help cope with challenges, develop self-reliance, solve problems and make choices that enhance health.

Healthy Child Development
Evidence on the effects of early experiences on brain development, school readiness and health in later life has sparked a growing consensus about early child development as a powerful determinant of health. At the same time, all of the other determinants of health affect the physical, social, mental, emotional and spiritual development of children and youth.

Biology and Genetic Endowment
The basic biology and organic make-up of the human body are a fundamental determinant of health.

Health Services
Health services, particularly those designed to maintain and promote health, to prevent disease, and to restore health and function contribute to population health.

Gender
Many health issues are a function of gender-based social status or roles.

Culture
Some persons or groups may face additional health risks due to the perpetuation of conditions such as marginalization, stigmatization, loss or devaluation of language and culture and lack of access to culturally appropriate health care and services.

[1]Adapted from Towards a Healthy Future, 2nd Report on the Health of Canadians, prepared by the Federal, Provincial and Territorial Advisory Committee on Population Health. Health Canada, 1999.