



**Cumberland County Community Health Board Wellness Grant Application
December 2009**

Table of Contents

<i>Topic</i>	<i>Intended for:</i>
Background Information	Applicant
Application Form	Applicant
Project Information	Applicant
What Happens after I apply?	Applicant

Community Health Board Wellness Fund

Background Information

Thank you for your interest in improving the health of your community!

These materials have been offered to help inform you of the important role played by your Community Health Board (CHB) and to aid you in your application for funding. After reading this information, we encourage you to contact your local CHB to discuss the appropriateness of your project prior to applying for funding. Should you have questions regarding the application, or you are unsure which CHB to apply to, please contact the CHB Coordinator.

Community Health Boards

In June 2000, the Health Authorities Act was passed which established the nine District Health Authorities (DHAs) to oversee the delivery of health care services to Nova Scotians. In addition, the Act provided legislation which established the Community Health Boards (CHBs) – groups which provide the communities a voice in how the DHA delivers health services and a vehicle through which to help address community health concerns.

DHAs govern, plan, manage, deliver, monitor and evaluate health care services in the health district to maintain the most beneficial allocation of health care resources, avoid duplication of services, and meet the needs of the residents of each health district. In turn, CHBs are responsible for providing the DHAs with input from their communities to help guide decision making and ensure the efficient delivery of services. This responsibility includes determining local health needs, developing community health plans (the document which communicates these needs to the DHA), and identifying community based solutions to meet these needs and improve the overall health of the community.

History of the Wellness Fund

Over the past decade, the delivery of health services in this province has been shifting from a primarily hospital-based model of care to a preventative, or *population health* based approach. This model of care seeks to maintain and improve the health of people and the communities in which they live through partnerships, and by addressing those aspects of a person's life which determine their health. Therefore, population health seeks to reduce injury, disease, and the corresponding need for acute care services delivered in hospital facilities; simply put, keeping people out of hospitals by keeping them healthy.

These funds have been made available through different sources, names and in different amounts over the years. In 1997, the Provincial Government made \$1 million available to CHBs throughout the province in a one-time payment called the Healthier Communities Initiative Fund.

Criteria for Applying for a Wellness Fund Grant

The Wellness Fund is intended to promote **community capacity**, whereby the community identifies the problem and implements solution(s) while learning new skills in the process (i.e. building *capacity*); to **create partnerships** during the development and/or implementation of funded projects which continues beyond the project and therefore helps build healthier communities, and; to **raise the profile** of our CHBs in order to better able them to be a voice for the health of your community. No project is too small!

Because this fund is limited, it must be used effectively. Therefore, projects seeking funding must meet certain criteria as detailed below.

Projects must:

- Relate to one or more community health priorities as determined by the CHB;
- Address one or more of the Determinants of Health and/or one or more Health Promotion areas of focus (please see section below for a description of these requirements);
- Promote health and/or reduce unhealthy behaviors;
- Be open to the general public insofar as the target group of the project allows (e.g. projects imposing such barriers as required membership will not be funded).
- Be of set duration (i.e. no longer than 12 months from project start date to end date).

Funding will **not** be provided for:

- Projects that diagnose, treat or rehabilitate health problems (i.e. direct provision health care services, District Programs and Services);
- Fundraising;
- Projects which duplicate existing community services or programs; but may be provided to build upon existing activities (i.e. it is the aim of this funding to support innovative, new ways of addressing community health concerns);
- For-profit Organizations and Government Departments or Agencies;

Once you have completed and submitted your application for funding, you may be contacted to discuss your project in further detail. Successful applicants will be asked to attend a function in order to sign a letter of agreement and receive their funds. Applicants will also be asked to provide a brief overview of their proposed project to those in attendance.

The Determinants of Health & Nova Scotia Health Promotions Focal Areas

Population health regards health as “a capacity or resource rather than a state;” not simply the presence or absence of a disease, but a complete state of physical, mental and social well-being influenced by several, interrelated factors called the *Determinants of Health*¹. As a requirement for funding, your project must address one or more of the following:

- **Income and Social Status:** There is strong and growing evidence that higher social and economic status is associated with better health. In fact, these two factors seem to be the most important determinants of health. Health status improves at each step up the income and social hierarchy. High income determines living conditions such as safe housing and ability to buy sufficient good food. The healthiest populations are those in societies which are prosperous and have an equitable distribution of wealth.
- **Social Support Networks:** Some experts in the field have concluded that the health effect of social relationships may be as important as established risk factors such as smoking, physical activity, obesity and high blood pressure. Support from families, friends and communities is associated with better health. Such social support networks could be very important in helping people solve problems and deal with adversity, as well as in maintaining a sense of mastery and control over life circumstances. The caring and respect that occurs in social relationships, and the resulting sense of satisfaction and well-being, seem to act as a buffer against health problems.
- **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

¹ Public Health Agency of Canada (<http://www.phac-aspc.gc.ca/ph-sp/phdd/>)

income security, and job satisfaction. It also improves people's ability to access and understand information to help keep them healthy.

- **Employment/Working Conditions:** Employment has a significant effect on a person's physical, mental and social health. Paid work provides not only money, but also a sense of identity and purpose, social contacts and opportunities for personal growth. 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 and activities.

- **Social Environments:** The importance of social support also extends to the broader community. Civic vitality refers to the strength of social networks within a community, region, province or country. It is reflected in the institutions, organizations and informal giving practices that people create to share resources and build attachments with others. The array of values and norms of a society influence in varying ways the health and well being of individuals and populations. In addition, 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:** The physical environment is an important determinant of health. At certain levels of exposure, contaminants in our air, water, food and soil can cause a variety of adverse health effects, including cancer, birth defects, respiratory illness and gastrointestinal ailments.

- **Personal Health Practices and Coping Skills:** This refers to those actions by which individuals can prevent diseases and promote self-care, cope with challenges, and develop self-reliance, solve problems and make choices that enhance health. An example of a poor personal health practice would be smoking or a sedentary lifestyle. Definitions of lifestyle include not only individual choices, but also the influence of social, economic and environmental factors on the decisions people make about their health. There is a growing recognition that personal life "choices" are greatly influenced by the socioeconomic environments in which people live, learn, work and play.

- **Healthy Child Development:** New 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 in its own right. Experiences from conception to age six have the most important influence of any time in the life cycle on the connecting and sculpting of the brain's neurons. Positive stimulation early in life improves learning, behaviour and health into adulthood. Conversely, infants and children who are neglected or abused (e.g. tobacco and alcohol use during pregnancy) are at higher risk for injuries, a number of behavioural, social and cognitive problems later in life, and death.

- **Gender:** Gender refers to the array of society-determined roles, personality traits, attitudes, behaviours, values, relative power and influence that society ascribes to the two sexes on a differential basis. "Gendered" norms influence the health system's practices and priorities. Many health issues are a function of gender-based social status or roles. As an example: While women live longer than men, they are more likely to suffer depression, stress overload (often due to efforts to balance work and family life), chronic conditions such as arthritis and allergies, and injuries and death resulting from family violence.

• **Culture:** Some persons or groups may face additional health risks due to a socio-economic environment, which is largely determined by dominant cultural values that contribute 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. An example: despite major improvements since 1979, infant mortality rates among First Nations people in 1994 were still twice as high as among the Canadian population as a whole and the prevalence of major chronic diseases, including diabetes, heart problems, cancer, hypertension and arthritis/rheumatism, is significantly higher in Aboriginal communities and appears to be increasing.

By supporting action which addresses these determinants, we can prevent much of the illness and disease which affect the health of our citizens. The support of community projects like yours through the Wellness Funds is one of the ways in which the Community Health Boards and the District are following through on this commitment.

A large part of population health is health promotion. By adopting a “big picture” approach to promoting health and more specifically, healthy lifestyles, we can help prevent many of the costly (in terms of both health dollars and quality of life) illnesses and diseases which affect Nova Scotians. NS Health Promotion has identified seven “strategic priorities,” or areas of focus through which to promote healthy lifestyles, which include:

- Physical Activity;
- Healthy Eating;
- Tobacco Control;
- Injury Prevention;
- Addiction Prevention;
- Healthy Sexuality, and;
- Chronic Disease Prevention (includes Mental Health Promotion).

As a part of the Wellness Fund, NS Health Promotion supports local projects which address these areas of focus. While not a requirement for funding, projects whose goals aim to further these priorities will be favorably considered during the review process. For more information, please consult the NS Health Promotion website

(<http://www.gov.ns.ca/ohp/index.html>).

Application Form

Project Name:

Group/Organization Name/Brief Mandate:

Contact Person:

Title:

<input type="text"/>	<input type="text"/>
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Mailing Address including Postal Code:

Telephone Number:

Home:

Work:

<input type="text"/>	<input type="text"/>
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Email Address:

Is this a non-profit or charitable group?

Yes

No

Please describe all sources of funding for your project:

Contact person below agrees to provide a mid-project report within 6 months of receiving funding and a final report within 60 days of end date of project.

I, _____, agree to provide reports as stated above.
(Please Print or Type)

Signature

Date

Project Information

Please provide the information requested below with as much detail as possible to help the Community Health Board evaluate and consider your project. *If you require extra space please provide on a separate sheet and number the section.*

1. What is the project? *(Describe your project)*

2. Who will be involved in the planning and/or carrying out of the project? *(Please list specific community partners, organizations, agencies, etc.)*

3. Who is the target group for your project? *(i.e. who will benefit from the running of this project?)*
Were they involved in the planning of this project? Did the target group help identify the need for the project? (If yes, how was the need identified?)

4. Where will your project take place?

5. How long is this project expected to last? Will it continue after this funding is finished? If yes, how?

6. What is the goal of your project? What do you want to do? Will there be a positive change within the community as a result of this project?

7. How will you know if you made a difference? What is your evaluation plan? *(Provide us with the steps you plan to take to make sure you meet your goals set in question #6.)*

8. What will be your timeline for reporting to the Community Health Board?
(Provide the dates you will submit reports.)

Mid-Project Report:
Final Report:

9. What Determinant(s) of Health is your project addressing?

Please place a check mark beside each that applies, and explain briefly the effect you hope your project will have on that determinant.

DETERMINANT	✓	HOW WILL IT BE AFFECTED?
a. Employment & Working Conditions		
b. Gender		
c. Healthy Child Development		
d. Income and Social Status		
e. Social Support Networks		
f. Health Services		
g. Physical Environments		
h. Genetics		
i. Personal Health Practices and Coping Skills		
j. Culture		

10. What Department of Health Promotion and Protection priority/priorities is your project addressing? *(Please place check marks beside each that applies, and explain briefly the effect you hope your project will have on that priority/priorities.)*

PRIORITY	✓	HOW WILL IT BE AFFECTED?
a. Physical Fitness		
b. Tobacco Control		
c. Injury Prevention		
d. Addiction Prevention		
e. Healthy Sexuality		
f. Chronic Disease Prevention Including Mental Health		
g. Healthy Eating		

11. Have you received funding from any CHB in the past? If so,when? From which CHB(s)? *(Please note that this does NOT exclude your application for consideration.)*

Budget Request

Expense Items	Budget
Wages & Benefits (for facilitators, staff, contractors)	
Travel (i.e. bus tickets, personal vehicle \$0.385 per km max, etc.)	
Operating Expenses (i.e. heat, lights, office supplies, ink, phone, internet, etc.)	
Advertising	
Photocopying	
Printing	
Postage	
Equipment Rentals/Leases	
Space Rental	
Other Costs (e.g. food, snacks, child care, etc. - Be specific.)	
Total Cost of Project	
Income:	
Funding from Community Health Board(s) (please indicate amount requested from each Board)	
Funding from other sources (Please list):	
In kind contributions:	
Other:	
Total Income:	

Due to limited funding the Community Health Board may not be able to provide the full funding amount requested.

Do you have an alternative plan should you not receive full funding?

Yes No

Should you receive funding, will your project last beyond the end of the funding?

Yes No

Please explain:

Should you not receive full funding, please contact the CHB Coordinator if you are unable to meet the original goals of your project.

Have you included everything? (Refer to attached checklist.)

Yes No

Signature of Applicants: (This should include the Chair of the group or organization and one other member of the group or organization.)

Signature of Chair

Signature of Group Member

Please Print Name:

Please Print Name:

Dated: _____

Dated: _____

Completed applications should be mailed or emailed to

**Darla MacPherson, VP Community Health
Cumberland Health Authority
34 Prince Arthur Street
Amherst, NS B4H 1V6**

Darla.Macpherson@cha.nshealth.ca

What Happens after I Apply?

- You will be told if more information is needed before your application can be assessed.
- A CHB Review Committee will review all of the applications that meet the guidelines and were received by the deadline.
- If your project is funded:
 - Sign an agreement to be responsible for the money.
 - Agree to send in a completed mid-project report (if a condition of grant) and a completed final report. Copies of receipts (listing expenses) must be sent with these reports.
 - Agree to use the money in the manner outlined in your application.
 - Agree that the Community Health Boards and/or District Health Authorities have the right to audit the grants.
 - Agree that the CHBs, and The Department of Health Promotion and Protection may use information about the recipients of these grants in press releases and/or for advertising purposes.
- If your project is not funded, you will receive a letter from the Community Health Board.

Application Checklist

Before sending in your application, please make sure:

- Reviewed the most recent CHB Summary of Priorities and/or Community Health Plan
- Application Form is complete
- Any letters of support are included

If your project is approved:

- Send in Mid-project Report (if applicable) within 6 months of receiving funding. Copies of receipts (listed expenses) must be included.
- Send in Final Report within 60 days of the end of the project. Copies of receipts (listing expenses) must be included.
- Agree to acknowledge the CHB in any promotional materials for your project.