

Age-friendly Communities 2022 Grant Application

Introduction

Thank you for your interest in the Age-friendly Communities Grant.

Use this webform to apply for one of the two Age-friendly Communities (AFC) Grants offered: Stream 1 Planning Grant (completing an age-friendly assessment and/or developing an action plan; or Stream 2 Projects Grant (project implementation). Please review the ***grant application guide*** before completing the application online. To submit your application for the grant, please review and prepare:

Required information:

- Responses to the application questions
- A completed budget and workplan using our budget and workplan templates
- Documentation of council support

Optional material:

- Any supporting documents you would like to include with your application (e.g. letters of support, reports or studies, relevant community plan documents)

When ready, click “NEXT” below to begin your application. If you need more time, there is an option to “save and return” at the top of the following pages.

If you have difficulty using the webform, please email grants@bchealthycommunities.ca for help.

Communities are encouraged to reach out to grants@bchealthycommunities.ca to learn about the grant-making process and decision criteria or to book a consultation with us prior to application.

Application Deadline: July 5th, 2022

Decision Notification: Late August, 2022

Applicant Information

1. Stream: This application is for (select one stream): *

- Stream 1 Planning Grant (completing an age-friendly assessment and developing an action plan). (up to \$25, 000)
- Stream 2 Projects Grant (project implementation). (up to \$15,000)

2. Please indicate the name of the Indigenous government or local government applying. *

3. Please indicate the type of government applying. *

- First Nation Band or Self-Governing First Nation
- First Nation Tribal Council
- Métis Chartered Community
- Municipality
- Regional District
- Other - Write In

Applicant contact details

4. Applicant mailing address

Street Address

Apt/Suite/Office

City, District, Village or
Town

Province

BC

Postal
Code

5. Only primary contacts will receive communication regarding this application.
What is your preferred method of communication? *

- Email
- Phone
- Other - Write In

Health authorities and past AFC funding or BCHC capacity building support

6. Has your organization received AFC funding or support in the past (i.e., AFC funding from the Union of BC Municipalities (UBCM), and/or Age-friendly Capacity Building (AFCB) support from BCHC? * *

- Yes
- No
- Unknown

7. If you answered yes to question 6, please indicate the plan/project name, year, and whether it was funding from UBCM or Age-friendly Capacity Building support from BC Healthy Communities.

Plan/project name:

Plan/project year:

Please check all that apply

- Capacity building support from BCHC
- Age-friendly Communities grant funding from UBCM

8. Please indicate the health authority region in which your Indigenous government or local government is located. Please also indicate if your community is served by the First Nations Health Authority.

- Fraser Health
- Interior Health
- Island Health
- Northern Health
- Vancouver Coastal Health
- First Nations Health Authority

9. Do you have an existing relationship with your health authority(ies)?

- Yes
- No

10. If you have an existing partnership with your health authority(ies), please provide key contact information for each.

Primary health authority contact name:

Primary health authority contact position:

Primary health authority contact email:

Primary health authority contact phone:

Secondary health authority contact name:

Secondary health authority contact position:

Secondary health authority contact email:

Secondary health authority contact phone:

11. Have you discussed this plan/project with your local health authority?

- Yes
- No
- Other - Write In

12. If yes, indicate what discussions have occurred, and if the local health authority is supportive of the initiative.

Overview and Workplan

13. What is the name or proposed title of your plan/project?

14. What are the Age-Friendly Community components that are the focus of your plan/project

- Outdoor spaces and buildings
- Transportation, including traffic safety
- Housing
- Social well-being and participation
- Respect, social inclusion, and cultural safety
- Community engagement and employment
- Communications and information
- Community support and health and wellness services

15. Participation of older adults.

Please identify how this plan/project includes the participation of older adults. Please check all that apply and describe their direct participation in the space provided below.

- Age-friendly Assessment
- Inclusion of Age-friendly planning principles in the OCP/CCP/other Plans
- Age-friendly Action Plan
- Other - Write In

16. Describe the direct participation by older adults in your proposed plan/project.

17. What is your target population(s) and why? Please describe any target population(s) within the overall older adult population. Please refer to the **grant application guide** for more information.

18. What is the purpose of the plan/project? (i.e., What do you intend to achieve?)

19. What are the intended outcomes/What changes do you anticipate as a result of this plan/project?

Overview and Workplan (continued)

20. How will this plan/project make your community more age-friendly?

21. Please describe the activities that you plan to complete. Please be as specific as possible. Please refer to pages 13 - 14 of the **grant application guide** for a sample workplans.

22. How will you apply an equity lens to your plan/project? Please refer to page 6 of the **grant application guide** for more information on using an equity lens in AFC planning.

23. How will you know if your plan/project is successful?

Overview and Work Plan (continued)

24. How will you track progress?

"Stream 1 Planning Grant only (completing an age-friendly assessment and developing an action plan).

25. Please share any ideas you have to follow this planning phase with implementation of actions you may outline in your action plan.

For Stream 2 Projects Grant (project implementation) applications only

26. Please share any ideas you have to sustain the benefits of this project beyond the grant period.



Overview and Work Plan (continued)

27. Is the proposed plan/project building on previous work in your community?

- Yes
- No
- Not sure

28. If yes to question 27, please tell us the previous plan/project name and how the current proposed plan/project will build on this previous work.



29. **"Stream 2 Projects Grant (project implementation) applications only:**

Please indicate if this project reflects one or more of the Health Promotion Initiatives for older adults. Please refer to page 9 of the **grant application guide**. *This question is not mandatory, but applicants are encouraged to respond if they are able.*

- Accessibility 2024
- Better at Home
- Provincial Guide to Dementia Care in British Columbia
- Aging Well
- Physical Activity Strategy
- Provincial End of Life Care Action Plan for BC
- Other initiative(s) that are important to/within your community that are reflected in this AFC project - Please Write In

Collaboration and Key Partners/Stakeholders

30. Which partners, including health authorities and potential collaborators in other sectors, will be involved in your plan/project? Using the table below, please list a) any partner organizations; b) a short description of how they will be involved and c) a specific contact person within each organization, if known.

Example categories include: Indigenous government and/or Indigenous organizations; Older adult-serving organizations (e.g., groups, clubs); Community organizations in general; Other local governments (e.g., municipalities, regional districts); Other partners (e.g., school districts, specific older adults, community businesses).

	Proposed Partner Organization	Proposed Roles and Responsibilities	Contact Name
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>

31. Please check any of the following that your community has completed:

- Established an age-friendly advisory group or steering committee that includes the active participation of older adults. An existing committee can also take on this mandate.
- Passed a local government council/board resolution or band council resolution to actively support, promote, and work towards becoming an age-friendly community. As an alternative, local governments may have chosen to commit to being age-friendly through specific goals, objectives, or policies in an official community plan or strategic plan.
- Conducted an age-friendly assessment in consultation with older adults.
- Developed and published an action plan.
- None of the above

32. If none of the above apply (in question 31), please describe any other processes or deliverables your community has undertaken for consideration of age-friendly recognition.

33. This AFC Grant Program aligns with the BC **Age-friendly BC Community Recognition Program** administered by the BC Ministry of Health. Does this Indigenous government or local government currently have Age-friendly BC Community Recognition Status?

- Yes
- No

34. If no was selected, can the BC Ministry of Health contact you to discuss completing age-friendly community recognition?

- - No
-

In-kind Supports

35. The Age-friendly Communities Grants include a cash award as well as in-kind support from BC Healthy Communities staff. What support do you anticipate, if any?

Check all that apply:

- Support in development of project, including planning & design, monitoring and evaluation
 - Research support (e.g., environmental scans, sourcing literature or other resources)
 - Document review & providing feedback
 - BCHC staff participation on advisory committees
 - Accessing resources developed by BCHC (e.g., Live webinars, Action Guides, other tools and resources, newsletters, on-demand webinars)
 - Online training (e.g., training on the use of an equity lens in AFC planning)
 - Connecting you with your Health Authority or other organizations
 - Development of community engagement processes (e.g., planning and/or design support, including facilitation design)
 - Development of data collection tools (e.g., surveys, interview guides)
 - Developing monitoring and evaluation frameworks including the development of indicators
 - Other - Write In
 - We do not anticipate needing any support from BCHC.
-

Budget and Workplan

Please use the linked [budget and workplan template](#) to complete this section of the application and to upload your council resolution or equivalent.

The budget helps us to understand how you propose to spend any grant monies, any additional resources you may have, and what your activities will cost.

In the workplan, please include a) milestone or action, b) a brief description of the milestone/action, c) anticipated date of its completion, d) who is responsible for the milestone/action, and e) if you anticipate BCHC staff support to complete this milestone/action. This helps us to understand your proposed timelines, and plan for BCHC in-kind support.

36. I would like to [Select one]:

- upload the budget and workplan files.
- email the budget and workplan files

Formal Council, Board or Band Support

38. Please upload your council/board resolution, band council resolution, or equivalent.

I would like to [select one]:

- upload the resolution.
- email the resolution.

Previous Age-friendly Plans

For Stream 2 Applications where the applicant has not previously received AFC funding from UBCM or BCHC in past ONLY

You have indicated that you are applying for Stream 2 - Projects, and that you have not received previous funding through Stream 1 to develop an Age-friendly Communities plan.

Please share the Age-friendly Communities plan, assessment, or equivalent which will guide this project.

40. I would like to share the Age-friendly Communities assessment or plan that will be used to guide this project by

- uploading the document.
- emailing the document.
- sharing a hyperlink to where the document is published on a website.

43. Please provide any additional information about this assessment or plan, and how it relates to your proposed project, that may be useful. (For example, specify the relevant pages of the document, if only one section of the document applies to this grant application).

Additional Files

44. Do you have anything else to add that we should know about your plan/project? (e.g., plan/project is coordinated with a sister city; measurables that will be applied to monitor the success of this planning process to monitor the success of the planning process or project)?

45. Do you have any additional files to include that support your application (e.g., presentations, diagrams, pictures, stories)? *Please note that letters of support from plan/project partners are strongly encouraged. Up to three letters of support as evidence of partnership or collaboration can be included in this section.*

- Yes
- No

46. (If yes,) I would like to [select one]:

- upload the additional documents.
- email the additional documents.

Emailing supporting documents

IF you indicated you wished to supply the following documents by email:

Please submit documents not uploaded earlier in the application by email now.

To assist in matching documents to your application, make sure to include the name of the applying Indigenous or local government in the email body.

[Click here to send the documents now.](#)

Staying in Touch

48. Please tell us how you heard about this grant opportunity. BC Healthy Communities newsletter

- PlanH newsletter
- Email from BC Healthy Communities
- Health authority
- Social media - write In platform

- Email from another organization
- Word of mouth
- Other - Write In

49. Would you like to subscribe to our BC Healthy Communities newsletters to hear about other funding opportunities, learning events, community stories and more? This includes the BCHC newsletter and one from another BCHC program, the PlanH newsletter.

- Yes, please!
- No, thanks

50. IF YES: Great! Please provide the email address you would like to use:

Submit your application

Ready to submit your application? Please make sure you have reviewed everything before submitting.

You will receive a confirmation email within one hour of submission, which includes a copy of your submission; if you do not receive confirmation of your submission, please contact grants@bchealthycommunities.ca.

Thanks, and we look forward to learning about your community and potentially working with you on your proposed project.

Thank You!

Thank you for applying for **the Age-friendly Communities Grant program**. Your application has been received.