

Healthy Environment – Active Living (HEAL) FUNDING APPLICATION FORM

CONTACT INFORMATION		
Name of applicant	Date	
Organization	Community	
Phone, Fax, Email		
ABOUT THE ACTIVITY		
What do you want to do?		

When will your activity start?	When will your activity end?	

How many sessions are you planning?	What will be your target group(s)?

What will the money be used for?

How will you measure whether your activity is a success?

Who else is involved?

What are the other funding sources?

Return completed form to:

Wally Rabbitskin Program Officer for Physical Activity <u>wrabbitskin@ssss.gouv.qc.ca</u> Phone: (418) 923-2204 ext. 42365 Fax: (418) 923-2786 Catherine Godin Program Officer for Chronic Diseases <u>catherine.godin@ssss.gouv.qc.ca</u> Phone: (418) 923-2204 ext. 42364 Fax: (418) 923-2786

Regional Public Health Department - Cree Board of Health and Social Services of James Bay 260 Main Street, Mistissini (Qc) GOW 1C0

What is H. E. A. L.?

H.E.A.L. stands for **Healthy Environment - Active Living**. It is a project from the Public Health Department of the Cree Health Board that makes funding available for communities to help them develop and realise healthy lifestyle activities. This includes activities that promote physical activities and healthy eating habits with a component on health education and/or skill development.

Please **read this page carefully before** writing your application, since some application criteria for the funding have been added.

ACTIVITIES FUNDED BY H.E.A.L.

Activities aiming to promote healthy eating and improve community food security, such as:

- Cooking class, nutrition workshop
- Community kitchen, collective kitchen, soup kitchen
- Community garden, greenhouse
- Traditional food preparation techniques
- Nutrition month (educational booth, food tasting, etc.)

Activities aiming to improve physical activity level:

- Community walks
- Winter fun (family challenge, winter triathlon)
- Summer active (100-mile challenge, running events)
- Traditional activities (snowshoeing, skiing, canoeing, dancing club)
- Youth activities (soccer program for girls and boys, after school running club, active school and walk to School programs)
- Healthy lifestyles at workplace
- Physical activity month (sports and physical activity week)

Other activities:

- Yearly *Drop the Pop* activities as part of Nutrition month and/or Oral health month
- Yearly Diabetes month activities
- Cultural events that focuses on physical activities and healthy eating

CONDITIONS TO APPLY

- 1. Food-related activities funded by H.E.A.L. must follow the CBHSSJB Nutrition Policy:
 - Be based on Eating Well with Canada's Food Guide First Nations, Inuit and Métis
 - Put an emphasis on cultural food
 - Provide healthy and nutritious food
 - Be environment-friendly

For more information about the CHBSSJB Nutrition Policy, go to: http://www.creehealth.org/sites/default/files/Nutrition%20Policy-withAnnexes%202012.6.12.pdf

- 2. The activity must follow clinical best practice guidelines, as well as applicable ethical guidelines, and be:
 - recurring
 - free or low-cost for participants
 - safe and accessible to people with disabilities
 - carried out in a way that respects the environment
 - cost-effective
- 3. All activities related to nutrition and food security will need to be accompanied by regular intervention of the local nutritionist.
- 4. The Cree Health Board, the local Bands (including Head Start program, Recreational department), the community schools and Youth Fusion can apply for H.E.A.L. funding; **partnership** must be established between those entities to facilitate activities and avoid their duplication (only one application per activity will be approved).
- 5. Please note that some restrictions may apply. You cannot use H.E.A.L. funding for...
 - Honorariums or salaries
 - Food production intended for sale
 - Equipments such as small electrical appliances intended as gifts
 - Kitchen equipments already purchased with H.E.A.L. funding in the previous years

HOW MUCH MONEY IS AVAILABLE

Maximum funding per application is \$2 500, with a yearly limit of \$15 000 per community

Use your imagination... Many worthwhile activities are free!

PROCEDURE

- 1. Fill out the *Funding Application* form: write detailed information about your planned activity and how the money will be spent.
- 2. Fill out the *Cash Advance for Program Activity* form (found on the last page of this document). This will allow you to receive 75% of the requested amount in a timely matter. Beside information about yourself and your activity, we will need you to:
 - Breakdown your budget for this activity
 - Date and sign the form
 - Have your immediate supervisor or the director to date and sign the form
 - Specify if you want to receive this advance by cheque or by direct deposit
 - Provide us with a cheque specimen or banking information (to be done for the first request only)
- 3. Fax or email both forms to the Regional Public Health Department of CBHSSJB in Mistissini, for approval and authorization of payment.
- 4. Each application will be evaluated by the diabetes team of the Cree Health Board, chaired by Paul Linton, Assistant Director, Chishaayiyuu Team, Regional Public Health Department, Pimuhteheu, CBHSSJB.
- 5. You will be notified either by email or by phone, whether or not your proposal is accepted.
- 6. One of the Public Health officers will send the *Cash Advance* form to the financial resources department.
- 7. To get the balance of the requested amount (25% or less depending on the total amount spent), the employee who received the funds will have to:
 - Fill out a Travelling Expenses form (TE)
 - Include all original receipts
 - Complete the H.E.A.L. evaluation form
 - Include written or photographic record of your activity (if available)
 - Send all those documents to the Regional Public Health Department of CBHSSJB in Mistissini

Evaluation is an important element of H.E.A.L. On-going federal funding will be based on evaluation results. It is important for the CBHSSJB to demonstrate that the funding is properly used.

So whether you request for a balance of payment or not, the following documents must be accounted for, within the month following your activity, in order to apply for a new H.E.A.L. funding:

- Completed evaluation form for each application
- Original receipts or audited budget
- Written or photographic record of the activity (if available)

H. E. A. L. Evaluation Form

Name of applicar	nt		Community		
Activity title (as m	nentioned on the appli	cation form)			
Start date			End date		
Target group(s)			Number of s	essions (or frequend	cy)
Participant numb					
Total	Males	Females	Awash (Children 0-9)	Uschiniichisuu (Youth 10-29)	Chishaayiyuu (Adults 30+)
Other partners in	volved in the projec	t			
How was your bu	dget spent?				

Would you do this activity again? Please explain

What would you improve?

Did you reach the target group(s), as planned? Please explain

Comments

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	Place of Activity:				
BUDGET BREAKDOWN					
	Description		Total		
		GRAND TOTAL			
	75% C	F REQUESTED AMOUNT			
Employee signature:		Date:			
Approved by:(Director or In		Date:			
(2					
□ Cheque or □ Direct deposit (Please check one) required by:				
For the first request, please prov	vide either a cheque specimen	or the following banking inf	ormation:		
Institution name	Transit	Institution number	Account number		
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For Public Health department us	e only				
rorradic realtracpartment us	c only	Budget code	Amount		
Annual by the					
Approved by: (Person respo	onsible for budget)				

Fax the completed form at (418) 923-2786 or send it to: Catherine Godin, Program Officer for Chronic Diseases - <u>catherine.godin@ssss.gouv.qc.ca</u> Wally Rabbitskin, Program Officer for Physical Activity - <u>wrabbitskin@ssss.gouv.qc.ca</u>