

ACTION Mini-GRANT GUIDELINES

The Vancouver General Hospital (VGH) Trauma Services is excited to provide this funding opportunity for innovative community-driven projects, partnerships and initiatives that promote the prevention of injuries, and thereby, improve the quality of life of residents living in the Vancouver Coastal Health region. ACTION Mini-GRANTS range from \$500 to \$1,500 in value.

“Most injuries are predictable and preventable.”

Priority Funding Areas

ACTION Mini-GRANTS are available to non-for-profit organizations and local governments for projects, partnerships and initiatives that serve residents in all or parts of the Vancouver Coastal Health region (Vancouver, Richmond, North Shore, Sunshine Coast, Powell River, Sea-to-Sky and/or Central Coast). Priority is given to initiatives that address at least one of the following VGH Trauma Services priority areas:

- Seniors Falls Reduction
- Mental Wellness
- Sports Related Injuries
- Road Safety (drivers, pedestrians, bicyclists)
- Alcohol Related Injuries

For more information regarding these priority areas, please read the corresponding ACTION Mini-GRANT Issue Briefings.

Funding Principles

ACTION Mini-GRANTS fund initiatives that...

- **LAST** – your project has a good chance of living on after the funding ends.
- **MAKE A DIFFERENCE** – your project will broadly impact your community in a positive way.
- **SUPPORT COLLABORATION & PARTNERSHIP** – your project will encourage diverse groups to work together toward a common goal.
- **REDUCE INJURIES** – your project will reduce the risks and impacts of injuries through education, awareness and action.
- **ACT UPSTREAM** – your project is aimed at the root causes of injury. In many cases, upstream action addresses social, economic and environmental conditions.

Other Funding Criteria

- Applicants must be a registered non-profit society or local government in British Columbia with an independent, active governing body (e.g., Board of Directors, Municipal Council, etc.) and be in good fiscal, operational and administrative standing.
- All proposed activities must be completed, and all funding spent, before May 15, 2019. ACTION mini-GRANTS are awarded as one-time-only funding. Previous recipients of ACTION Mini-GRANTS may apply again but for a different initiative, or for an enhancement or expansion to a previously funded initiative.
- Eligible Expenses can include labour and non-labour expenses related to the delivery of the injury prevention initiative. Grants do not cover research, capital expenditures, ongoing operational expenses, or direct welfare supports and services that clearly fall under the mandate of other government bodies.
- Grant recipients must complete a brief Activity and Expenses Report upon completion of their project by June 1, 2019. These reports must be submitted by the date(s) specified in the grant contract. These reports must be completed using the templates and forms provided by VCH. Submitted reports and accompanying materials become the property of Vancouver Coastal Health. Reports enable VCH to explain how and where the funds were used, as well as, its impact on communities.

Questions?

If you have any questions about the ACTION grants, please do not hesitate to contact VCH Community Investments at 604.714.3780 | ComminvestApplications@vch.ca.

Application Deadline

Applications must be received by email before 5:00pm on June 28, 2018. Please email your completed application to ComminvestApplications@vch.ca.

**2018 ACTION Mini-GRANT
Application Deadline: 5pm on
June 28, 2018**

APPLICATION

STEP 1: Who? Where? Funding Criteria?

Name of Organization:		
Mailing Address:	City:	Postal Code:
Contact Person:	Contact Phone:	Contact Email:
Project Name:		Total Requested Amount:
<p>Which of the VGH Trauma Services Priority Areas does your initiative address? Check all that apply.</p> <p><input type="checkbox"/> Seniors Falls Reduction</p> <p><input type="checkbox"/> Road safety (drivers, pedestrians, cyclists)</p> <p><input type="checkbox"/> Alcohol-Related Injuries</p> <p><input type="checkbox"/> Sports-Related Injuries</p> <p><input type="checkbox"/> Mental Wellness</p>	<p>What is (are) the target group(s) for your injury prevention initiative? Check all that apply.</p> <p><input type="checkbox"/> Men</p> <p><input type="checkbox"/> Women</p> <p><input type="checkbox"/> Adults</p> <p><input type="checkbox"/> Youth</p> <p><input type="checkbox"/> Seniors</p> <p><input type="checkbox"/> Community</p> <p><input type="checkbox"/> Other: _____</p>	
<p>Which of the Guiding Principles of the ACTION Mini GRANTS does your initiative meet? Check all that apply.</p> <p><input type="checkbox"/> LAST – your project has a good chance of living on after the funding ends.</p> <p><input type="checkbox"/> MAKE A DIFFERENCE – your project will broadly impact your community in a positive way.</p> <p><input type="checkbox"/> SUPPORT COLLABORATION & PARTNERSHIP – your project will encourage diverse groups to work together toward a common goal.</p> <p><input type="checkbox"/> REDUCE INJURIES – your project will reduce the risks and impacts of injuries through education, awareness and action.</p> <p><input type="checkbox"/> ACT UPSTREAM – your project is aimed at the root causes of injury. In many cases, upstream action addresses social, economic and environmental conditions.</p>	<p>Provide a brief description of your group/organization:</p>	

STEP 2: What? Why? and How?

Describe the goals of your injury prevention initiative. What do you hope to accomplish?

How did you determine there was a need for this project? Please reference any data, past needs assessments, reports, or research, etc. to support your answer.

Describe the process you will undertake to implement your initiative. Please provide details.

Which groups or organizations (if any) will you be partnering with for your injury prevention initiative? Please provide details.

What are your plans to sustain (continue) this injury prevention initiative beyond this grant funding?

STEP 3: Proposed Project Budget

	Amount (\$) being requested as an ACTION Mini- GRANT	Amount (\$) secured from other sources Please specify source(s) of funding or in-kind contributions in "Notes" column.	Notes (e.g., additional details, additional breakdown, etc.)
Project Staffing Costs (e.g., Program Coordinator, Assistant, contracted service, etc.). Please specify below.			
Project Supplies/Services Please specify below.			
Other Project Costs Please specify below.			
<u>TOTAL PROJECT COSTS</u>	TOTAL Amount (\$) being requested as an ACTION Mini- GRANT	TOTAL Amount (\$) secured from other sources	
<i>Any additional explanatory notes you would like to include regarding your project budget?</i>			

STEP 4: Submit your Application

Applications must be received by email before 5:00pm on June 28, 2018.
Please email your completed application to ComminvestApplications@vch.ca

Questions?

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