

Care for Staff Application User Guide

Getting Started

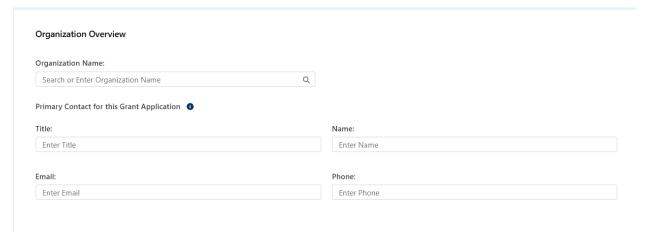
This guide will walk you through each section of the **Care for Staff 2.0 Grant Application**. It explains how to complete the online form, what to include, and how to ensure your submission is accepted successfully.

Tip: You will see a small "i" icon next to some fields throughout the form. Hover your mouse over this icon to view helpful hints or extra guidance.

Section 1: Organization Overview

This section captures basic information about your organization and the main contact people involved in the grant application.

Organization Overview



Begin typing your organization name in the search bar. A drop-down list will appear if your organization is already in our system.



• If you do not see your organization listed, do not panic. Simply type your full organization name manually — the form will still accept it.

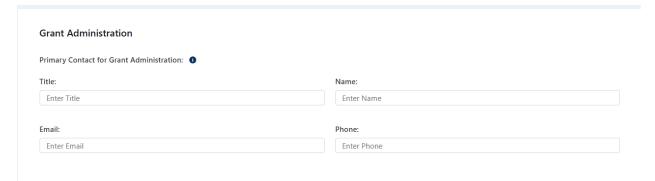
Primary Contact for this Grant Application

This is the main point of contact we will reach out to if we have questions about the application.

Please include:

- Title
- Full name
- Email address
- Phone number

Section 2: Grant Administration Contact



This section is for your **financial or administrative contact** — the person responsible for managing payments or documentation related to funding.

Please include the same details as above (title, name, email, phone).



Section 3: Type of Funding Requested

Type of Funding Request	ted	
Please indicate whether the	funds requested will be used to support:	
Site-based initiative(s)	Multi-site or organization-wide initiative(s)	○ Both

This section helps us understand how your organization plans to use the funding.

Please select one of the following:

• Site-based initiative(s):

Choose this if your organization has **one site**, or if multiple sites are each submitting **individual**, **site-specific projects**.

Multi-site or organization-wide initiative(s):

Choose this if your organization plans to **pool funds across multiple sites** to support a single, larger project.

• Both:

Choose this if you plan a combination approach — for example, if several Calgary sites are collaborating on a shared initiative, while other sites across Alberta are running independent wellness projects.

Section 4: Eligible Worksites

This section allows you to add each eligible site included in your application.

If you only have one site, you will still need to complete this section once.



Eligible worksites: Click on plus icon + to add worksite(s)	•	
Eligible Worksite Detail:		
Total number of worksites included in application:		
0		
Total number of expected participants across all worksites included in this application:		
0		

1. Add a Site

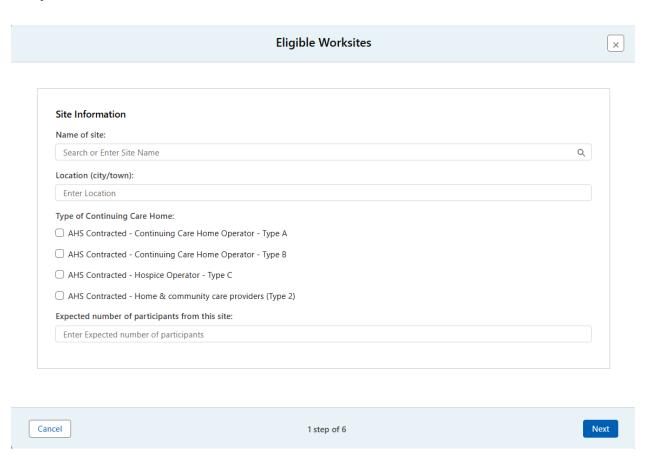
Click the "+" icon on the right-hand side to open the pop-up window.

You will see six steps at the bottom of the pop-up window — each step must be completed before saving your site.

Tip: Hover over the small "i" icons beside each field to see short explanations and helpful examples.



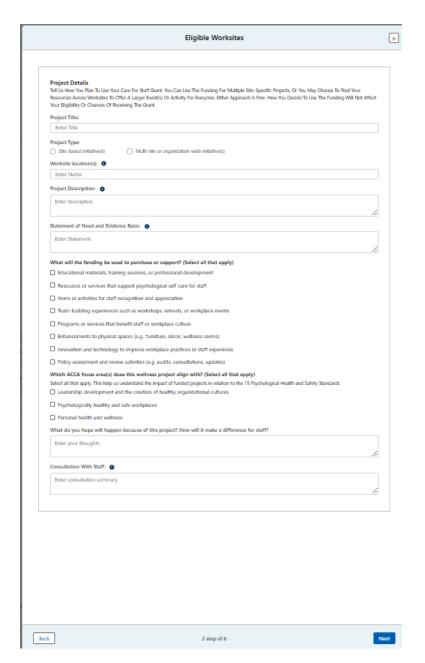
Step 1 of 6: Site Information



- Name of Site: Start typing your site name if it appears, select it. If not, you can type it in manually.
- Location: Enter the city or town where the site operates.
- Type of Continuing Care Home: Select the category that applies:
 - AHS Contracted Continuing Care Home Operator Type A
 - AHS Contracted Continuing Care Home Operator Type B
 - o AHS Contracted Hospice Operator Type C
 - AHS Contracted Home & Community Care Provider (Type 2)
- **Expected Number of Participants:** Enter the total number of staff you expect will take part in this wellness project.



Step 2 of 6: Project Details



Provide a clear overview of the wellness project you plan to implement.

- Project Title: Enter a short, descriptive name for your project.
- Project Type: Choose whether the project is site-based or multi-site/organizationwide.



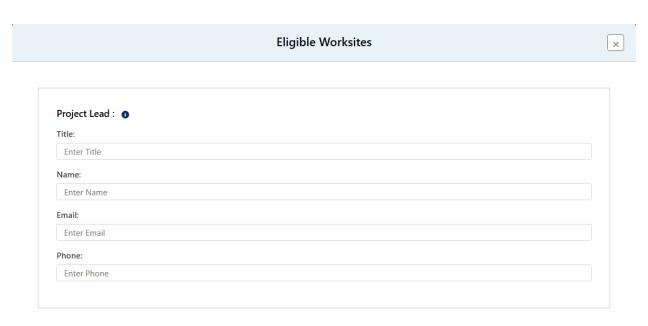
- Worksite Location: Identify which site this project relates to.
- **Project Description:** Briefly explain what the project is about and what activities it includes.
- Statement of Need and Evidence Basis: Describe why this project is needed and how it connects to evidence-based practices (refer to the Evidence-Based Initiatives resource list if needed).

Then select all applicable options for:

- **Funding Use:** What the funds will support (training, wellness programs, teambuilding, etc.).
- **Focus Area Alignment:** Indicate whether your project aligns with leadership, psychologically healthy workplaces, or personal health and wellness.
- **Expected Outcomes:** Explain what you hope will happen as a result how this project will make a difference for staff.



Step 3 of 6: Project Lead





The **Project Lead** is the individual responsible for coordinating and facilitating the project day-to-day.

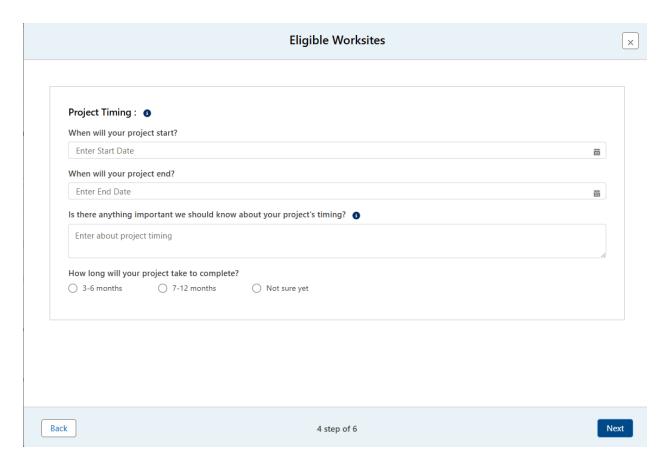
Please provide:

- Title
- Full name
- Email address
- Phone number

Tip: The Project Lead can be different from the Grant Administrator or the Primary Contact — this person is usually the on-site manager or team member overseeing the project activities.



Step 4 of 6: Project Timing

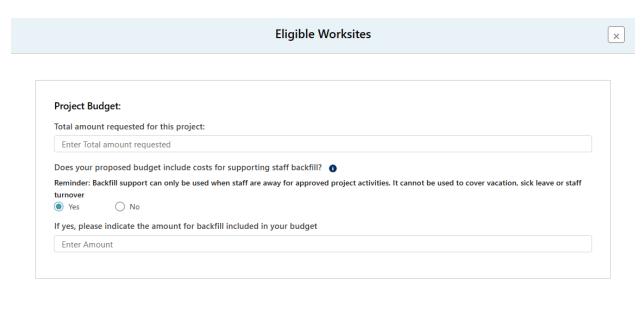


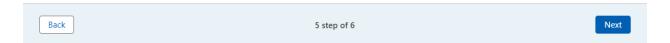
Indicate the timing of your project.

- **Start and End Dates:** Use the calendar selector to choose your proposed start and end dates.
- **Project Notes:** If there is anything specific about your timing (e.g. alignment with staff training schedules or seasonal activities), add it in the notes field.
- **Project Duration:** Select whether your project will run for 3–6 months, 7–12 months, or if you are not sure yet.



Step 5 of 6: Project Budget





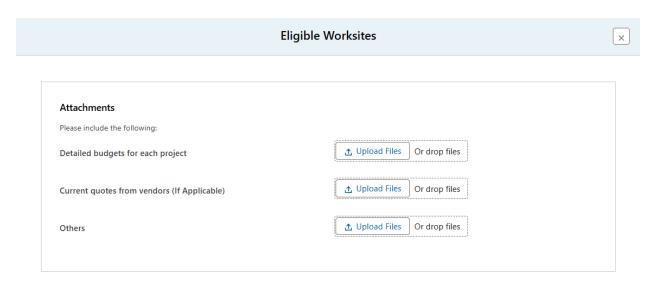
Enter the budget information for this site.

- Total Amount Requested: Enter a whole number only (no decimals).
- Backfill Support: Indicate whether your budget includes backfill costs for staff participating in project activities.
 - Backfill funding can only be used when staff are away from regular duties for approved project activities (training, planning, evaluation).
 - o It **cannot** be used for vacation, sick leave, or turnover coverage.
- If you select Yes, enter the estimated amount of backfill included in your total.



Step 6 of 6: Attachments

You will need to upload at least one file before saving.





Required attachments:

- **Detailed Budget:** A budget breakdown is mandatory. You can use the *[Care for Staff Budget Template]* provided, or upload your own internal budget document.
- Quotes (if applicable): Include vendor quotes or estimates if relevant to your project.
- Other Supporting Documents: You may add any other materials that help explain your project.

Tip:

If a file is too large to upload, please complete and submit your application first, then



email the file(s) to <u>careforstaff@ab-cca.ca</u> with your organization name in the subject line.

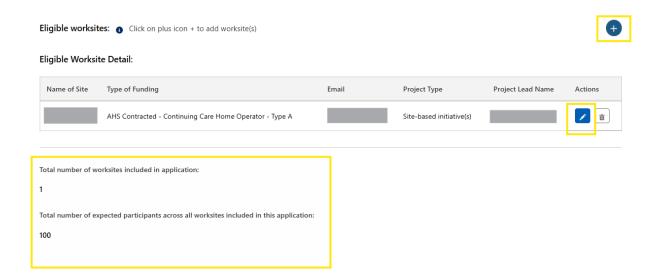
Once all six steps are complete, click **Save**. You will return to the main application screen, where your total number of worksites and participants will automatically update.

Note: You must complete this six-step process **for every site** included in your funding request.

Each site listed in your application requires its own set of project details, budget, and attachments before the application can be submitted.

After you click **Save**, your site will appear in a summary table on the main application screen.

You will see columns showing the **site name**, **funding type**, **project type**, **and project lead name**.

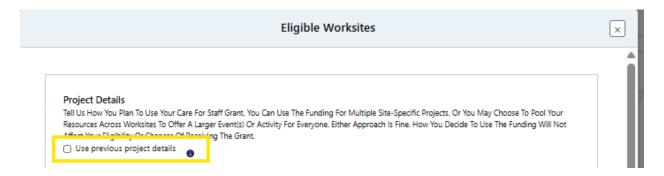


The **total number of worksites** and **total number of expected participants** will update automatically based on the information you entered.

If these totals look incorrect, or if you need to make changes to a site, click the **small blue pencil icon** beside the site name to reopen and edit that site's details.



If you are applying for **multi-site projects** or have multiple sites using similar initiatives, you can save time by clicking **"Use previous project details"** when adding a new site.

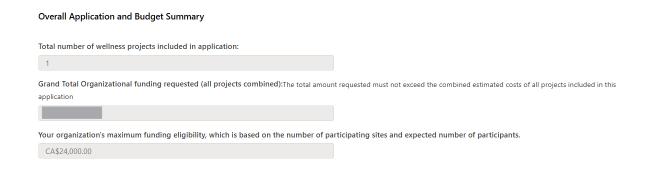


This will automatically copy all the project information from your previous entry, so you only need to adjust the **site-specific details** such as participant numbers, funding amounts, or minor project variations.

Important:

Be sure to carefully review each duplicated entry before saving. Incomplete or mismatched information between sites may delay review or require follow-up before your application can be processed.

Section 5: Overall Application and Budget Summary



Once all sites have been added, this section will display a summary of your total request:



- Total number of wellness projects included in the application
- Grand total organizational funding requested (all projects combined)
- Your organization's maximum funding eligibility automatically calculated based on the number of participating sites and expected participants.

Note:

These figures are **auto-calculated estimates** based on the information you entered. They are provided as a **reference tool only** and **do not guarantee funding approval or final allocation amounts.**

Final funding decisions will be determined through the review and approval process.

Section 6: Acknowledgement and Declaration

	Acknowledgement and Declaration			
	By submitting this application, I/we confirm that:			
	All information p	All information provided is true, complete, and accurate to the best of our knowledge.		
	○ Yes	○ No		
	We have reviewed the funding guidelines, terms, and conditions, and agree to comply with all requirements.			
	○ Yes	○ No		
	Our organization has the capacity and resources to complete the proposed project(s) within the stated timeline.			
	○ Yes	○ No		
	We will administer grant funds across all participating sites as outlined in this application.			
	○ Yes	○ No		
Upon completion, we will coordinate and administer a follow-up survey provided by ACCA for each individual project and/or for the organization.				
	○ Yes	○ No		



Before submitting, please review the statements carefully.

You must select **"Yes"** for each item to proceed — this confirms that your organization understands and agrees to the terms of participation.

By submitting this application, you confirm that:

- All information provided is true, complete, and accurate.
- You have reviewed the funding guidelines, terms, and conditions, and agree to comply.
- Your organization has the capacity and resources to complete the proposed project(s) within the stated timeline.
- You will administer grant funds across all participating sites as outlined in your application.
- Upon completion, your organization will coordinate and administer a follow-up survey provided by ACCA for each individual project and/or the organization overall.

When all statements have been confirmed, click **Save** to complete your submission.

Final Review and Submission

Once your application has been saved:

- 1. **Review your entries carefully** to ensure all sites, budgets, and attachments are complete.
- 2. **Verify totals** check that the total number of worksites, participants, and funding amounts display correctly.
- 3. Submit your application.

After Submission

After submission, you will receive an **email confirmation** at the address listed for your **Primary Contact** for your records.



Tip: If you do not receive the confirmation email within 24 hours of submitting, please check your junk or spam folder. If it does not appear there, contact careforstaff@ab-cca.ca to confirm your submission status.

Need Help?

If you encounter issues or have questions while completing your application, email careforstaff@ab-cca.ca.

Our team is happy to assist you.