COVID-19 Support Fund Application Guide

# Overview

## Support Fund Description

The COVID-19 Victim Services and Violence Against Women Support Fund (Support Fund) is intended to contribute towards incremental costs incurred by service providers as a result of the pandemic. Funding will be provided via a one-time grant and is not to be considered ongoing funding. Stipulations on the use of the funds will be in place and grant recipients will be required to report back on use of the grant funding provided.

 B.C.’s Temporary Pandemic Pay (TPP) program, which supports health, social services and corrections employees delivering in-person, front-line care during the COVID-19 pandemic is administered through a separate process from the support fund[[1]](#footnote-1).

## Applicant Eligibility

Only agencies currently contracted by the ministry for the delivery of victim services and violence against women programs are eligible for funding under this program, which includes:

* Community-based victim service programs
* Police-based victim service programs
* Outreach programs
* Multicultural outreach programs
* PEACE programs
* Stopping the Violence counselling programs

## Eligible Expenses

The following are eligible expenses:

* Additional staffing costs related to staff shortages, increased overtime and services demands (from March 16 to May 31, 2020) for direct service delivery positions and those in positions providing support for the delivery of services to clients (e.g. program assistant, intake worker, program support workers)
* Incremental Travel expenses (from March 16 to May 31, 2020)
* Remote service delivery technology
	+ Laptops
	+ Online platform subscriptions (such as Zoom)
	+ Contribution towards the cost of cellphones
	+ Webcams
* Personal Protective Equipment (PPE)
	+ For example: face masks, face shields, gloves
* Engineering Controls
	+ For example: plexiglass barriers

## Application Process

Only one application per agency is required. The application form is in 2 parts.

* **Part 1 – Applicant Information:** You are only required to complete Part 1 once.
* **Part 2 – Funding Requested by Program**: For each program you are applying for you will need to complete a separate “Funding Requested by Program” form.

Please ensure that your application package is complete and includes all necessary forms. For example, if you are applying for funding for three separate programs, your application package should include the completed Part 1 - Applicant Information form, as well as three separate Part 2 forms (one for each program).

Completed application packages must be emailed to VictimServices@gov.bc.ca

**Deadline for application: September 9, 2020**

Should you have any questions regarding the application, please contact Sarah Rehimi via email at VictimServices@gov.bc.ca or phone at 778-572-3605.

# Application Form Part 1 - Applicant Information

## Contact Details

Please fill in this section of the application form with your organization’s contact details. Please include at least one contact person, preferably two, to ensure that communication with your organization remains timely during the application process. Community Safety and Crime Prevention Branch staff may contact you during the application assessment process to request clarifications if needed.

## Other Sources of Funding

You will be required to disclose if you have applied for or received other sources of funding or support for the same or similar purposes for which you are requesting funding through this application. Other sources of funding include but are not limited to federal funding (i.e. Emergency Community Support Fund, support for women’s shelters and sexual assault centres, etc.), provision of technology through other agencies, local government contributions, etc. Please list:

* All other sources of funding
* Status of the funding (e.g. if you have already received the funding, or if you have applied and are awaiting a decision)
* Description of what the funding is/will cover (e.g. number of laptops, additional staffing hours, number of PPE, etc.)

Other funding received will be considered when determining the funding that will be provided through this support fund. Please notify the branch if your agency receives funding through another source after submitting this application.

Please ensure that any needs that were not met through these other sources of funding are included in your Application Form Part 2 for the respective program.

**EXAMPLE:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Funding Source | Status | Description | Contribution Type | Total Amount |
| *Example: Telus* | [ ]  *Applied*[x]  *Received* | *5 cellphones for staff* | [x]  *In-kind*[ ]  *Cash* | *$2,580* |
| *Example: EVA BC* | [ ]  *Applied*[x]  *Received* | *PPE supplies for staff* | [x]  *In-kind*[ ]  *Cash* | *$400* |
| *Example: Government of Canada* | [x]  *Applied*[ ]  *Received* | *Emergency Community Support Fund application for laptops (3) and cellphones (3)* | [ ]  *In-kind*[x]  *Cash* | *$6,200* |

# Application Form PART 2– Funding Requested by Program

## Section A - Program Details

You will be required to fill in the table indicating which program type you are applying for, the service hours for this program, and the number of staff that are currently delivering the services of this program.

For example, if you are applying for a PEACE program you deliver for 35 service hours that is staffed with two part-time employees, you should:

* Check the PEACE checkbox in the Program Type column,
* Enter 35 hours in the Service Hours column, and
* Enter 2 in the Number of Staff Currently Delivering Services column.

Remember to fill in **one Part 2 form for each program that you are applying for**. This means that if you are contracted to deliver 2 CBVS programs and are applying for funding for both, you will need to complete a Part 2 form for each of them.

## Section B - Technology

Technology and related resources eligible for funding include

* Laptops,
* Online platform subscriptions such as Zoom,
* Contribution to the costs of cellphones (if your agency has opted to get a plan, the ongoing costs of the cellphone plans will need to be included in your program budget), and
* Webcams.

Requests for other items may be considered on a case by case basis.

A clear itemization of each request is required. A separate line in each table is required to be completed for each separate eligible expense being requested and should include:

* a clear description of the request
* rationale for the request (e.g. laptop needed for staff working remotely, etc.)
* time period for the request if applicable (e.g. 1 year Zoom subscription)
* number of items being requested (e.g. a request for 2 laptops, or 3 Zoom subscriptions, etc.)
* total expenses (either estimated or actual)
* expense status (either purchased or to be purchased).

**EXAMPLE:**

|  |  |  |  |
| --- | --- | --- | --- |
| Item/Service and Rationale | Quantity | Total Expenses (Actual or Estimated) | Expense Status |
| *Example:* *Laptops for staff working remotely since March 17, 2020 and to continue for the foreseeable future as per WorkSafeBC protocols*  | *2* | *$2,347 ($1,173.50 each)* | [x]  *Purchased*[ ]  *To be Purchased* |
| *Example: Zoom subscriptions (1 year each) for staff to continue to deliver services to clients remotely (have been delivering since March 18, 2020)* | *3* | *$360 ($120 each)* | [x]  *Purchased*[ ]  *To be Purchased* |
| Total | N/A | $2,707 | N/A |

## Section C - PPE/Engineering Controls

PPE and engineering controls eligible for funding through the support fund include:

* Gloves,
* Face masks,
* Face shields,
* Hand sanitizer,
* Plexiglass barriers.

Requests for other items may be considered on a case by case basis.

A clear itemization of each request is required. A separate line in each table is required to be completed for each separate eligible expense being requested and should include:

* a clear description of the request
* description of need for the request (e.g. plexiglass barrier to provide in-person services, etc.)
* number of items being requested (e.g. 3 plexiglass barriers, etc.)
* total expenses (either estimated or actual)
* expense status (either purchased or to be purchased).

**Note:** you should estimate the quantity and total cost of consumables like gloves, hand sanitizer, etc. for a period of time not exceeding six months.

**EXAMPLE:**

|  |  |  |  |
| --- | --- | --- | --- |
| Item/Service and Description | Quantity | Total Expenses (Actual or Estimated) | Expense Status |
| *Example: 18 boxes of 100 gloves at $15 each to support for staff providing services in person* | *18* | *$300 ($15 each)* | [ ]  *Purchased*[x]  *To be Purchased* |
| *Example: 2 plexiglass movable barriers for counsellors to use when providing in-person services* | *2* | *$550 ($275 each)* | [ ]  *Purchased*[x]  *To be Purchased* |
| Total | N/A | $850 | N/A |

## Section D - Additional Staffing & Travel

Staffing expenses eligible for funding through the support fund are limited to support additional staffing required due to staff shortages (e.g. need to replace staff off sick or in self-isolation due to COVID-19), and overtime due to increases in service demands which are directly related to COVID-19. Eligible staffing expenses may be requested from the beginning of the pandemic (March 16, 2020) through to May 31, 2020. Funding will be provided for additional staff hours required to provide front-line service delivery only (e.g. program assistant, intake worker, program support workers) from March 16 to May 31, 2020.

Incremental travel expenses eligible for funding through the support fund includes additional travel to serve clients who require in-person services, for example travel to meet clients outside of the office or expenses related to increased travel to meet additional clients in person due to increased service demand from the COVID-19 pandemic. Eligible travel expenses may be requested from the beginning of the pandemic (March 16, 2020) through to May 31, 2020.

You will be required to provide a clear itemization of the funding you are requesting for additional staffing expenses related to staff shortages, increased overtime and services demands. Each line should be used for each separate request and should identify:

* description and rationale of the request (e.g. additional hours to respond to increased demand, additional hours to replace staff off sick, travel to serve clients in-person when they cannot be served virtually, etc.)
* the position (for staffing requests only)
* total additional hours (for staffing requests only)
* total expenses
* expense status (either paid or to be paid).

Note that you should use a separate line for additional travel that has already taken place and for travel that is expected to be needed.

**EXAMPLE:**

|  |  |  |  |
| --- | --- | --- | --- |
| Description, Rationale, Time Period, and Position (if applicable) | Total Hours (Staffing Only) | Total Expenses | Expense Status (Travel Only) |
| *Example: STV Counsellor, 6 additional hours week of April 20 to replace staff off sick* | *6* | *$250* | *N/A* |
| *Example: $100/week increased travel for staff providing in person services to clients outside of the office, from July 1 to end of August. Expenses include mileage and parking.* |  | *$900* | [ ]  *Paid*[x]  *To be Paid* |
| *Example: $78 increased travel for staff providing in person services to clients outside of the office, from May 4 to 10. Expenses include mileage and parking.* |  | *$78* | [x]  *Paid*[ ]  *To be Paid* |
| Total | N/A | $1,228 | N/A |

1. <https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support/temporary-pandemic-pay> [↑](#footnote-ref-1)