Health Care Policy Contribution Program (HCPCP)

Guide for Applicants
Health Canada is the federal department responsible for helping Canadians maintain and improve their health. We assess the safety of drugs and many consumer products, help improve the safety of food, and provide information to Canadians to help them make healthy decisions. We provide health services to First Nations people and to Inuit communities. We work with the provinces to ensure our health care system serves the needs of Canadians.

Published by authority of the Minister of Health.

Health Care Policy Contribution Program (HCPCP)

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Programme de contributions pour les politiques en matière de soins de santé

Guide du demandeur:

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Guide for Applicants
Health Care Policy Contribution Program

Program Overview

The Health Care Policy Contribution Program (HCPCP) is a national program designed to support the Government of Canada’s commitment to improving the health care system.

While provincial and territorial governments have jurisdiction over most aspects of health care delivery in Canada, the federal government has sought to fulfill important policy commitments related to health care system and to demonstrate leadership in areas appropriate to the federal role. This program enables the government to continue to:

• support knowledge development and transfer in key areas for advancing federal health policy goals;

• respond to emerging health policy priorities;

• establish partnerships with provincial and territorial governments to effect change on a pan-Canadian scale; and

• support organizations whose unique expertise can help with achievement of public policy goals.

The HCPCP’s component-based structure provides flexibility for addressing emerging and on-going priorities in health care system. For more information on the Program’s objectives refer to Appendix E.

The Health Care Policy Contribution Program uses contributions to fund non-profit, non-governmental organizations, professional associations, educational institutions, and provincial, territorial and local governments, in order to develop, implement and disseminate knowledge, best practices and strategies for innovative health care delivery, subject to the specified terms and conditions as outlined in this Guide for Applicants.

Currently, the program funds projects that support policy development in priority areas such as the following: access to health care and reduction in wait times; primary health care and chronic disease management; health human resources, including integration of internationally educated health professionals; home and community care; quality care and patient safety; and palliative and end-of-life care.
Eligible Recipients

Eligible recipients for this solicitation will be non-profit.

Government:
  • Provincial, territorial and local governments

Non-government:
  • Private organizations, including professional associations
  • Regional health authorities
  • Education institutions
  • International organizations

Mandatory Requirements

Applicants must prepare and submit the following documents. Letters of support may be included, if applicable.

- A complete electronic copy and a complete hard copy of the detailed project proposal containing the following:
  1. Signed original Funding Application Form (Appendix A)
  2. Proposal Development Template (Appendix B), which includes:
     - Work Plan Template (Appendix C)
     - Budget Template (Appendix D)
     - Health Care Policy Contribution Program: Objectives, Outputs and Outcomes Checklist (Appendix E)
Submitting Your Proposal

A proposal has two parts:

PART A: Funding Application Form (Appendix A)

PART B: Project Proposal (Appendix B)

Part A: Funding Application Form

Identification of Applicant:

° The mailing address must include complete information on the physical location, such as the floor, suite or room number, street number and postal code. If a post office box is designated as the official mailing address, please provide this information as well.

° Provide the names, titles, telephone numbers, fax numbers and e-mail addresses of the: 1) the authorizing (legal signing) official and 2) the project contact person responsible for liaising with Health Canada on regular project operations. The person whose name is given as the authorizing official for your organization must be the representative who has full authority to bind said organization through funding agreements.

° Applicant status documentation: for non-profit organizations, provide your organization’s articles of incorporation, along with a copy of its By-Law No. 1 or any other documentation that establishes the status of your organization.

Project Proposal:

° The project title, the amount requested and the duration of the project must be indicated in this section of the application form.

Declarations:

° Applicants must answer the mandatory questions to ensure that they and any identified partner organizations are in compliance with the Lobbying Act.

Other Sources of Funding:

° Each applicant must provide information on any other sources of funding received or requested for the proposed project. This includes, but is not limited to, federal, provincial/territorial or municipal government financial assistance (grants, contributions, contracts for services, etc.), and in-kind contributions from partner organizations or from the applicant.

"In-kind contribution" means non-cash goods and services such as equipment, use of facilities, and labour, that is provided by the organization to help a project meet its objective; and must be measured or appraised at fair market value or cost, which is the lowest.

The signature of the authorizing official is mandatory. Incomplete and/or unsigned application forms will not be considered for review.
Part B: Proposal Development

You will find the Proposal Development template in Appendix B, which outlines the mandatory headings. Below is an explanation of the mandatory information required in preparing your proposal.

**Project Title**

Provide a pertinent title for your project.

**Executive Summary**

The executive summary must be succinct but sufficient to stand alone as a summarized description of your project. Please limit the summary to one page.

**Project Goal**

Describe the goal(s) of your project. For example, what issue is the project intended to address? What gap will it fill in the area of concern? Explain how the project’s goal(s) is/are linked to the component’s objectives, goals and/or priorities as described on page 5.

**Project Rationale and Background**

Describe the context in which your project will take place.

Clearly demonstrate the necessity or value of the project (e.g., by citing such things as statistics, research results and needs assessments, etc).

Explain how your project will build on or is compatible with, but does not duplicate existing projects or initiatives. Indicate how your project will add to the body of this knowledge.

Identify the barriers and challenges to implementing the proposed project and explain how these will be addressed.

**Mandate of the Applicant**

Describe the mandate and governance structure of your organization.

Provincial/territorial/local government applicants: describe the organizational governance structures and/or legislative authorities.

**Experience and Capacity of the Applicant**

Explain how your organization has the expertise to achieve these objectives and carry out the project activities by describing your previous experience (e.g., previous federal/provincial funding and results of past contribution agreements).

Explain how your organization has the capacity (e.g., sufficient human resources capacity, appropriate governance structure, and financial management) to achieve these objectives and carry out project activities.
Collaboration with Other Organizations

Identify and outline the roles of any project partners, and explain the mandates of their organizations and their relevance to the project.

Project Objectives

Describe the objectives of your project. Objectives are specific targets that need to be achieved in order to attain the project goal(s). Objectives should:

° describe the change the project will accomplish;
° be clear and concise;
° be measurable;
° be achievable, given organizational constraints, timeframes and available resources;
° be outcomes-focused;
° relate to the Call for Proposals’ objectives, goals and/or priorities; and
° relate to one or more of the Health Care Policy Contribution Program overall objectives (Appendix E).

Explain how project objectives will result in actions or outputs that can increase knowledge or be implemented on a pan-Canadian scale, in a context of maximizing project impact and reducing duplication of effort.

Identify in Appendix E which HCPCP objectives, outputs and outcomes your project addresses using one or more check marks for each category. Also explain in your proposal how your project will contribute to the overall objectives, outputs and outcomes of the program.

Work Plan

The Work Plan (Appendix C) describes the activities your organization will carry out to reach the project objectives. In your proposal, outline the planned activities and the estimated timeframe for each. Also indicate which output and outcome indicators from Appendix H will be reported on. Identify any potential challenges to achieving activities, outputs, and outcomes. Refer to Appendix C for an attached example.

Target Audience(s)

Describe the target audience(s) for the project and indicate how it will benefit. Identify beneficiaries other than the target audience(s), if applicable. Please see Appendix F for a list of target audiences and beneficiaries.

Official Languages Requirements

Indicate the official languages requirement(s) for the project. Successful applicants funded under federal contribution programs must ensure that any activities, projects or programs (including national and international events for the general public) that involve members of both official languages communities (English- and French-speaking) respect the spirit and intent of the Official Languages Act.

In keeping with this, proposals must clearly identify the language group(s) of the target audience(s)/clientele of the project and, when applicable, describe plans to communicate with members of the public in the official language of their choice, in accordance with the Official Languages Act. More information on the Act and its requirements is available from Health Canada, upon request.
Sustainability (if applicable)

Describe how the project or any of its activities will be sustainable after HCPCP funding ends. Indicate whether it is anticipated that any project activities and/or work that builds on this project will continue beyond the period of HCPCP funding.

Performance Measurement and Evaluation Plan

The Program has recently developed a Recipient Reporting and Evaluation Template to capture the data needed for evaluation of the Program. This template will assist recipients with their project reporting and also gather information to assess the implementation, impact and effectiveness of the Program. Each proposal must contain a plan to clearly indicate how the performance measurement data will be captured to complete this template, and identify which performance indicators relate to the project. Appendix G contains a summary of the required elements of the performance measurement plan and Appendix H provides detailed information on the performance indicators linked to the outputs and outcomes of the program. Please identify which performance indicators relate to your project, as outlined in Appendix H. Outputs, immediate/intermediate outcomes and the long-term outcomes should be concrete and measurable.

Evaluation Plan (if applicable)

Although not a mandatory requirement for most types of projects, recipients are encouraged to conduct a project evaluation for their own purposes, i.e. to keep track of their progress, identify areas for improvement, and demonstrate the impact of their project using information in addition to what is collected by the template. Furthermore, in some cases - for example, where the purpose or main activity of the project is to carry out an evaluation of a pilot program, practice or model - an evaluation will be a necessary component of the project. In this case, the proposal must also contain a plan for evaluation in addition to the performance measurement plan required for the template. The basic elements of an evaluation plan are:

- why the evaluation is being done and how the results will be used
- clear questions that are related to the relevance and effectiveness of the project.
- the data collection methods that will be used to answer the evaluation questions.
- the resources (financial and personnel) that are assigned to evaluation activities.

Health Canada staff are available to provide advice to applicants on whether the performance measurement plan and evaluation plan (if applicable) are appropriate and feasible for their project.
Dissemination Plan

The dissemination plan is the plan for sharing the results of your project, including materials, tools, research, lessons learned and new knowledge. The plan can be updated as your project progresses. It must include the following elements.

1. Dissemination goals: what will be achieved by sharing the project information.

2. Target audience(s): who will be reached and who can use the information. The level(s) of the target audience(s), i.e., local, provincial/territorial, national/pan-Canadian, should be identified with an explanation as to how the target audience(s) is/are helping the project meet its objectives and how the end users (beneficiaries) are positioned to support/achieve project objectives. Please refer to Appendix F for a list of target audience members.

3. Information to be disseminated. (e.g., products, strategies, research, and tools)

4. Dissemination methods to be used.

5. Activities, responsibilities, timing, budget, and evaluation of the effectiveness of the dissemination plan in increasing stakeholder's awareness and understanding of the project's results. Include any follow-up activities planned to gather information on how the project is useful to others while the project is under way.

Note: Applicants must ensure that the required resources for dissemination and other knowledge transfer activities are listed in the detailed work plan (Appendix C) and reflected in the project budget.

Project Budget

Provide a detailed budget in the prescribed format with a narrative linking the expenditures with their associated activities. See Appendix D for a budget template.

Eligible Expenses

Financial support from the HCPCP is intended to complement, not replace, funding received from other sources for the proposed project. Applicants are required to disclose all actual and potential sources of funding, including in-kind contributions, for their project (if applicable) as well as information on all funding received from Health Canada in the last five years.

Contribution funds received from Health Canada may only be used for expenses directly related to the activities of the approved project. The following is a description of the broad categories of eligible expenses under the Health Care Policy Contribution Program. Health Canada reserves the right to request supporting documentation for any project costs.
Personnel salaries and benefits
  ° Salaries and benefits of employees working on the project, including honoraria for speakers.

Goods and services of contractual personnel
  ° Payment for contractual services.

Travel and accommodations
  ° In this category, record all costs for travel related to carrying out the activities described in the project’s work plan and provide a detailed account of all expenses (e.g., the purpose, the number of people travelling, and the destination).
    i) Under travel, include all costs for private vehicle mileage, air fares, bus passes, etc.
    ii) Under accommodations, include the cost of meals, hotels, etc., while on travel status.

Goods and services for meetings/conferences/workshops/seminars/training and consultations
  ° Includes the costs for such things as a meeting hall, hospitality, meeting logistics, on-site interpreters and conference hand-outs.

Materials and supplies
  ° Include the costs of such things as office supplies, postage, project materials and printing costs.

Audit
  ° Include all costs related to the auditing of your project – for example, contract fees for an external auditor and costs for staff, board members or participants involved in the planning, data collection and analysis components of the audit.

Performance Measurement and Evaluation
  ° Include all costs related to the performance measurement plan for your project and for project evaluation (if applicable). Such costs may include contract fees for an external evaluator and costs for staff, board members or participants involved in the planning, data collection and analysis components of the evaluation.

Communication
  ° Include all costs related to communication activities including the dissemination plan – for example, development of a knowledge management strategy, creation of communities of practice and social networking, establishment of an IT infrastructure to improve access to resources, and printing of reports and publications.

Note: Expenses must fall within the Treasury Board Secretariat’s Guidelines outlined in the website: http://www.tbs-sct.gc.ca/pubs_pol/hrpubs/TBM_113/td-dv_e.asp
Rent and utilities

- For rent, include the cost of renting space, if necessary (see note below), as well as the cost of any utility that is included in the monthly rental fee. For utilities, include the cost of all utilities that are not already covered in the monthly rental fee (e.g., telephone, teleconferences, facsimiles and Internet charges).

Note: It is not acceptable for recipients to charge rent for space that they own, which is considered part of their in-kind contributions to the project.

Equipment

- Capital costs such as the purchase of equipment (e.g., computers) will be allowed in certain circumstances where the rental or purchase of such equipment is needed to carry out the project activities and where prior written approval is received from Health Canada.

Note: It is not acceptable for recipients to charge rent for computers they own. It is expected that recipients, as part of their in-kind contributions to the project, will give project staff access to their equipment.

Other (specify)

- This category is to be used to show any expenditures that relate directly to the project, but that do not fit into any of the specific sections. Examples: registration fees for a seminar, bookkeeping and bank charges.
- Unspecified miscellaneous fees such as contingency allowances and administrative overhead are not eligible expenses.

Note: Allowable expenses include any Goods and Services Tax amount paid as long as a rebate of that amount is not being claimed from the Canada Revenue Agency. To find out if you are eligible for a rebate, consult the CCRA Web site at: http://www.ccra-adrc.gc.ca/E/pub/gp/rc4081/README.html

If you receive a GST rebate, the portion of the rebate that applies to expenditures paid for with Health Canada project funds must be declared in writing to Health Canada. At that time, provide Health Canada with a rationale for applying this income to project activities, and Health Canada will then determine if the rebate can be used to enhance the project, or if the funds must be returned to Health Canada.
Ineligible Expenses

The following expenses are not eligible for funding:

- ongoing organizational costs of the applicant and/or its project partners;
- contingency allowances, administrative overhead, or other unspecified miscellaneous fees;
- costs related to profit-making activities;
- costs related to provision of direct services that are part of other jurisdictions’ responsibilities; and
- capital costs such as the purchase of vehicles, land and/or buildings.
Proposal Review and Approval Process

Health Canada will first screen application packages to ensure that they meet the mandatory requirements.

Once the initial screening is complete, eligible proposals will go to a review committee that consists of three members, with at least one of whom is not from the division conducting the proposal review process. Review committee members will vary depending on the project(s) under consideration. Criteria for the selection of committee members include, but are not limited to, subject matter expertise, program knowledge and experience in the specific health care field or sector.

Proposals recommended for approval will be forwarded to the Minister of Health for a final decision. Health Canada will advise applicants in writing as soon as a decision has been made on their proposal. On approval, a Health Canada representative will contact the applicant to discuss a formal contribution agreement detailing the terms and conditions of the project.

Please note that applicants should not assume any commitment on the part of Health Canada until ministerial approval for the project has been obtained and a contribution agreement has been signed by both the applicant and by Health Canada.

All funded projects are subject to the terms and conditions and the accountability requirements of the Health Care Policy Contribution Program, the Financial Administration Act, and the Transfer Payment Policy. Funding under this program does not imply any commitment, financial or otherwise, on the part of Health Canada beyond the approved funding period.

Applications will be assessed by the Review Committee on the basis of the following criteria:

- Relevance to the identified HCPCP objectives.
- Contribution to the identified component’s objectives, goals and/or priorities.
- Demonstration of concrete and measurable objectives, activities, outputs (deliverables) and outcomes (results). The proposal must also explain how the activities will result in one or more of the outputs/outcomes as identified in the program’s performance indicators.
- Demonstration that actions will result in outputs that can increase knowledge on a pan-Canadian scale or be implemented on a pan-Canadian scale.
- Demonstration of evidence for the need for the project and a rationale for the proposed activities, outputs and outcomes. Where appropriate, proposals should explain how their activities build on or are compatible with, but do not duplicate, existing initiatives. Proposals should also explain how their projects build upon existing collaborations, where applicable.
- Demonstration of the applicant’s experience and capacity in relation to the carrying out of the proposed activities.
° Clear indication of the **project’s target audience(s)** and how it (they) will benefit from the project activities.

° Clear identification of how the project meets the *Official Languages Act’s* specifications for **official language group(s)** of the target audience(s)/clientele. Where applicable, proposals should describe the plans to communicate with members of the public in the official language of their choice.

° Quality and appropriateness of the performance measurement plan, as per the requirements set out in Appendix G.

° Quality and appropriateness of the project evaluation (if applicable).

° Quality and appropriateness of the dissemination plan.

° Demonstration of an **appropriate budget** for the proposed objectives and activities outlined in the Work Plan and Progress Report Template, evaluation plan and dissemination plan.

° **Cost-effectiveness** of the activities and ability to maximize limited financial resources.

° Demonstration of **stakeholder support**, in the form of such things as financial or in-kind contributions or letters of support.

° Demonstration, where applicable, that the project or aspects of the project will be **sustainable**, financially and/or otherwise, after HCPCP funding ends.
Funding Application Form / Formulaire de demande de financement

Supporting documentation required for the funding request. / Les documents suivants doivent accompagner la demande de financement.

- An electronic copy and hard copy of the complete proposal (with a detailed budget and work plan as per the Guide) / Une copie électronique et une copie papier de la proposition complète (avec un budget et un plan de travail détaillés conformément au Guide).

I. Identification of Applicant / Identité du demandeur

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<th>Language Preferred for Correspondence / Langue de correspondance préférée :</th>
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<th>Name of Authorizing Official (Delegation of authority to bind the agreement) / Nom du représentant officiel (avec délégation d’autorité afin d’établir l’entente) :</th>
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Applicant Status Documentation for Non-Profit Organizations (e.g., articles of incorporation, by-law numbers) / Statuts constitutifs des demandeurs pour les organismes sans but lucratif (p. ex. actes constitutifs, numéros de règlement administratif) :
II. Project Proposal / Proposition de projet

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<th>Project Title / Titre du projet :</th>
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<td>Duration of Project (in months) / Durée du projet (en mois) :</td>
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Attach your project proposal or proposals (see the requirements in the Guide). / Veuillez joindre votre proposition de projet ou vos propositions (Tel qu’indiqué dans le Guide).

**Please make sure you have a detailed budget and workplan as per the Guide. / Veuillez vous assurer de joindre à la soumission un budget et un plan de travail détaillé tel que décrit dans le Guide.

III. Declaration/Déclaration


1. Do you presently employ in your organization or on your Board of Directors a former public office holder who left the federal government in the last twelve months? / Votre organisation a-t-elle actuellement à son service ou au sein de son conseil d’administration, un ancien fonctionnaire qui a quitté l’administration fédérale au cours des douze derniers mois?

   YES/OUI □

   NO/NON □

2. If you have answered yes to question 1 above, was this person at a senior management level position (EX) or above while in public office? / Dans l’affirmative, cette personne détenait-elle un poste de gestion supérieure (EX) ou plus élevé au sein de la fonction publique?

   YES/OUI □

   NO/NON □

3. If yes, please ask that the person contact his/her former department to obtain written confirmation that he/she is in compliance with the post-employment provision of the Conflict of Interest and Post-Employment Code and contact Health Canada. / Dans l’affirmative, veuillez vous assurer que cette personne communique avec son ancien ministère pour obtenir une confirmation écrite qu’elle respecte les dispositions relatives à l’après-mandat du Code régissant les conflits d’intérêts et l’après-mandat et qu’elle communique avec Santé Canada.
Lobbying Act / Loi sur le lobbying

1. Do you presently employ in your organization persons to lobby on its behalf? / Votre organisation a-t-elle à son service des personnes qui font du lobby en son nom?

YES/OUI □ NO/NON □

2. If you have answered yes to question 1 above, are the persons lobbying on your organization’s behalf registered pursuant to the Lobbying Act? / Si vous avez répondu oui à la question 1, ces personnes sont-elles enregistrées conformément à la Loi sur le lobbying?

YES/OUI □ NO/NON □

IV. Other Sources of Funding / Autres sources de financement

If you have received or applied for project activities funding with any other sources of financing, please provide the name and address of the source, date and amount requested or awarded, and project title for which you are or have requested funding. / Si vous avez demandé ou reçu d’autres sources de financement pour ce projet, veuillez préciser le nom et l’adresse de l’organisme, la date et le montant demandé ou reçu ainsi que la durée du financement.

Other Sources of Funding / Autres sources de financement

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I declare that:

- All the information in this application is accurate and complete;
- The application is made on behalf of the organization named on the first page of the form with its full knowledge and consent; and
- I acknowledge that should this application be approved, I will be required to enter into a formal contribution agreement that will outline the terms and conditions for the project.

Je declare que :

- Tous les renseignements fournis dans cette demande sont exacts et complets;
- Cette demande est présentée au nom de l’organisme dont le nom figure à la page un et avec l’approbation de celui-ci;
- Je comprends que, si cette demande est approuvée, il me faudra signer un accord de contribution officiel dans lequel seront précisées les modalités.

Signature of Authorizing Official (Delegation of Authority to bind)/
Signature du représentant officiel (avec délégation d’autorité d’établir l’entente)

Print name/ 
Nom en lettre moulées :

Signature/
Signature :

Title of position/ 
Titre de poste :

Date/ 
Date : mm/dd/yyyy
Proposal Development Template

Mandatory headings are as follows:

Project Title
Executive Summary
Project Goal
Project Rationale and Background
Mandate of the Applicant
Experience and Capacity of the Applicant
Collaboration with Other Organizations
Project Objectives
Work Plan
Target Audience(s) and Beneficiaries
Official Languages Requirements
Sustainability (if applicable)
Performance Measurement Plan
Evaluation Plan (if applicable)
Dissemination Plan
Project Budget
### Work Plan Template

The Work Plan Template describes the activities your organization will carry out to reach each of the project objectives, identifies which indicators will be reported on for the outputs and outcomes achieved and identifies potential challenges to achieving project activities, outputs and outcomes. A Work Plan must be provided for each fiscal year.

**Reporting Period:**

**Project Objective:**

<table>
<thead>
<tr>
<th>Planned Activities / Timeframes</th>
<th>Outputs (refer to Appendix H)</th>
<th>Outcomes (refer to Appendix H)</th>
<th>Anticipated Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>(e.g., Q3 - Training physicians on a new decision aid)</em></td>
<td><em>(e.g., Two training sessions will be offered to 25 physicians in one hospital to inform them on how to use a new decision aid: $5,000 allocated for these sessions)</em></td>
<td><em>(e.g. After attending an information session, __% of physicians reported an increased understanding of how to use the decision aid. The decision aid was adopted by __% of the physicians who attended the session in a hospital in Ottawa.)</em></td>
<td><em>(e.g. Physicians’ resistance to the use of new forms of technology may contribute to the low adoption rate of the decision aid)</em></td>
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</table>
## Budget Template

**Contribution from Health Canada**  
Federal Fiscal Year (FY) = April 1 to March 31

<table>
<thead>
<tr>
<th>Total Budget</th>
</tr>
</thead>
</table>

| FY: | FY: | FY: |

### Revenues

- Health Canada (anticipated)
- Income from other sources or in-kind (if applicable)

**Total Revenues**

### Expenditures

- Personnel salaries and benefits
- Goods and services of contractual personnel
- Travel and accommodations
- Goods and services for meetings/conferences/workshops/seminars/training/consultations
- Materials and supplies
- Audit
- Performance Measurement
- Communication and dissemination
- Rent and utilities
- Equipment
- Other (e.g. Evaluation if applicable)

**Total Expenditures**
Health Care Policy Contribution Program: Objectives, Outputs and Outcomes Checklist

In February 2008, Treasury Board approved the renewal of Health Care Policy Contribution Program terms and conditions. Applicants for funding will be required to explain how their project targets the HCPCP objectives and contributes to the achievement of program outcomes.

Identify which HCPCP objectives, outputs and outcomes your project addresses using one or more check marks for each category. The program objectives are as follows:

- foster the development and implementation of health care system policies and strategies to address identified health care system priorities;
- increase knowledge of factors determining the performance and responsiveness of the health care system and its responsiveness to users’ needs;
- increase collaboration on, and co-ordination of, responses to health care system priorities amongst federal, provincial and territorial governments, other health care policy makers, service providers, users, researchers and other stakeholders;
- identify, assess and promote new approaches, models and best practices that respond to identified health care system priorities;
- increase knowledge and application of evidence and best practices, leading to improved health care system planning and performance; and
- contribute to improvements in the accessibility, responsiveness, quality, sustainability and accountability of the health care system.

The outputs of the program are:

- knowledge tools, products and innovations, collectively known as knowledge products. Examples include: research reports, databases, reference materials, planning tools, strategies, approaches or models, synthesis of research, policy options and advice, and dissemination mechanisms;
- collaborative relationships, such as those developed and maintained with and among stakeholders (recipient organizations, professional associations, governments, and policy makers);
- identified barriers and enablers related to creating/ modifying knowledge products, dissemination of knowledge, use/adoption of knowledge, health care system renewal and health care system innovation.
The immediate outcomes of the program are:

- increased awareness and understanding of knowledge tools/products, approaches, models, innovations, and health care system renewal issues;
- evaluation or trial adoption (pilot) of knowledge, approaches, models, strategies, or promising practices on a limited scale;
- expansion or enhancements of existing practices or models;
- improved collaboration and coordination;
- supportive organizational culture: readiness for change/strong leadership; and
- decreased barriers to, and increased enablers of knowledge development, translation and use and/or health care system renewal.

The intermediate outcome(s) of the program are:

- broadened adoption of knowledge/innovations resulting in changes to policy, practice and/or organizational structure.

Over the long-term, the intended outcome for the program is improvements in the health care system i.e., an accessible and sustainable health care system responsive to the health needs of Canadians.
# Target Audience(s) and Beneficiaries

<table>
<thead>
<tr>
<th>Target Audience(s)</th>
<th>Beneficiaries</th>
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<tbody>
<tr>
<td><strong>Local</strong></td>
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<tr>
<td>° Health professionals (including internationally educated health professionals) – physicians, nurses, occupational therapists, physiotherapists, pharmacists, medical laboratory technologists, medical radiation technologists</td>
<td>° Public and private health professionals</td>
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<tr>
<td>° Health educators</td>
<td>° Health care institutions, settings and management organizations (e.g., regional health authorities)</td>
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<tr>
<td>° University faculty, clinical instructors and community-based preceptors</td>
<td>° Aboriginal organizations</td>
</tr>
<tr>
<td>° Patients</td>
<td>° Health care career students</td>
</tr>
<tr>
<td>° Canadians</td>
<td>° Patients</td>
</tr>
<tr>
<td><strong>Provincial/ Territorial</strong></td>
<td></td>
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<tr>
<td>° P/T governments</td>
<td>° P/T governments’ health policy decision makers</td>
</tr>
<tr>
<td>° Health professional associations</td>
<td>° Educational institutions</td>
</tr>
<tr>
<td>° Professional licensing and certification authorities</td>
<td>° Professional licensing and certification authorities</td>
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<tr>
<td>° Aboriginal organizations</td>
<td>° Aboriginal organizations</td>
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<tr>
<td><strong>Federal</strong></td>
<td></td>
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<tr>
<td>° Federal health research and information agencies</td>
<td>° Federal government health policy decision makers</td>
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<tr>
<td>° Federal government health policy decision makers</td>
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<tr>
<td><strong>National/ Pan-Canadian</strong></td>
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<tr>
<td>° Health professional associations</td>
<td>° Health advocacy and patient groups (e.g., Canadian Diabetes Association)</td>
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<tr>
<td>° Aboriginal organizations</td>
<td>° Aboriginal organizations</td>
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# Performance Measurement Plan

<table>
<thead>
<tr>
<th>Content Requirement</th>
<th>Description</th>
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<tbody>
<tr>
<td><strong>1. Performance Measurement Plan</strong></td>
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</table>
| 1.1 Performance Measurement Data | Briefly describe how performance measurement data will be collected/reported?  
Which indicators (from Appendix H) will you be providing data on?  
You are encouraged to provide additional indicators relevant to your project and ensure they are:  
° specific and measurable  
° an appropriate fit for evaluation questions  
° linked to available/anticipated data sources that respond to each evaluation question |
| 1.2 Data Collection | Please describe how the data for the indicators will be collected (e.g. literature review, document review, focus groups, case studies, interviews, etc.), and how frequently the data will be collected (e.g. monthly, biannually, etc.). |
| **2. Resource Requirement** | |
| 2.1 Human Resources | Clearly describe the personnel required for the collection of performance measurement data, including the individual’s or team’s areas of expertise. |
| 2.2 Budget | Clearly indicate the performance measurement budget. |
Performance Indicators

<table>
<thead>
<tr>
<th>HCPCP Outputs/Outcomes</th>
<th>Indicators</th>
</tr>
</thead>
</table>
| Outputs                                    | Knowledge Tools, Products and Innovations (e.g. databases, synthesis of research, approaches, models, policy options and advice), specify: number, description, purpose, dollar amount allocated for development and dissemination (including in-kind costing), dissemination mechanism used and intended audience.  

*For dissemination mechanisms, specify: description of, and rationale for, mechanism used (e.g. website, symposium, newsletter, etc.), type of information disseminated, purpose of disseminating information, target audience identified.*  

Collaborative relationships, specify: number, description, purpose, stakeholder representation (including number and level of organizations), stakeholder roles.  

**Examples of barriers: resistance/attitude of health professionals to change, power struggles between levels of government, remuneration models, lack of technological expertise, etc.**  

<table>
<thead>
<tr>
<th>Immediate Outcomes</th>
<th>Perceptions of stakeholders who think their level of awareness and understanding, specify: subject matter, target group, source of information/dissemination mechanism used.</th>
</tr>
</thead>
</table>
| Increased awareness and understanding of knowledge tools, products, approaches, models, innovations, and health care system renewal issues | Knowledge cited/used in decision-making, specify: description of how knowledge was used, decision-making group, level (e.g. national issue, provincial issue, local issue), geographic location.  

Approaches, models, strategies, or promising practices implemented or adopted or evaluated, specify: number; description of approach, model, strategy or promising practice; level of implementation or adoption or evaluation (e.g. local, regional, provincial); target audience (adopted by whom); geographic location; and outcome of evaluation (e.g. findings, recommendations, implementation plan) *if applicable.* |
<table>
<thead>
<tr>
<th><strong>Expansion or enhancements of existing practices or models</strong></th>
<th>Expansion or replicated initiatives implemented or adopted in multiple/new sites, specify: number, description, level of implementation or adoption or evaluation (e.g. local, regional, provincial, national) and geographic location.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Improved collaboration and coordination</strong></td>
<td>Perceptions/ change regarding the quality of the collaborations, specify: appropriateness, inclusiveness, and representativeness of membership for achieving project’s identified goals.</td>
</tr>
<tr>
<td><strong>Supportive organizational culture</strong></td>
<td>Perceptions of organizational readiness for change, specify: evidence of adequate governance structure; resources to adopt change/innovation (e.g. time dedicated to education/training, human resources, funding).</td>
</tr>
<tr>
<td><strong>Decreased barriers to, and/or increased enablers of: knowledge development, translation and use; and health care system renewal</strong></td>
<td>Results of projects that addressed identified barriers or enablers, specify: barrier or enabler addressed, description of strategy used to address barriers or enablers, challenges encountered in addressing barriers or enablers, and outcome of strategy used.</td>
</tr>
</tbody>
</table>

**Intermediate Outcomes**

| **Broader adoption of knowledge or innovations resulting in changes to: policy, practice, and/or organizational structure** | Pre/post comparison of health care system and services, by: *(specify all that apply)*
1) changes in delivery/practice, specify: description of change, level, geographic location
2) changes in legislation and/or policy, by subject matter, level, geographic location
3) changes in organizational structures, by description, level, geographic location |

**Long-term Outcomes**

| **Improvements in the health care system** | Perceptions regarding improvements in health care system and services, specify:
1) % of Canadians (or relevant target audiences) reporting timely access, by service area
2) % of Canadians (or relevant target audiences) satisfied with the quality of health care services, by service area
Pre-post comparison of health care system and services, by: geographic accessibility, access by specialization, reduction in wait times by service area. |