Family and Community Supports Services Rocky View County 2025 Funding Application and Report



Funding Application

Family and Community

Support Services

Annual Report

	General Funding Large (\$10,000 and over)	General Funding Small (under \$10,000)	Special Project (\$7,500 and under)	Total
FCSS Funding Request			\$ 7,469.00	\$ 7,469.00
FCSS Funding Received (actual)				\$ 0.00

1. AGENCY INFORMATION					
Agency Name	Cochrane and Area Hospice Society				
Program/Project Name	CAHS Volunteer Training, Education & Membership Support Project				
Program Contact	Ozzie Sawicki (CAHS Treasurer)				
Contact Phone					
Executive Director	Julie Handrahan (President)				
Email					
Website	https://cochranehospicesociety.ca				
Mailing Address	P.O. Box 1954, Station Main, Cochrane, AB T4C 1B7				
Fiscal Agent (if required)					

2. ORGANIZATION TYPE	
Alberta Societies Act Registration Number	5020365135
Charitable Number (if applicable)	753602879 RR 0001
Government Agency (if applicable)	
Other (please specify)	
2.1 Please provide a brief overview of your a	gency, include mission, mandate, short history. [1/4 page max]

The Cochrane and Area Hospice Society's mission is to ensure the availability of exemplary palliative, end of life, and bereavement care options in the community of Cochrane and the surrounding area. Our areas of focus include education and awareness, fundraising, advocacy work, volunteer partnerships and support, and grief and bereavement support. The organization was originally created by the late Della Robertson and formed into an Alberta Society in 2017, followed by obtaining it's CRA Charitable Registration status in 2021.

AGENCY NAME	PROGRAM/PROJECT NAME	GRANT AMOUNT REQUESTED	% OF TOTAL PROGRAM BUDGET	GRANT AMOUNT AWARDED
Cochrane and Area Hosp	CAHS Volunteer Tra	\$ 7,469.00		

Please check which of the FCSS Rocky View Priorities your program/project will address:

Mental Health Supports

☑ Senior Supports

Child, Youth, and Family Supports

☑ Other Family end-of-life supports, Grief and Loss Awareness

3. PROGRAM/PROJECT LOGIC MODEL

3.1 Program/Project Description [1/2 page max] Provide a brief description of the program you are applying for funding for.

The CAHS Volunteer Training, Education & Membership Support Project is intended to support

communities including Rocky View County with end-of-life support resources that include:

1. Education, that includes a speaker series that touches on topics of social awareness in managing end-of-life, and palliative pathways; preparation that allows families to deal with the many aspects of end-of-life care and loss of loved ones. Our speakers are focused on early intervention topics, as many families find themselves having to manage the loss of a loved one by dealing with fiscal, legal and other areas that diminish their opportunity to allow themselves a grieving process.

2. Volunteer training and delivery in community, which includes provincially supported palliative training available to volunteers who are then prepared to actively participate in roles that support families and those who are nearing end-of-life. The training prepares our volunteers to understand the nature of the situations that they will be supporting. Our volunteers become a much needed asset in assisting families in moments of exceptional need.

3. Walking Through Grief and Loss Support Walks. These walks occur every Tuesday in Cochrane, and we wish to expand them into Bragg Creek, as an integral part of allowing community members a shared grieving process.

3.2 Statement of Need: [1/2 page max]

What community issue, need or situation are you responding to? *What* evidence do you have to support that this is an issue, i.e. local data, trends, reports?

The community need is the recognition that end-of-life is a difficult period for most families, and the Cochrane and Area Hospice Society sees a key role in education, volunteer support through direct in-house or hospice volunteer family support, and also through an education speaker series process that provides much needed information to prepare families for loss, and to support those going through a loss situation they are experiencing. The ability to provide trained volunteers is critical to ensuring quality supports being in-place that assist with existing home care and other professional palliative and bereavement resources.

The post-loss Grief and Loss Support Walks are an important sharing opportunity for those who continue to struggle with the loss of loved ones. This provides them opportunities to share, listen and seek assistance be it emotional, mental, and grief related.

Our project areas are all centered around creating a community of supports that we know is based on a significant amount of evidence of need presented through the grief support community, Alberta Health Services, and our regional home care, rural palliative, and seniors support agencies and individuals.

3.3 Rationale: [1/2 page max]

Given the evidence above, *how* will your strategy help you achieve your outcomes, i.e. best practices, research? *Why* will your strategy help you achieve your outcomes?

The Cochrane and Area Hospice Society has been running these programs since pre-COVID, and we have a consistent request for need, involvement and community.

Our education speaker series is being reintroduced, as we have found that preparatory information is an asset to individuals and families entering the end-of-life pathway experience. Awareness of resources and ideas on how to best manage are very integral to the health and well being of those left behind.

Our volunteer pool and the training available to them creates an important resource team available to communities. By engaging volunteers from our active area as a society, we can ensure availability for those in hospice care or home care.

Our Grief and Loss Support Walks are a very important aspect of individual recovery from loss. This can be short or long term, and the community of support that it has created has become an important aspect of the CAHS delivery. We plan to add a second walking group in Bragg Creek, as we also recognize that the CAHS has a broad geographic reach into the Rocky View County areas, and wish to ensure we have supports for our entire catchment.

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3.4 Program/Project Design: [1 page max]
Briefly describe your program/project.
How are you going to address the issue, need or situation?
What are the actions/steps/activities? How often will these activities take place and for how long?

1. The speaker series will be a series of honorarium supported expert speakers from a cross-section of backgrounds that can provide insights into the many areas of information needed to prepare individuals and families for the end-of-life experience. This includes grieving, management of loss for all age groups, what to expect in the process, and often the opportunity to be exposed to story telling experiences and sharing of experiences, which grows a community of support.

2. Our palliative volunteer program will be delivered through the Covenant Health Pallilearn program that is a series of short, interactive courses that help people develop the knowledge and confidence to offer meaningful support to family, friends and community members. The courses can be offered individually or as a series, virtually or in person. They include:

- a. What is palliative care?
- b. Your role in a compassionate community
- c. How to have conversations about dying and grief
- d. What matters most.

The CAHS has chosen this volunteer training path as it is flexible in its learning environments, but it also is very focused on the compassionate care area. It is intended to be a support or addition to the professional palliative and home care supports that are offered. The course material was developed for use in Alberta by the Covenant Health Palliative Institute in collaboration with Palliative Care South Australia. It is supported through the palliative area of Alberta Health Services.

3. Our Grief and Loss Support Walks are presently based out of the SLS Centre in Cochrane. If weather is inclement, walks take place indoors, otherwise the group walks outdoors when possible. The walks go from 10:00 am to 12:00 pm every Tuesday morning, and are split into the walk follow by a coffee and tea gathering to ensure a social and connection opportunity. Some walkers are quick and energetic, some are mobility challenged, so their are mini groups that walk together, hence the coffee/tea sessions afterwards are important to have the complete group together. As mentioned, we plan to expand to Bragg Creek and are finalizing the meeting location. Other locations will be added as interest presents itself through surveys of various geographic areas of the CAHS reach.

An addition to the walks is that 3 to 4 times per year, starting in 2025, we are planning a member tea gathering to bring together the larger membership of the CAHS. It is an opportunity to allow a social gathering over a three to four hour period, in which there will be the presence of knowledge supports such as death doulas, spiritual leaders, emotional support specialists, and age specific support people. The goal is to create community, as with all of the CAHS programs, so that individuals and families have a number of ways in which to feel supported through their grief journeys.

3.5 Community Connections: [1/2 page max]

What existing or new connections will you use to support your program/project? *How* will County residents know about your program/project, i.e. marketing, engagement events etc.?

The new connections being introduced is the relationship with Covenant Health for volunteer training. Also, creating links to organizations that can host our speaker series, as well as become the promotional avenues in which to get word out on CAHS programs and projects. This includes seniors groups, community centres, FCSS as a distribution network, and local media avenues, including news print media.

The CAHS also uses Facebook and Instagram as a social media connection, and will place all information on upcoming programs on our website.

We also advertise through the regional home care network, and the medical community, who are often looking at resources for their patients in this area.

By extension, there is also a growing interest in raising the topic of death and end-of-life to a youth audience, as these age groups often face grief challenges, and they are often overlooked. This becomes part of the speaker series and volunteer training.

The CAHS also provides comfort kits to families that are distributed through the home care network. These include grief reading, palliative end-of-life preparation material, journals for writing, comfort quilts/blankets, and finally information about what the CAHS can offer as a support organization.

3.6 Collaborative Partnerships: [1/2 page max] *What* existing or new partnerships will you leverage to advance your program/project?

We have been working with Alberta Health Services through their palliative training, which is transitioning to Covenant Health. We also work through the regional volunteer coordinator for Alberta Health, as given the privacy of the life circumstance people are going through, CAHS ensures that it is delivering resources through proper channels.

We have excellent partnerships with seniors community groups, and venues such as The Station in Cochrane, FCSS, Seniors on the Bow. We are expanding our reach to include organizations more broadly to Rocky View facilities and community groups as well, as we wish to ensure we are reaching our entire catchment area.

We work closely with Cochane Home Care as a connectivity resource as well.

3.7 Volunteerism: [1/2 page max]

How will County residents engage in volunteer activities in your program/project?

Our goal is to bring greater attention to the reality that all of us face end-of-life journeys at some point, and we find that we have people from all walks and age groups in life who wish to become involved. They are typically those who are already highly community driven. Our CAHS membership growth is as much about supporting out members who are our volunteers as it is about them becoming support resources for others.

Part of the goal of the Speaker Series, is not limiting these sessions to Cochrane only, but hosting them throughout our geographic area within the County. These become a key draw to new volunteer interest.

3.8 Was your program/project implemented as planned above? If yes, proceed to the next sections of the annual reporting. If not, why? What changed? How did it go? [1/2 page max]

*Please note if you are not able to implement your program/project as stated above, you must get permission from Rocky View County before proceeding

4. IMPACTS & OUTPUTS

4.1 Outcomes [1/2 page max]

What change or impact do you want to achieve? *Please complete section 5 below, and list the Program/Project Outcomes you have identified and are measuring for your program/project

The change or impact is to reach a larger audience who struggle with end-of-life grief and do not realize that there is a resource organization that has a variety of supports that have been introduced to assist them prior to, during and following the loss of a loved one. The audience we wish to reach is also a rural audience, and ensuring we are creating the ability to connect with this audience is crucial.

We also hope to see a broad range of volunteers who becomes available to those in need of support.

4.2 Target Group [1/2 page max]

Who will be served in your program/project, i.e. youth, families, seniors, volunteers?

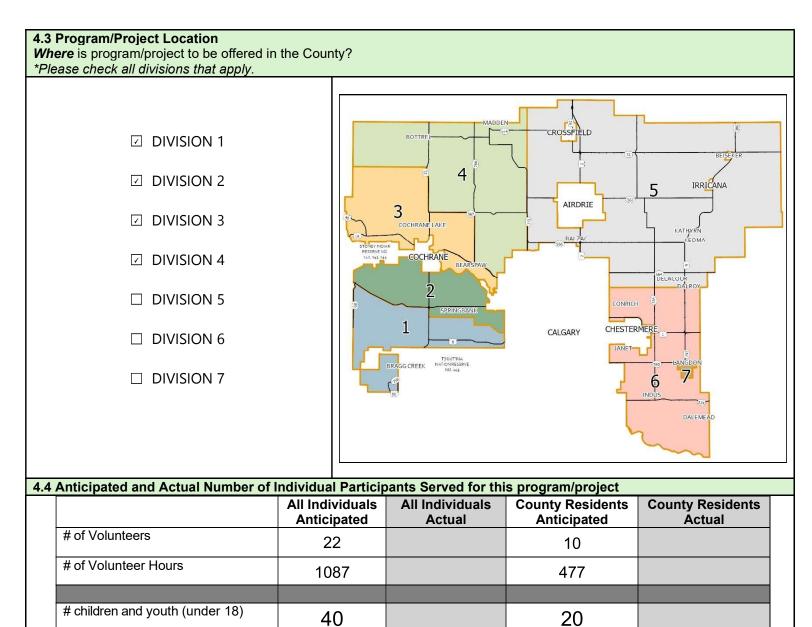
The reality of death and the end-of-life journey is that it touches everyone. We tend to see a focus on seniors more often than not, but youth and family units are certainly left in need of support.

Our volunteers and those who wish to offer their support either through compassion support or knowledge delivery also find a benefit in their roles. The satisfaction of being able to make a difference to someone going through what can be a very difficult experience is a very valuable experience.

adults (18 +)

seniors (65 +)

Total individuals served



100

30

170

0

0

50

15

85

5. OUTCOMES and MEASUREMENT						
MANDATORY for all funding streams.						
5.1 Program/Project Outcom	ne Statement:					
Improved social well-bei	ng of individuals					
Alignment with the FCSS Outcomes Model: Provincial Outcome	Alignment with the FCSS Outcomes Model: Provincial Indicator	FCSS Measures Bank Measure Number:	Write the measure (survey question) as it is in the measures bank and exactly as you will write it on your survey.			
Provincial Outcome:	Provincial Indicator:	PM1		Grief and Support walk I am better at my personal grief management.		
Outcome 1- Individuals			Scale Used:	# completing measurement tool:		
*If Individual Outcome # 3 -			AFC	# completing this measure:		
Include Asset Category:				# experiencing a positive change:		
	Resiliance		2. (if more thar	one measure for this outcome)		
			Scale Used:	# completing measurement tool:		
				# completing this measure:		
				# experiencing a positive change:		
	OPTIONAL f	or General Fundi	ng – Large	Only		
5.2 Program/Project Outcom	ne Statement:					
Improved social well-bei	ng of community					
Alignment with the FCSS Outcomes Model: Provincial Outcome	Alignment with the FCSS Outcomes Model: Provincial Indicator	FCSS Measures Bank Measure Number:		easure (survey question) as it is in the measures actly as you will write it on your survey.		
Provincial Outcome:	Provincial Indicator:	PM2	1. As a result of the	Education Initiatives I am more aware of grief and loss in my community		
Outcome 2			Scale Used:	# completing measurement tool:		
If Individual Outcome # 3 -			AFC	# completing this measure:		
Include Asset Category:			0 <i>(if my and the</i>	# experiencing a positive change:		
	Awareness of com		(if more that	n one measure for this outcome)		
			Scale Used:	# completing measurement tool:		
				# completing this measure:		
	Đ			# experiencing a positive change:		

		TIONAL for Conora		
		TIONAL for Genera	ii Funding –	Large Only
5.3 Program/Project Outcom	ne Statement:			
Alignment with the FCSS	Alignment with the	FCSS Measures	Measure(s):	
Outcomes Model: Provincial	FCSS Outcomes	Bank		easure (survey question) as it is in the measures
Outcome	Model: Provincial Indicator	Measure Number:	bank and ex	actly as you will write it on your survey.
Provincial Outcome:	Provincial Indicator:		1	
			Scale Used:	# completing measurement tool:
If Individual Outcome # 3 -				# completing this measure:
Include Asset Category:				
moldde / leser editegory.				# experiencing a positive change:
			2. (if more that	n one measure for this outcome)
			Scale Used:	# completing measurement tool:
				# completing this measure:
				# experiencing a positive change:
				# experiencing a positive change

6. ADD	6. ADDITIONAL INFORMATION						
Identify	Identify Outcome Measurement Tool(s) Used:						
	☑ Self-Report Survey						
Outcome Measurement Tool(s) used – when administered							
	Pre/Post	☑ Reflective Pre	e/Post 🛛 Post-C	only			

7. PROPOSED AND ACTUAL PROGRAM/PROJECT BUDGET

- Complete the 2025 Budget Template at the bottom of this application.
- Fill in the Required Information:
 - Complete all relevant sections of the form.
 - Ensure that all figures are accurate and up to date.
 - \circ $\:$ If any field is not applicable, please mark it as "N/A".
- Review Your Entries: Double-check the information you have entered for accuracy and completeness.
- Save Your Completed Budget Form: Save the form with your changes.
- Submit the Form: Make sure the completed PDF budget form is submitted with your application and/or report.

Attachment D: Cochrane Area Hospice Society - Volunteer Training and Support Project E-4 - Attachment D Page 1 of 11

7. INPUTS Agency Name	e. Co	chrane ar	nd Area H	losnice 9	Society	Page 1	
				-	-		
2025 PROPOSED AND ACTUAL BUD program expenses to which you plan to direct						itemize the	
	Colu	mn 1	Colu	mn 2	Colun		
		to be paid/	2025 Cos		2025 Year End Total Program		
ITEM		contributed by the Applicant and other funding partners (Agency Contribution) EXPENSES		funded by County FCSS (Program Request)		Budget (Total Cost)	
	1						
	Proposed	Actual	Proposed	Actual	Proposed	Actual	
PERSONNEL	Froposed	Actual	Froposed	Actual	Froposed	Actual	
Speaker Series - 8 sessions, speaker honor	\$ 2,000		\$ 2,000		\$ 4,000	\$0	
Palliative Volunteer Training Course Condu			\$ 1,000		\$ 2,000	\$0	
	• • • • • • • • • • • • • • • • • • •		 		\$0	\$0	
					\$0	\$0 \$0	
A. SUBTOTAL PERSONNEL	\$ 3,000	\$ 0	\$ 3,000	\$0	\$ 6,000	\$0	
			1				
MATERIALS & SUPPLIES (specify)							
Speaker Series Materials for 30 attendees (\$ 1,440		\$ 2,880	\$0	
Palliative Vounteer Training (\$20 x 20 attend	de \$200		\$ 200		\$ 400	\$0	
Palliative Volunteer Shirts (\$32 x 24 - 4 for c	oi \$ 384		\$ 384		\$ 768	\$0	
Grief and Support Walk CAHS Shirts (\$32 x	2 \$ 320		\$ 320		\$ 640	\$0	
					\$0	\$0	
B. SUBTOTAL MATERIALS & SUPPLIES	\$ 2,344	\$0	\$ 2,344	\$0	\$ 4,688	\$0	
TRAVEL & TRAINING (specify)							
	¢ 160		¢ 160		\$ 320	¢ 0	
Speaker Series Venue rentals (\$40 x 8)	\$ 160		\$ 160			\$0 ¢0	
Pallaitive Volunteer Training Venue rental (\$			\$ 200		\$ 400	\$ 0 \$ 0	
Grief and Support Walks (SLS Centre Passe	es \$ 360		\$ 360		\$ 720		
		¢ o	¢ 700		\$0	\$0	
C. SUBTOTAL TRAVEL & TRAINING	\$ 720	\$0	\$ 720	\$0	\$ 1,440	\$0	
OTHER (specify)							
Speaker Series Drinks & Snacks (\$100)	\$ 205		\$ 205		\$ 410	\$ 0	
Palliaitve Volunteer Training break drinks an			\$ 1.200		\$ 2,400	\$ 0	
Greif and Support Walk (Coffee/tea, muffins			+ - ,=		\$0	\$0	
	-				\$0	\$ 0	
					\$0	\$0	
					\$0	\$0	
D. SUBTOTAL OTHER	\$ 1,405	\$0	\$ 1,405	\$ 0	\$ 2,810	\$ 0	
E. TOTAL PROGRAM EXPENSES	\$ 7,469	\$0	\$ 7,469	\$0	\$ 14,938	\$ 0	
REVENUE (Specify other s		iding includir	ng fundraisir	ng and othe	r grants)		
Alberta Community Initiative Program Fundi	ng \$5,	500		· · · · · · · · · · · · · · · · · · ·	_	C	
Cochrane Activettes (Pending)	\$6	\$ 669 \$ 300		Please note: Total Program Expenses for Column 1, must equal Total Revenue			
CAHS Donations	\$ 3						
St. Lazarus Canada	\$ 1,	000					
TOTAL REVENUE	\$ 7,	469					
F. FCSS REQUEST							
(DEFICIT = Total of Column 3 Expenditures – TotalR	evenue)		\$ 7,469.00				