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

☑ Funding Application   ☐ 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			$ 7,500.00	$ 7,500.00
FCSS Funding Received (actual)				$ 0.00

1. AGENCY INFORMATION

Agency Name	Bragg Creek & Redwood Meadows Wellness Network
Program/Project Name	Growing the Wellness Network
Program Contact	Shannon Parker
Contact Phone	████████████
Executive Director	n/a
Email	████████████
Website	n/a
Mailing Address	Box 1111 Bragg Creek, AB T0L 0K0
Fiscal Agent (if required)	University of Calgary, Faculty of Nursing

2. ORGANIZATION TYPE

Alberta Societies Act Registration Number	n/a
Charitable Number (if applicable)	n/a
Government Agency (if applicable)	n/a
Other (please specify)	Collaborative Network

2.1 Please provide a brief overview of your agency, include mission, mandate, short history. [1/4 page max]

Mission: A local collaborative that fosters connections and supports activities that promote community wellbeing.
Selected members: Rocky View residents, The Bragg Creek Foundation, Snowbirds Seniors, Rocky View County, Bragg Creek Community Association, Cochrane FCSS, Recovery Alberta, Banded Peak School, Cochrane BGC, Big Hill Haven, University of Calgary & others.
Selected past successes: Bragg Creek Community playground replacement, Banded Peak School Calm Cabin, two Screenagers events, Nalaxone training, the Bragg Creek satellite library.
History: Created in response to the 2013 floods to support community connection and promote wellbeing. We are an inter-agency group of more than 50 members including residents.

2025 FCSS Funding Application & Report

AGENCY NAME	PROGRAM/PROJECT NAME	GRANT AMOUNT REQUESTED	% OF TOTAL PROGRAM BUDGET	GRANT AMOUNT AWARDED
Bragg Creek & Redwood	Growing the Wellnes	$ 7,500.00	100	

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 | Community 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.

Project Purpose: Enhance the Wellness Network's ability to coordinate services and organize actions to improve health Bragg Creek residents by increasing our membership, partnerships, and visibility in the community.

Project Goals:
1. Identify community needs on an ongoing basis.
2. Increase Wellness Network membership.
3. Increase community awareness and engagement with the Wellness Network.

Project Actions:
1. Implement a targeted communication and marketing strategy to boost network membership and enhance resident engagement.
2. Connect residents with responsive service agencies to ensure community needs are met effectively.
3. Continue bi-monthly Network meetings focused on coordinating services and organizing actions to address community identified needs.

2025 FCSS Funding Application & Report

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?

- Bragg Creek is a hamlet without formal governmental organizations.
- Optimized resource utilization is essential. The Wellness Network facilitates the pooling of expertise and resources to provide comprehensive, coordinated health and wellness support tailored to community needs.
- Enhanced community resilience is vital. The Wellness Network unites residents, health and social services, emergency responders, and local organizations to improve communication and tailor activities that foster long-term community resilience.
- The Network is the inter-agency coalition in Bragg Creek. There is no other structure to provide opportunities for residents and groups to connect, set priorities, collaborate or prevent duplication.
- The majority of residents do not know of the Network or our purpose.

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?

- Determinants of health include personal, social, economic and environmental factors the affect peoples' health (United Way Halifax, 2021). Actions to positively effect determinants of health cross agency, sector, and stakeholder boundaries (Sydelko, Midgley & Espinosa, 2021).
- The Wellness Network addresses the determinants of health with Bragg Creek residents.
- Our strategy will enhance the Wellness Network's ability to coordinate services and organize actions to improve residents' health by increasing our membership, partnerships, and visibility in the community.
- If the Wellness Network does not exist there is no other group or mechanism to identify and convene service providers, residents and the community.
- If the Wellness Network does not exist service agencies and organizations will return to working in silos and isolation.
- If the Wellness Network does not exist Bragg Creek residents will suffer.

2025 FCSS Funding Application & Report

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?

A longtime challenge in our smaller rural community has been connections and conversations across residents, community groups, and service providers. There are a variety of formal and informal communication methods but no centralized government or organization to lead this effort.

March 2025 - 2026:
Strategic Communication & Marketing: Develop and implement a comprehensive outreach plan—including social media, local media, and community events—to increase network membership and heighten overall community awareness of the Wellness Network and our members. Ongoing.

Broadcast Wellness Network activities and invite resident participation. Monthly.

Ongoing Coordination Meetings: Maintain Wellness Network meetings to continually coordinate services, assess progress, and adapt actions based on evolving community feedback. Bi-monthly.

Outcome Monitoring & Evaluation: Track key metrics such as retention & repeat participation, Wellness Network engagement (e.g. post event surveys, feedback from Wellness Network members, committee & volunteer involvement), and service utilization to measure success and refine strategies as needed. Ongoing.

2025 FCSS Funding Application & Report

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 Wellness Network is focused on creating and maintaining collaborative actions amongst residents, agencies, sectors, and governmental organizations to improve the health and wellbeing of Bragg Creek residents. We must increase awareness of the Wellness Network to meet residents' needs.

Existing connections: 50+ members of Wellness Network including Bragg Creek residents, multiple social service and health agencies, schools, local government representatives, and community organizations. For example, residents, Cochrane FCSS community development team, Banded Peak School, The Bragg Creek Foundation, Care in the Creek, Bragg Creek Community Church, Bragg Creek Community Association, Recovery Alberta, University of Calgary, and Rockyview County.

New connection: Local advertising/design agency - Marketing and engagement efforts will leverage a mix of traditional and digital strategies tailored to our rural community's communication habits. Partnering with a local award-winning advertising/design agency, we will design clear, visually appealing marketing & awareness campaign. Regular updates will be shared through the social media, the monthly community newspaper and weekly regional newspapers, ensuring broad reach. Word of mouth will be actively encouraged through local networks, community groups, and stakeholder relationships to maximize participation and engagement.

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

Selected examples of leveraging existing partnerships to advance project:
- Residents - strengthen community engagement, communicate their experiences and local priorities.
- 50+ agencies and organizations who are current Wellness Network members:
    - Bragg Creek Foundation - local knowledge and well established community connections,
    - Bragg Creek Community Centre - discussion venues and serve as a communication hub,
    - FCSS Community Developers – expertise in rural social infrastructure planning to integrate project outcomes into broader community initiatives,
    - Rural Primary Care Network – inform discussions on care needs, ensuring that strategies align with existing healthcare services and support systems.

Example of new partnership to advance project:
- AdMaki - a local award-winning advertising/design agency with proven expertise in designing and implementing marketing and engagement efforts.

2025 FCSS Funding Application & Report

3.7 Volunteerism: [1/2 page max]
How will County residents engage in volunteer activities in your program/project?

Engagement: participate in strategic communication and marketing engagement plan development.
Outreach: support the strategic communication and marketing plan by sharing project updates on social media, assisting at community events, and helping with local media outreach.
Wellness Network members: provide resident input and share in decision making.
Feedback and Evaluation: Participate in gathering and analyzing post-event surveys and community feedback to monitor engagement and inform continuous improvement efforts.

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

2025 FCSS Funding Application & Report

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

Outcome 2: Community social issues are identified and addressed

4.2 Target Group [1/2 page max]
Who will be served in your program/project, i.e. youth, families, seniors, volunteers?
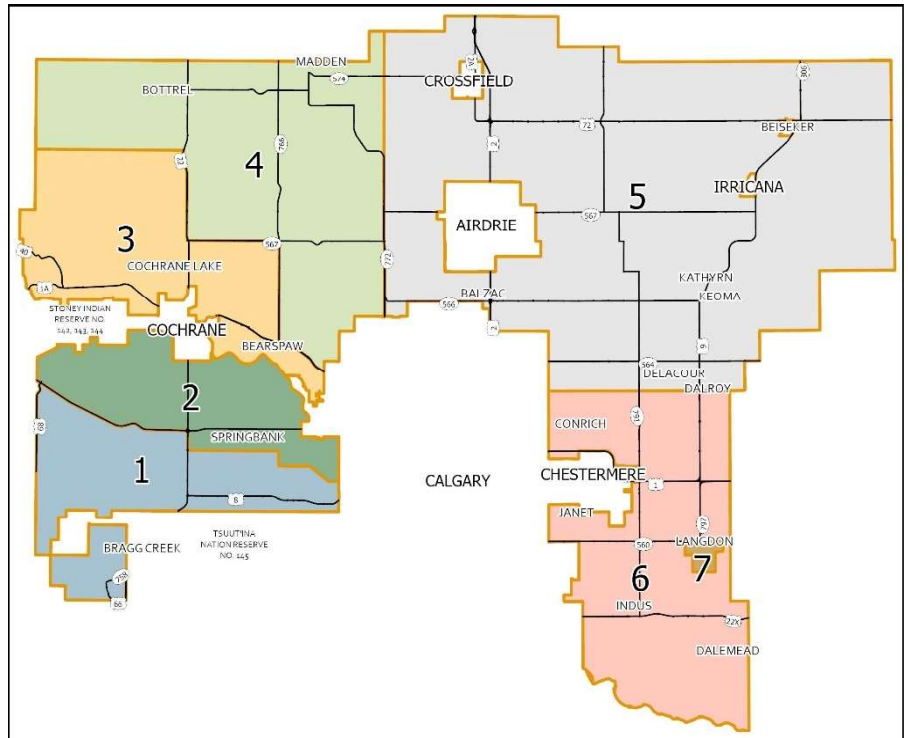
Residents & Bragg Creek service providers

2025 FCSS Funding Application & Report

4.3 Program/Project Location
Where is program/project to be offered in the County?
*Please check all divisions that apply.

☑ DIVISION 1

☐ DIVISION 2

☐ DIVISION 3

☐ DIVISION 4

☐ DIVISION 5

☐ DIVISION 6

☐ DIVISION 7

4.4 Anticipated and Actual Number of Individual Participants Served for this program/project

	All Individuals Anticipated	All Individuals Actual	County Residents Anticipated	County Residents Actual
# of Volunteers	27		27	
# of Volunteer Hours	50		50	
# children and youth (under 18)	50		50	
# adults (18 +)	25		25	
# seniors (65 +)	100		100	
Total individuals served	175	0	175	0

2025 FCSS Funding Application & Report

CONTINUED OPTIONAL for General Funding – **Large Only**

5.3 Program/Project Outcome Statement:

n/a

Alignment with the FCSS Outcomes Model: Provincial Outcome	Alignment with the FCSS Outcomes Model: Provincial Indicator	FCSS Measures Bank Measure Number:	Measure(s): *Write the measure (survey question) as it is in the measures bank and exactly as you will write it on your survey.*	
Provincial Outcome: If Individual Outcome # 3 - Include Asset Category:	Provincial Indicator:		**1.**	
			Scale Used:	# completing measurement tool: _____ # completing this measure: _____ # experiencing a positive change:_____
			2. *(if more than one measure for this outcome)*	
			Scale Used:	# completing measurement tool: _____ # completing this measure: _____ # experiencing a positive change:_____

6. ADDITIONAL INFORMATION

Identify Outcome Measurement Tool(s) Used:

☑ Self-Report Survey ☐ "Other" Report Survey ☐ Verbal Survey

Outcome Measurement Tool(s) used – when administered

☐ Pre/Post ☐ Reflective Pre/Post ☑ Post-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.
  - 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.

| 7. INPUTS | Agency Name: Bragg Creek & Redwood Meadows Wellness N |

2025 PROPOSED AND ACTUAL BUDGET (Ensure all calculations are correct. Use the second column to itemize the program expenses to which you plan to direct the County FCSS funds. Column 1 + Column 2 = Column 3)

ITEM	Column 1 2025 Costs to be paid/ contributed by the Applicant and other funding partners (Agency Contribution)		Column 2 2025 Costs to be funded by County FCSS (Program Request)		Column 3 2025 Year End Total Program Budget (Total Cost)	
EXPENSES						
	Proposed	Actual	Proposed	Actual	Proposed	Actual
PERSONNEL						
Marketing/Communications (AdMaki) (1 perso			$ 4,000		$ 4,000	$ 0
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
A. SUBTOTAL PERSONNEL	$ 0	$ 0	$ 4,000	$ 0	$ 4,000	$ 0
MATERIALS & SUPPLIES (specify)						
Meeting supplies & room rental			$ 1,000		$ 1,000	$ 0
Promotional & communication materials			$ 2,500		$ 2,500	$ 0
Meeting Facilitator (Shannon Parker)			$ 0		$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
B. SUBTOTAL MATERIALS & SUPPLIES	$ 0	$ 0	$ 3,500	$ 0	$ 3,500	$ 0
TRAVEL & TRAINING (specify)						
Volunteer training (media training provided by			$ 0		$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
C. SUBTOTAL TRAVEL & TRAINING	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
OTHER (specify)						
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
					$ 0	$ 0
D. SUBTOTAL OTHER	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0
E. TOTAL PROGRAM EXPENSES	$ 0	$ 0	$ 7,500	$ 0	$ 7,500	$ 0
REVENUE (Specify other sources of funding including fundraising and other grants)						
			Please note: Total Program Expenses for Column 1, must equal Total Revenue			
TOTAL REVENUE		$ 0				
F. FCSS REQUEST (DEFICIT = Total of Column 3 Expenditures − TotalRevenue)			$ 7,500.00			