

Senior Safety & Quality Improvement Program (SSQIP) Application Walkthrough

A Step-by-Step Guide

Last Updated: May 10, 2018



Application Walkthrough: A Step-by-Step Guide

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Create & Verify a New Account

	BC Pro	Care
	BC CARE PROVIDERS AS	SSOCIATION (BCCPA)
	Welcomet	
	To apply, you must first Register (top right corner).	
	Technical Tips: 1. If Internet Explorer is preventing you from registering, try another brow 2. If you did not receive a venification email try the following: 1. Check the Spami-funct folder in your email. 2. Check with any mail server IT for held mail from your sender email 3. Change the email listed on the account to a personal email unde 3. Turn of top-our blockers to download applications.	ail or the SMA mail server IP, 72.55.140.81.
	* If you are on a gov, edu, or business/other custom domain there may be not receive the email.	a stricter spam check, in which emails may be held and thus you will
F	Programs	Search programs.
	BC CARE PROVIDERS ASSOCIATION (BCC Accepting applications from Oct 4 2017 12:00 AM (PDT) to Jan 15 2016 11:09 PM (PST)	SENIORS SAFETY AND QUALITY IMPROV Accepting applications from Jan 2016 12:00 AM (PBT) to Feb 28 2018 11:50 PM (PBT) Program Guidelines and Eligibility Criteria
		Up to \$500 Per Funded
	MORE >	Up to \$500 Per Funded Resident
	MORE >	Resident MORE >



Apply to SSQIP at https://bccare.smapply.io/

1. Before applying to the Senior Safety and Quality Improvement Program (SSQIP), all applicants must register and create a new account in SurveyMonkey Apply.

Technical Tips:

- 1. If Internet Explorer is preventing you from registering, try another browser.
- 2. If you did not receive a **verification email*** try the following:
 - a. Check the Spam/Junk folder in your email.
 - b. Check with any mail server IT for held mail from your sender email or the SMA mail server IP, 72.55.140.81.
 - c. Change the email listed on the account to a personal email under a more public domain, then resend the verification email.
- 3. Turn off pop-up blockers to download applications.

*If you are on a .gov, .edu, or business/other custom domain there may be a stricter spam check, in which emails may be held and thus you will not receive the email.

BC Care Providers Association (BCCPA)		🐥 Programs	Applications 0 - Test Application -
← Return to admin		Yo	are currently logged in as: Test Application
F	BC Care Providers		
	▲ Your email address has not been verified! You will not be able to submit applications or complete certain tasks until you have verified your email address	Send verification link	
	NO APPLICATIONS.		
	Please choose a program from our program listings page to get started		
	View programs		
	Rosesses er 🔥 Apply: Copyright & Source July	ikey 2017 Privacy Terms v6.0.7941dce	

Edit Account Information & Settings

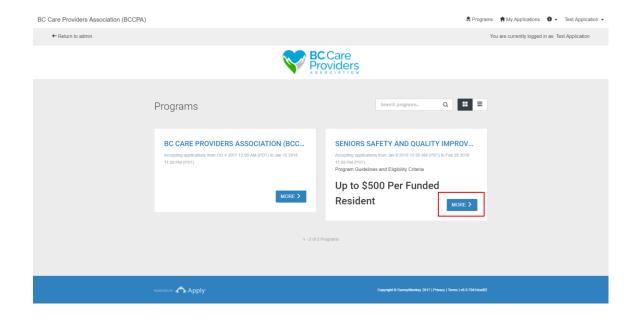
BC Care Providers Association (BCCPA)	🎗 Program	ns 🔺 My Applications	 Test Application
← Return to admin		You are currently logged in	Na: My Account
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	ASSOCIATION		
	Your email address has not been verified! You will not be able to submit applications or complete certain tasks until you have verified your email address Send verification link		
	NO APPLICATIONS.		
	Please choose a program from our program listings page to get started		
	Vow programs		
	rounne ar 🔥 Apply Capital & Savey Montey 2017 (Manay) Tema (et & 2%) Hanay)		

2. After creating a new account, log in and **verify your** email address.

- Click on your name at the top right-hand corner and select "My Account" from the drop-down list to update the following:
 - a. My Profile
 - b. Notifications
 - c. Eligibility

Begin Your Application

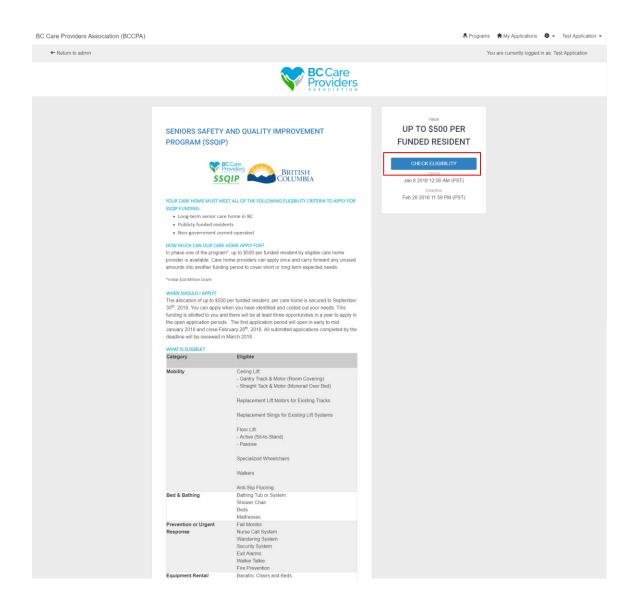
BC Care Providers Association (BCCPA)			Programs A My Applications I - Test Application -
← Return to admin			You are currently logged in as: Test Application
		BC Care Providers	
		NO APPLICATIONS.	
	Piease choo	se a program from our program listings page to get started	
	POWERED BY 🏠 Apply	Copyright @ SurveyMonkey 2017 Prinacy Term	z v6.0.7941dce8f2



1. Click "**View programs**" to view the BCCPA programs.

2. Click "**More**" to view more information regarding the SSQIP application.

Check Your Eligibility



- 1. Read the <u>SSQIP Guidelines</u> and ensure that the residential care home is eligible for funding.
- 2. Click "**Check Eligibility**" to complete the Eligibility Qualifiers.

Page 1

BC Care Providers Association (BCCPA)	Programs A My Applications I - Test Application -
← Return to admin	You are currently logged in as. Test Application
BC Care Providers	
Eligibility Qualifiers	06
WHAT PROGRAM ARE YOU APPLYING FOR?	
IS YOUR CARE HOME OPERATED BY A HEALTH AUTHORITY?	
⊖ 169 ⊖ No	
DOES YOUR CARE HOME HAVE PUBLICLY FUNDED RESIDENTS?	
 ○ Yes ○ No 	
IS YOUR APPLICATION FOR SSOIP TO BE PRIMARILY UTILIZED BY PUBLICLY FUNDED RESIDENTS?	
IS YOUR APPLICATION FOR SSQIP TO BE PRIMARILY UTILIZED BY PUBLICLY FUNDED RESIDENTS?	
 Ves No 	
U IW	
I'll do this later	

- Select the "Seniors Safety and Quality Improvement Program (SSQIP)" from the dropdown list.
- 4. Answer the remaining questions.
 - a. If the care home is **eligible*** for SSQIP funding proceed to the next step.
 - b. If the care home is **not eligible** for SSQIP funding, you will not be able to proceed to the next step and apply for SSQIP funding.

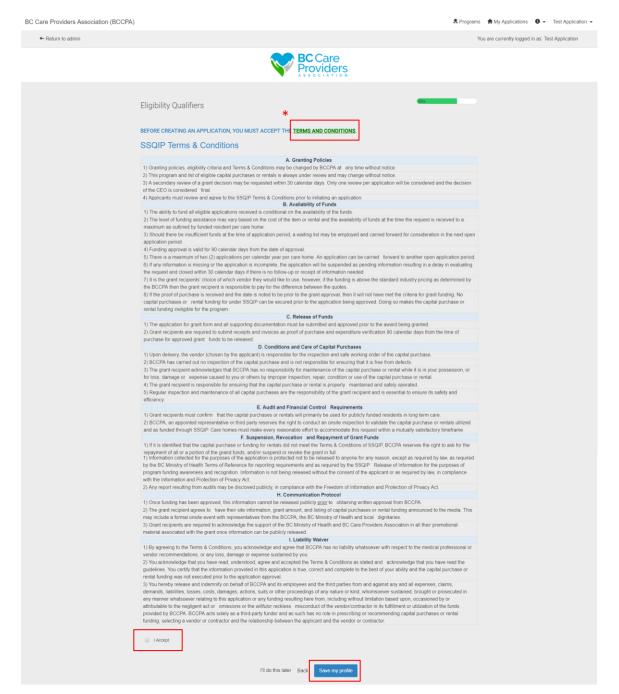
* Read the <u>SSQIP Guidelines</u> to check eligibility.

Page 2

BC Care Providers Association (BCCPA)		🕏 Programs	Applications	• Test Application •
← Return to admin		Yo	ou are currently logged in	as: Test Application
	BC Care Providers			
	Eligibility Qualifiers	33%		
	CARE HOME NAME	×		
	ADDRESS			
	CITY			
	PROVINCE			
	British Columbia	•		

- 5. Select the **care home name** from the drop-down list.
 - a. If the care home name is not listed, scroll to the bottom of the list and select "**Other**".
- 6. Key in the care home information.

Page 3



7. Read the SSQIP Terms & Conditions*.

*A PDF version of the SSQIP Terms & Conditions can be downloaded here or on the BCCPA website at <u>http://bccare.ca/programs/ssqip/</u>

- 8. Click "I Accept" if you agree to the SSQIP Terms & Conditions before completing the SSQIP Eligibility Qualifiers.
- 9. Click "**Save my profile**" to complete the Eligibility Qualifiers.

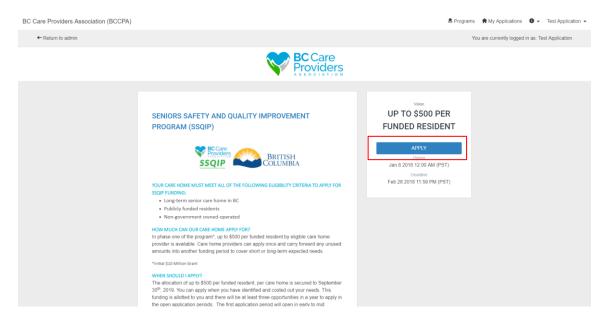
BC Care Providers Association (BCCPA)		🎗 Programs 🛛 🏫 My Applications 🛛 👻 Test Application -
← Return to admin		You are currently logged in as. Test Application
	A Your email address has not been verified! ou will not be able to submit applications or complete certain tasks until you have verified your email address	Send vertilication link
	Eligibility results	ate 5500 PER
	PROGRIM You are eligible for this program!	RESIDENT
	ОКЛУ	20 AM (PST)
	YOUR CARE HOME MUST MEET ALL OF THE FOLLOWING ELIGIBILITY CRITERIA TO APPLY FOR SSQIP FUNDING: • Long-term senior care home in BC • Dublichy funded residents • Non-government owned-operated	Feb 28 2018 11.59 FM (PST)
	*Initial \$10 Million Grant	

10. Congratulations! You are eligible for SSQIP funding.

Update Eligibility

11. To update your eligibility after it has been submitted, follow step 1 from Edit Account Information & Settings on page 4.

Apply to SSQIP



1. Click "**Apply**" from the SSQIP home page to apply to the SSQIP funding.

Note: You can only apply for SSQIP funding after the "Eligibility Qualifiers" are met and submitted.

		Programs 👚 My Applications 0 + Test Application +
+ Return to admin		
	SENIORS S PROGRAM Name your application Care Home Name Care Application	
	"Hotel 320 Million Struet. WHEN SIGLED LAPPOY The allocation of pto 5500 per funded readers, per cars home is secured to September 30 th , 2019. Your can apply when you have identified and costed out your needs. This funding is allotted to good. The funded readers is there apportunities in a year to apply in the open accidant periods. The fund tendent periods will read the apply in the open accidant periods. The fund tendent periods will read the apply in the open accidant periods. The fund tendent periods will be apply in the open accidant periods. The fund tendent periods will be apply in the open accidant periods. The fund tendent periods will be apply in the open accidant periods. The fund tendent periods will be apply accident periods.	

2. Enter the **name of the care home** to name the application.

BC Care Providers Association (BCCPA)

Programs My Applications 0 - Test Application -

0 of 3 required tasks complete	Seniors Safety and Quality Impr
Last edited: Jan 10 2018 02 59 PM (PST)	BCCPA CARE HOME UD. SSCIP-0000000020 Status: Application created and in progress APPLICATION ACTIVITY
REVIEW & SUBMIT Deadline: Feb 28 2016 11:59 PM (PST)	Vour tasks
	C Application Form
TA Test Application (Owner) pamela@bccare.ca	C B Funding Budget Calculator
Add collaborator	C Upload Intended Outcomes & Metrics(optional)
	C El Upload Supporting Documents(optional)
	Experience Rating
	Copyright & SurveyMonkey 2017 Princey Terms v& 8.7941dcd82

Under your application name, you will see your application **ID number** and the application **status**.

3. Add a collaborator to have another individual view, or view and edit the application (optional).

- **BC** Care Providers 0 of 3 required tasks complete Seniors Safety and Quality Impr... Preview BCCPA CARE HOME ID: SSQIP-0000000020 Status: Application created and in progress APPLICATION ACTIVITY Your tasks Application Form > TA Test Application (Owner) pamela@bccare.ca Funding Budget Calculator > Upload Intended Outcomes & Metrics(optional) > Upload Supporting Documents(optional) > Experience Rating >
- 4. Complete the following **tasks**:
 - a. Task 1: Application Form
 - b. Task 2: Funding Budget Calculator
 - c. Task 3: Upload Intended Outcomes & Metrics (optional)
 - d. Task 4: Upload Supporting Documents (optional)
 - e. Task 5: Experience Rating

Task 1: Application Form

BC Care Providers Association (BCCPA)

	Providers
K Back to application	C Application Form ···
Senion Safety and Quality improvem – BCCPA Care Home ID: SSQI-000000020 (Status Application created and in progress s	SSQIP Application Form
B Application Form	
📄 🗟 Funding Budget Calculator	ROLE AT CARE HOME
C I Upload Intended Outcom	
Upload Supporting Docu	PRIMARY CONTACT NO. EXT.
C B Experience Rating	Format as ### - #### (optional)
0 of 3 required tasks complete	
Last edited: Jan 10 2018 02:59 PM (PST)	ALTERNATE CONTACT NO. EXT. Format as ### - #### (optional) (optional)
REVIEW & SUBMIT Deadline: Feb 28 2018 11:59 PM (PST)	
	EMAIL SECONDARY EMAIL
	(optional)
	WHICH ORGANIZATION ARE YOU A MEMBER OF?
	(can select multiple) BC Care Provides Association (BCCPA)
	Centrimitional Health Association (DHA) Coher
	SELECT THE REGIONAL HEALTH AUTHORITY IN WHICH YOU OPERATE (can select multiple)
	Fraser Health Interior Health
	Island Heath Northern Heath
	Vancouver Coastal Health
	IS YOUR CARE HOME:
	Not-to-Prote Por Prote
	NUMBER OF BEDS If there are no private pay beds enter "0"
	# of Beds Occupied # Total Beds
	Publicly Funded Phylade Pay
	SAVE & CONTINUE EDITING MARK AS COMPLETE
	Copyright & SurveyMeekey 2017 Neway Tentes v6.8 7941dcat02

BC Care

The side bar shows complete and incomplete tasks. Completed tasks will be shown in green with a checkmark beside the task name (see next page).

1. Complete the **contact information**.

Programs Applications 0 - Test Application -

2. Complete the residential care home information.

3. "Save & Continue Editing" to save a draft and finish later or "Mark as Complete" to finish the task.

SSQIP Application Walkthrough | 12

BC Care Providers Association (BCCPA)



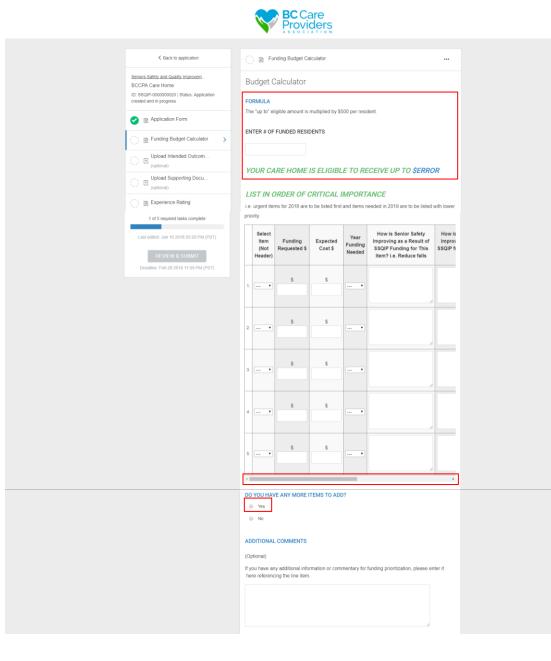
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< Back to application	Application Form Completed Jan 10 2016 03.20 PM (PST)	
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Application Form >	Last Name	
Funding Budget Calculator	Application Role at Care Home	
()	Test	
Upload Supporting Docu	Primary Contact No. Format as 888 - 888 - 888	
 Experience Rating 	604-736-4233 Ext.	
1 of 3 required tasks complete	(optional) (No response)	
Last edited: Jan 10 2018 03:20 PM (PST)	Alternate Contact No.	
REVIEW & SUBMIT	Format as ### - #### (optional) (No response)	
Deadline: Feb 28 2018 11:59 PM (PST)	Ext	

- 4. After the Application Form has been marked as complete please review the Application Form.
- 5. Select "…" to download, reset or edit the Application Form task
- 6. Select the next task on the left-hand side to continue.

Task 2: Funding Budget Calculator

BC Care Providers Association (BCCPA)



1. Enter in the number of **funded residents**

🞗 Programs 🔺 My Applications 🛛 🗸 Test Application 👻

- a. A dollar value will generate in **"your care**
 - home is eligible to receive up to \$___"

2. Complete the next table and list the items in order of critical importance*

*All requested items must be entered as a **quantity of 1** according to urgency, i.e. urgent items are to be listed first and items needed in 2019 are to be listed with lower priority.

Note: Use the **scroll bar** at the bottom of the table to complete the remaining columns or you will receive an error message when you click "Mark as Complete".

- 3. Click "yes" if you have more items to request.
 - a. If you select "**yes**", a second table with 10 more rows populates.
- 4. Enter any additional comments (optional)*.

*The more information regarding the priority will be helpful in approving the items requested.

	TOTAL FUNDING REQUESTED: \$0.00
	TOTAL EXPECTED COSTS: \$0.00 \$0.00
	NON-SSQIP FUNDING Are there any other sources of funding your care home will be receiving or eligible to receive for the listed items?
	♥ Yes ◎ No
	Clear Select the item that is fully or partially funded, and indicate the funding amount and source of the funding.
	Select Item (Not Header) Funding Amount in \$ Source of Funding
	1. \$
	2. \$
	3. S
	FUTURE OPEN APPLICATION PERIODS If there are items remaining to be approved for future funding, would you like to: Carry this application forward. Close this application and start a new one.
	SAVE & CONTINUE EDITING MARK AS COMPLETE
rosses av 🔥 Apply	Capyright & SurveyMankey 2017 Phasey Termis vil & 74116aadD

5. Total amount of funds

- a. The "**total funding requested**" is the dollar amount of funding you are requesting for all the listed items above.
- b. The "**total expected cost**" is the dollar amount for all items listed above.

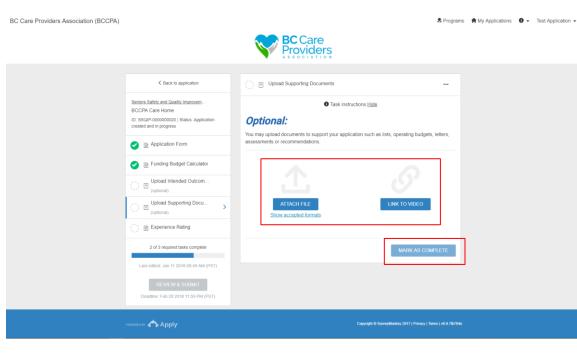
6. Non-SSQIP Funding

- a. If you select "**yes**", a table populates to identify the other sources of funding outside of SSQIP, i.e. Health Authority.
- 7. Select one of the options under "Future open application periods".
- 8. "Save & Continue Editing" to save a draft and finish later or "Mark as Complete" to finish the task.
- 9. See steps 5 6 in "Task 1: Application Form" (page 13) to review and edit the Funding Budget Calculator task after it is complete.

Task 3: Upload Intended Outcomes & Metrics (optional)

BC Care Providers Association (BCCPA)		Programs R My Applications 0 - Test Application -
		BC Care Providers
	< Back to application	C 🗉 Upload Intended Outcomes & Metrics 🚥
	Seniors Safety and Quality improvem – BCCPA Care Home ID: SSQIP-000000020 (Status, Application created and in progress s	Task instructions <u>Hide</u> If you do not vish to upload a file please complete the previous task. Upload a summary of the Intended Outcomes and Metrics file in a Microsoft Word (.doc.,doc.) or
	Application Form	a PDF format.
	🕑 🖹 Funding Budget Calculator	
	() I Upload Intended Outcom >	
	O I Upload Supporting Docu	ATTACH FILE
	 Experience Rating 	Show accepted formats
	2 of 3 required tasks complete Last edited: Jan 10 2018 04:11 PM (PST)	MARK AS COMPLETE
	REVIEW & SUBMIT Deadline: Feb 28 2018 11:59 PM (PST)	
	POWERED BY 🏠 Apply	Copyright & StarveyMankey 2017 Phracy Terms v6.0 78:154e

Task 4: Upload Supporting Documents (optional)



1. **Upload** any additional intended outcomes or metrics for the requested items in the Funding Budget Calculator task*.

* This section is helpful to support your application if you did not complete the comments in the budget calculator.

- 2. After uploading a file, click "Mark as Complete".
- See steps 5 6 in "Task 1: Application Form" (page 13) to review and edit the Upload Intended Outcome & Metrics task after it is complete.

1. **Upload** any additional supporting documents or attach a video link*.

* This may include lists, operating budgets, letters, assessments, recommendations, or videos to demonstrate a specific need, such as security.

- 2. After uploading a file "Mark as Complete".
- See steps 5 6 in "Task 1: Application Form" (page 13) to review and edit the Upload Intended Outcome & Metrics task after it is complete.

Task 5: Experience Rating

BC Care Providers Association (BCCPA)		R Programs	A My Applications 0 - Test Application -
		BC Care Providers	
	< Back to application	C Experience Rating	
	Senors Safey and Quality Improvem BCCPA Care Home ID: Soli-000000000 (Satus: Application created and in progress ID: Soli-000000000 (Satus: Application created and in progress) ID: Soli-0000000000000 (Satus: Application created and in progress) ID: Soli-0000000000000 (Satus: Application created and in progress) ID: Soli-0000000000000000000 (Satus: Application created and in progress) ID: Diplocal Intended Outcom	Draft saved Experience Rating How Are We Doing So Far? RATE YOUR OVERALL APPLICATION EXPERIENCE! Great There is nothing I would change. Good There are a couple of things I would change. Good De better. There are numerous things I would change. WHAT WOULD ENHANCE YOUR APPLICATION OR BUDGET CALCULATOR EXPERIENCE?	
	Experience Rating def 3 required tasks complete Last edited: Jain 11 2018 09:49 AM (PST) REVIEW & SUBMIT REVIEW & SUBMIT Deadline: Feb 28 2018 11:59 PM (PST)	WHAT DID YOU LIKE MOST ABOUT YOUR APPLICATION OR BUDGET CALCULATOR EXPERIENCE? (optional)	
		SAVE & CONTINUE EDITING MARK AS COMPLETE	
	POWERED BY 🖚 Apply	Copyright & SurveyMonkey 2017 (PrivacyTerms) vis 8.3d88d54	

- 1. Please **rate your overall experience** and provide us with some feedback.
- See steps 5 6 in "Task 1: Application Form" (page 13) to review and edit the Experience Rating task after it is complete.

Review & Submit Your Application

BC Care Providers Association (BCCPA)			Programs	A My Applications	0 -	Test Application 👻
		BC Care Providers				
	< Back to application	Experience Rating Completed Jan 11 2018 10:00 AM (PST)				
	Seniors Safety and Quality Improvem					
	BCCPA Care Home	Experience Rating				
	ID: SSQIP-0000000020 Status: Application created and in progress	How Are We Doing So Far? Rate Your Overall Application Experience!				
		Great! There is nothing I would change.				
	Application Form					
	Funding Budget Calculator					
	Upload Intended Outcom					
	C T Upload Supporting Docu					
	Experience Rating					
	3 of 3 required tasks complete					
	Last edited: Jan 11 2018 10:00 AM (PST)					
	REVIEW & SUBMIT Deadline: Feb 28 2018 11:59 PM (PS1)					
	POWERED BY	Copyright & SurveyMonkey 2017 (Physic)	(Terms) v6.0.3df8d54			

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	ID: SSQIP-0000000020 Status: Application created and in	progress Last edited: Jan 11 2018 10:00 AM (P	ST)				
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	Application Stage AppLiCATION FORM Completed - Jan 10 2018 03 20 PM (PST) SSQIP Application Form First Name Tex						

1. Select "**Review & Submit**" after 3 of 3 required tasks are complete.

 Review your application in the preview under "Your Tasks" or download* your application

***Technical Tip**: Turn off pop-up blockers to download your applications.

🞗 Programs	Applications 1	0 -	Test Application	*
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- 3. Click "Back to application" to edit your application*
- 4. Click "Seniors Safety and Quality Improvement Program (SSQIP)" to return to the SSQIP homepage.

* If you return to the SSQIP homepage before submitting your application, the application will save as a draft.

5. To submit your application, scroll to the bottom of the page and click "**submit your application**".

Note: After you submit your application you cannot edit it. If you wish to edit your application before the open application period closes, please contact the Programs Department (page 29)

Inter Application Control Inter Application Control Inter Application Control Inter Application Singe 100.0% complete Late obtained into 1000 AM (PST) Image: Application Singe 100.0% complete Late obtained into 1000 AM (PST) Image: Application Form Image: Application Form Image: Application Form <td< th=""><th>Seniors Safety and Quality Improvement Program (SSQIP)</th><th></th><th>🗄 Downloa</th></td<>	Seniors Safety and Quality Improvement Program (SSQIP)		🗄 Downloa
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Experience Rating Ref Vor Overal Application Experience		O Task instructions	
EXPERIENCE RATING Completed - Jan 11 2015 1000 AM (PST)	UPLOAD SUPPORTING DOCUMENTS		
Experience Rating New Avt No Dong to Fart Rate Your Overall Application Experienced		Task instructions	
Here Are Vite Dong So Far? Rate Your Overall Application Experience!	EXPERIENCE RATING Completed - Jan 11 2018 10:00 AM (PST)		^
	How Are Vie Doing So Far?		
	Great! There is nothing I would change.		

roviders

BC Care Providers Association (BCCPA)

Providers
Application Submitted Trains you for submitting your application for SSGIP Anding. We will be in fouch with a decision after all applications for this open period have been reviewed. Co to My Applications OR Voew more Programs
ousses or Apply Control 6 ServedNeter 2017 Photofilems (4.5 3865463

6. After submitting your application:

🐥 Programs 🔺 My Applications 🛛 👻 Test Application 👻

- a. Click "Go to My Application" to view your submitted application.
- b. Or click "View more Programs" to view other programs offered by BCCPA.

View Application Status

BC Care Providers Association (BCCPA)	Programs My Applications
	BC Care Providers
All Applications -	
Seniors Safely and Quality Improvement P BCCPA Care Home	
STATUS: Application Submitted	
Submitted on: Jan 11 2018 10:26 AM (PST)	
	1 - 1 of 1 Applications
роменер вт «Арріу	Cupyright © SurreyMonitery 2017 (Phracy)forms(et 8.358654

1. Click "My Applications" to view your application status.

Rename Your Application

BC Care Providers Association (BCCPA)			🎗 Programs 🔺 My Applications 🛛 🗸 Harry Potter 🗸
← Return to admin			You are currently logged in as: Harry Potter
		Providers	
		Providers	
	All Applications -	E =	
	StartUS Application Submitted Submitted VIEW Submitted on Jun 19 2018 05.30 PM (EST)		
		1 - 1 of 1 Applications	
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	Submitted on: Jan 19 2018 06:36 PM (EST) Hamp Poller (Owner) austronomosit+hampp@gmail.com	Services Subty and Quality Impr	

- 1. To rename your application, click "**My Applications**".
- 2. Click "View" to see the details of your application.

3. Click "..." to **Rename** or Download your application.

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	Seelars Safety and Salety Ingr. 12 @ Produce ## TEST APPLICATION 0.INCPT/000000000. Seelar Application Information
Rename y	your application
Also constr. [<u> </u>
	CANCEL OK 3

4. Enter the new **Care Home Name** to rename your application, then click "**Ok**".

Approved Funding – Next Application Steps

BC Care Providers Association (BCCPA)			Programs A My Applications 0 - Harry	Potter 👻
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	All Applications -		# =	
	Seniors Safety and Quality improvement P Care Home Renamed STATUS: Upload Documents for Approved Items 0 or 3 tasks complete U Late eteme: May 9 2013 02:42 PM (c01)			
		1 - 1 of 1 Applications		

- Log back into <u>SurveyMoney Apply</u> and select "My Applications"
- 2. Click "Start" to complete the following tasks:
 - a. Task 1: Letter of Approval Confirmation*
 - b. Task 2: Upload Invoices & Receipts
 - c. Task 3: Upload Intended Outcomes & Measurables

* Task 1 is a prerequisite to task 2 and 3. After completing task 1 first, task 2 and 3 can be completed in any order.

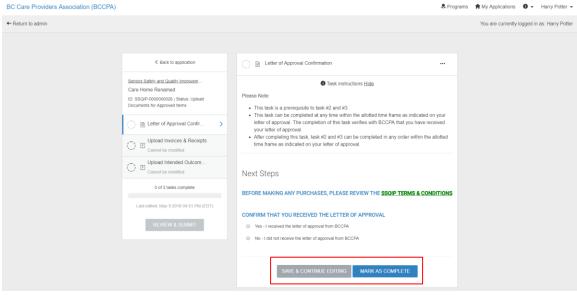
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		Your tasks	Instructions	
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		* Completed on: Jan 15 2018 12.03 PM (EST)	>	
		Completed on: Jan 15 2018 02:06 PM (EST)	>	
		Upload Intended Outcomes & Metrics (optional)	>	
		Upload Supporting Documents (optional)	>	
		Completed on: May 9 2018 02:42 PM (EDT)	>	

* The "**previous tasks**" are the all the tasks completed for your initial application submission. These tasks can only be viewed or downloaded. The new tasks to be completed after you have received your funding approval are listed under "**your tasks**".

Task 1: Letter of Approval Confirmation

BC Care Providers Association (BCCPA)			🐥 Program	ms 🕈 My Applications 0 - Harry Potte
← Return to admin				You are currently logged in as: Harry Po
0 of 3 tasks complete Last estites: May 9 2018 04:47 PM (EDT) REVIEW 45 SURBAT		Seniors Sately and Quality Impr [2] © Preval CARE HOME RENAMED ID: SSQIP-0000000026 Status: Uplicad Documents for Approved Items APPLICATION ACTIVITY	ew ***	
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	HP Harry Potter (Owner)	Letter of Approval Confirmation	>	
	Content of the second of the s	Cannot be started at this time	>	
	Add collaborator	Upload Intended Outcomes & Measurables Cannot be started at this time	>	
		Previous tasks		
		Completed on: Jan 15 2018 12:03 PM (EST)	>	
		Completed on: Jan 15 2018 02:06 PM (EST)	>	
		Upload Intended Outcomes & Metrics (optional)	>	
		Upload Supporting Documents (optional)	>	
		Completed on: May 9 2018 02:42 PM (EDT)	>	

1. To begin, click on the first task, "Letter of Approval Confirmation"



 Complete the form and "Save & Continue Editing" to save a draft and finish later, or "Mark as Complete" * to finish the task.

* Note: This task must be "Mark as Complete", before you are able to proceed to task 2 and 3

See steps 5 – 6 in "Task 1: Application Form" (page 13) to review and edit the Letter of Approval Confirmation task after it is complete.

Task 2: Upload Invoices & Receipts

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K Back to application Upload Invoices & Receipts	
Sector Septement Sector Sector Septement Sector	
MARK AS COMPLETE	

- 1. To begin task 2, click "Upload Invoices & Receipts"
- 2. Select "Attach File" to upload your documents *
- 3. After uploading a file, click "..." beside the file name if you would like to edit, preview, remove or download the file
- 4. "Save & Continue Editing" to save a draft and finish later or "Mark as Complete" to finish the task

* Note: You can upload multiple files. If you wish to upload more files later, select "Mark as Complete" to save the files you have uploaded. See steps 5 – 6 "Task 1: Application Form" (on page 13) to review and edit this task by removing or uploading files.

Task 3: Upload Intended Outcomes & Measurables

BC Care Providers Association (BCCPA)			Programs	Applications	0 - Harry Po
← Return to admin				You are currently le	ogged in as: Harry
	Back to application	Upload Intended Outcomes & Measurables			
	Seniors Safely and Quality Improvem Care Home Renamed ID: SSQIP-000000026 Status: Upload Documents for Approved Items	Task instructions <u>Hide</u> Please download the <u>SSQIP Intended Outcomes & Measurables Form</u> Once you have completed the form, please upload it here.			
	🕑 🗈 Letter of Approval Confir	When uploading your intended outcomes and measurables, please rename the document in following format:			
	Upload Invoices & Receipts	"CareHomeName_ApplicationNumber_IntendedOutcomes2018P1" For example: BCCPA_001_IntendedOutcomes2018P1			
	○				
	2 of 3 tasks complete Last edited: May 9 2018 06:29 PM (EDT)	ATTACH FILE			
	REVIEW & SUBMIT	pdf, doc, docx			
		BCCPA_001_IntendedOutcomes2018P1			
		MARK AS COMPLE	ETE		

- To begin task 3, click "Upload Intended Outcomes & Measurables"
- Click the hyperlink on "SSQIP Intended Outcomes & Measurables Form" to download the Microsoft Word Document form
- 3. After completing the form, select "Attach File" to upload the document*
- 4. After uploading a file, click "..." beside the file name if you would like to edit, preview, remove or download the file
- 5. **"Save & Continue Editing**" to save a draft and finish later or **"Mark as Complete**" to finish the task

* You can upload multiple files. If you wish to upload more files later, select "Mark as Complete" to save the files you have uploaded. See steps 5 - 6 "Task 1: Application Form" (on page 13) to review and edit this task by removing or uploading files.

Review & Submit Your Files

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← Return to admin	Back to application Bestions Safety and Quality Innoveem Care frome Remained Dis Stati-Roccostilis Status Uplead Documents for Approved Items Dis Stati-Roccostilis Status Uplead Documents for Approved Items Dis Stati-Roccostilis Dis Stati-Roccostilis Dis Stati-Roccostilis Dis Stati-Roccostilis Dis Stati-Roccostilis Joing Statistic Confirm. Lust edited: May 9 2018 06:40 PM (CDT)	Upload Intended Outcomes & Measurables Completed May 9 2018 04 49 M (EDT) Task instructions <u>Hide</u> Please download the <u>SSQIP Intended Outcomes & Measurables Form</u> . Once you have completed the form, please upload it here. Writen uploading your intended outcomes and measurables, please rename the document following format: - "CareHomeName_ApplicationNumber_IntendedOutcomes2018P1" - For example: BCCPA_001_IntendedOutcomes2018P1 Added May 9 2018	•••	You are currently i	ogged in a	as Harry Potter
	REVIEW & SUBMIT					

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*	YOUR TASKS		
	Application Stage	100.0% complete Submitted on: Jan 19 2018 05:36 PM (EST)	
		Completed: Jan 15 2018	
	SSQIP Application Form First Name		
	Test		
	Last Name		
	SUBMIT YOUR APPLICATION		

1. Select "**Review & Submit**" after 3 of 3 required tasks are complete

- To review, download or edit your application, see steps 2 – 4 in "Review & Submit Your Application" (page 18 – 19)
- 3. To submit these 3 tasks, click "submit your application"

* Here you will be able to preview all the tasks you have completed for this application (including your initial application submission). Scroll down to the bottom of the page to view the 3 tasks you have completed above.

Note: After you submit your application you **cannot edit it**. If you wish to edit your application before the open application period closes, please contact the Programs Department (page 29)

Contact Us

If you need to contact us about your SSQIP application, please email BCCPA or contact the Programs Department.

Pamela Eng

Programs Coordinator pamela@bccare.ca

604.736.4233 ext. 426