



Senior Safety & Quality Improvement Program (SSQIP) Application Walkthrough

A Step-by-Step Guide

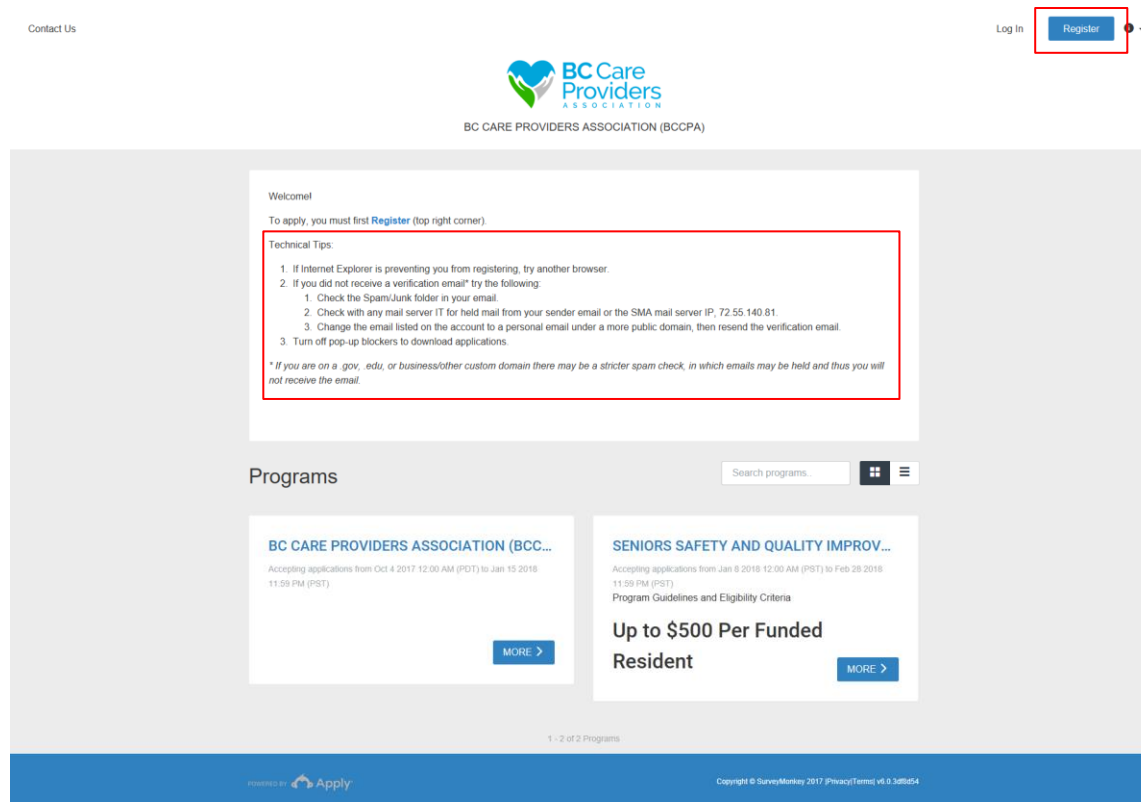
Last Updated: May 10, 2018

Application Walkthrough: A Step-by-Step Guide

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Create & Verify a New Account



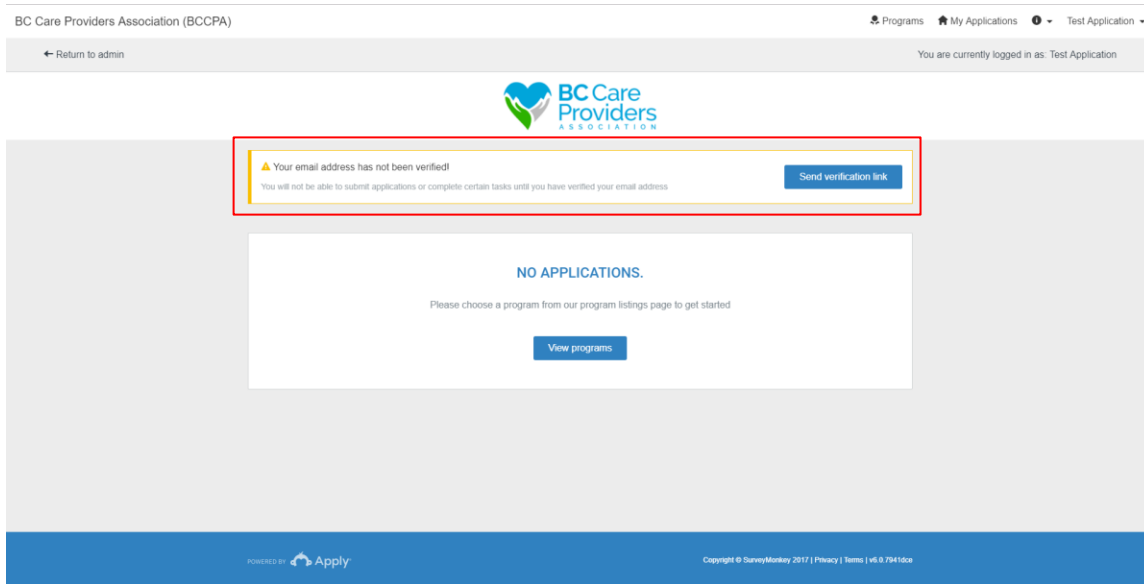
Apply to **SSQIP** at <https://bccare.smapply.io/>

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:

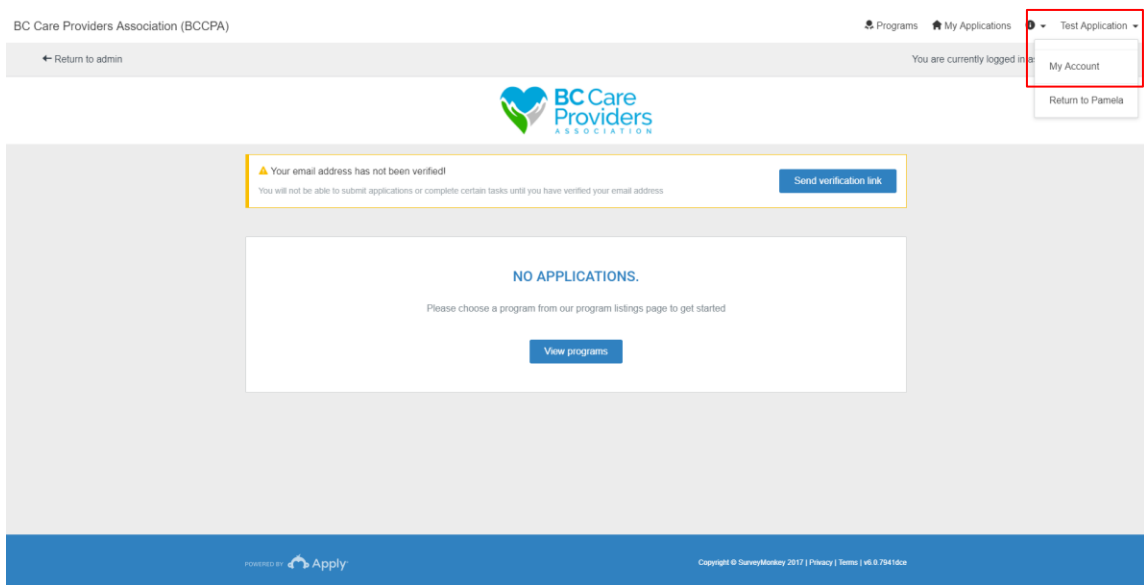
1. If Internet Explorer is preventing you from registering, **try another browser.**
2. If you did not receive a **verification email*** try the following:
 - a. Check the Spam/Junk folder in your email.
 - b. Check with any mail server IT for held mail from your sender email or the SMA mail server IP, 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.*



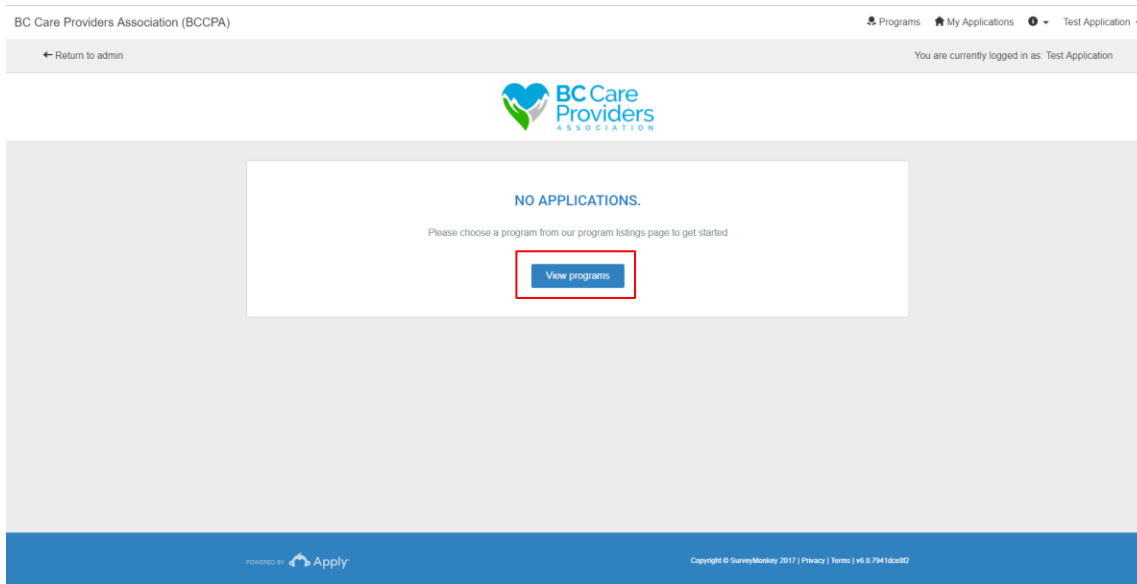
2. After creating a new account, log in and **verify your email address**.

Edit Account Information & Settings

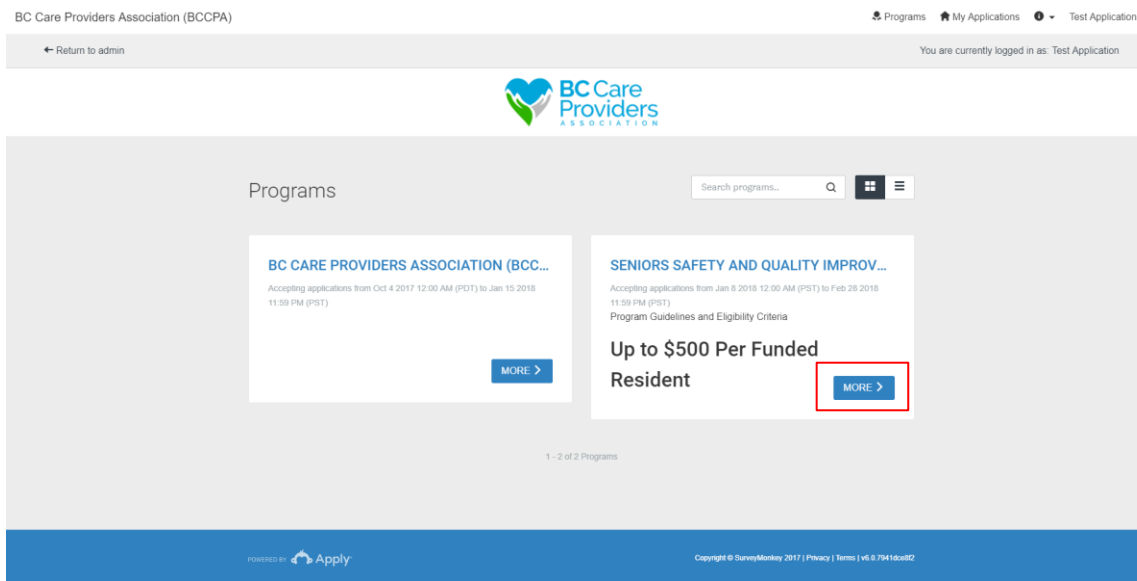


1. Click on your name at the top right-hand corner and select **“My Account”** from the drop-down list to update the following:
 - a. My Profile
 - b. Notifications
 - c. Eligibility

Begin Your Application



1. Click **“View programs”** to view the BCCPA programs.




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




Check Your Eligibility

BC Care Providers Association (BCCPA) Programs My Applications Test Application

[Return to admin](#) You are currently logged in as: Test Application


BC Care Providers Association

SENIORS SAFETY AND QUALITY IMPROVEMENT PROGRAM (SSQIP)



YOUR CARE HOME MUST MEET ALL OF THE FOLLOWING ELIGIBILITY CRITERIA TO APPLY FOR SSQIP FUNDING:

- Long-term senior care home in BC
- Publicly funded residents
- Non-government owned-operated

HOW MUCH CAN OUR CARE HOME APPLY FOR?

In phase one of the program*, up to \$500 per funded resident by eligible care home provider is available. Care home providers can apply once and carry forward any unused amounts into another funding period to cover short or long-term expected needs.

*Initial \$10 Million Grant

WHEN SHOULD I APPLY?

The allocation of up to \$500 per funded resident, per care home is secured to September 30th, 2019. You can apply when you have identified and costed out your needs. This funding is allotted to you and there will be at least three opportunities in a year to apply in the open application periods. The first application period will open in early to mid January 2018 and close February 26th, 2018. All submitted applications completed by the deadline will be reviewed in March 2018.

WHAT IS ELIGIBLE?

Category	Eligible
Mobility	Ceiling Lift: <ul style="list-style-type: none">- Gantry Track & Motor (Room Covering)- Straight Tack & Motor (Monorail Over Bed) Replacement Lift Motors for Existing Tracks Replacement Slings for Existing Lift Systems Floor Lift: <ul style="list-style-type: none">- Active (Sit-to-Stand)- Passive Specialized Wheelchairs Walkers
Bed & Bathing	Anti-Slip Flooring Bathing Tub or System Shower Chair Beds Mattresses
Prevention or Urgent Response	Fall Monitor Nurse Call System Wandering System Security System Exit Alarms Walkie Talkie Fire Prevention
Equipment Rental/	Bariatric Chairs and Beds

Value

UP TO \$500 PER FUNDED RESIDENT

CHECK ELIGIBILITY

Expires

Jan 8 2018 12:00 AM (PST)

Deadline

Feb 28 2018 11:59 PM (PST)

1. Read the [SSQIP Guidelines](#) and ensure that the residential care home is eligible for funding.
2. Click **“Check Eligibility”** 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

BC Care Providers Association

Eligibility Qualifiers 0%

WHAT PROGRAM ARE YOU APPLYING FOR?

IS YOUR CARE HOME OPERATED BY A HEALTH AUTHORITY?

IS YOUR APPLICATION FOR SSQIP TO BE PRIMARILY UTILIZED BY PUBLICLY FUNDED RESIDENTS?

IS YOUR APPLICATION FOR SSQIP TO BE PRIMARILY UTILIZED BY PUBLICLY FUNDED RESIDENTS?

I'll do this later Next

3. Select the “**Seniors Safety and Quality Improvement Program (SSQIP)**” from the drop-down 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 [SSQIP Guidelines](#) to check eligibility.

BC Care Providers Association (BCCPA) Programs My Applications Test Application

Return to admin You are currently logged in as: Test Application

BC Care Providers Association

Eligibility Qualifiers

CARE HOME NAME

ADDRESS

CITY

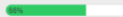
PROVINCE

I'll do this later Next

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**.



Eligibility Qualifiers



*

BEFORE CREATING AN APPLICATION, YOU MUST ACCEPT THE TERMS AND CONDITIONS

SSQIP Terms & Conditions

A. Granting Policies

- 1) Granting policies, eligibility criteria and Terms & Conditions may be changed by BCCPA at any time without notice
- 2) This program and list of eligible capital purchases or rentals is always under review and may change without notice
- 3) A secondary review of a grant decision may be requested within 30 calendar days. Only one review per application will be considered and the decision of the CEO is considered final.
- 4) Applicants must review and agree to the SSQIP Terms & Conditions prior to initiating an application.

B. Availability of Funds

- 1) The ability to fund all eligible applications received is conditional on the availability of the funds.
- 2) The level of funding assistance may vary based on the cost of the item or rental and the availability of funds at the time the request is received to a maximum as outlined by funded resident per care home.
- 3) Should there be insufficient funds at the time of application period, a waiting list may be employed and carried forward for consideration in the next open application period.
- 4) Funding approval is valid for 90 calendar days from the date of approval.
- 5) There is a maximum of two (2) applications per calendar year per care home. An application can be carried forward to another open application period
- 6) If any information is missing or the application is incomplete, the application will be suspended as pending information resulting in a delay in evaluating the request and closed within 30 calendar days if there is no follow-up or receipt of information needed.
- 7) It is the grant recipient's choice of which vendor they would like to use, however, if the funding is above the standard industry pricing as determined by the BCCPA then the grant recipient is responsible to pay for the difference between the quotes.
- 8) If the proof of purchase is received and the date is noted to be prior to the grant approval, then it will not have met the criteria for grant funding. No capital purchases or rental funding for under SSQIP can be secured prior to the application being approved. Doing so makes the capital purchase or rental funding ineligible for the program.

C. Release of Funds

- 1) The application for grant form and all supporting documentation must be submitted and approved prior to the award being granted
- 2) Grant recipients are required to submit receipts and invoices as proof of purchase and expenditure verification 90 calendar days from the time of purchase for approved grant funds to be released.

D. Conditions and Care of Capital Purchases

- 1) Upon delivery, the vendor (chosen by the applicant) is responsible for the inspection and safe working order of the capital purchase.
- 2) BCCPA has carried out no inspection of the capital purchase and is not responsible for ensuring that it is free from defects.
- 3) The grant recipient acknowledges that BCCPA has no responsibility for maintenance of the capital purchase or rental while it is in your possession, or for loss, damage or expense caused to you or others by improper inspection, repair, condition or use of the capital purchase or rental.
- 4) The grant recipient is responsible for ensuring that the capital purchase or rental is properly maintained and safely operated.
- 5) Regular inspection and maintenance of all capital purchases are the responsibility of the grant recipient and is essential to ensure its safety and efficiency.

E. Audit and Financial Control Requirements

- 1) Grant recipients must confirm that the capital purchases or rentals will primarily be used for publicly funded residents in long term care.
- 2) BCCPA, an appointed representative or third party reserves the right to conduct an onsite inspection to validate the capital purchase or rentals utilized and as funded through SSQIP. Care homes must make every reasonable effort to accommodate this request within a mutually satisfactory timeframe

F. Suspension, Revocation and Repayment of Grant Funds

- 1) If it is identified that the capital purchase or funding for rentals did not meet the Terms & Conditions of SSQIP, BCCPA reserves the right to ask for the repayment of all or a portion of the grant funds, and/or suspend or revoke the grant in full.
- 1) Information collected for the purposes of the application is protected not to be released to anyone for any reason, except as required by law, as required by the BC Ministry of Health Terms of Reference for reporting requirements and as required by the SSQIP Release of Information for the purposes of program funding awareness and recognition. Information is not being released without the consent of the applicant or as required by law, in compliance with the information and Protection of Privacy Act.
- 2) Any report resulting from audits may be disclosed publicly, in compliance with the Freedom of Information and Protection of Privacy Act.

H. Communication Protocol

- 1) Once funding has been approved, this information cannot be released publicly prior to obtaining written approval from BCCPA.
- 2) The grant recipient agrees to have their site information, grant amount, and listing of capital purchases or rental funding announced to the media. This may include a formal onsite event with representatives from the BCCPA, the BC Ministry of Health and local dignitaries.
- 3) Grant recipients are required to acknowledge the support of the BC Ministry of Health and BC Care Providers Association in all their promotional material associated with the grant once information can be publicly released.

I. Liability Waiver

- 1) By agreeing to the Terms & Conditions, you acknowledge and agree that BCCPA has no liability whatsoever with respect to the medical professional or vendor recommendations, or any loss, damage or expense sustained by you.
- 2) You acknowledge that you have read, understood, agree and accepted the Terms & Conditions as stated and acknowledge that you have read the guidelines. You certify that the information provided in this application is true, correct and complete to the best of your ability and the capital purchase or rental funding was not executed prior to the application approval.
- 3) You hereby release and indemnify on behalf of BCCPA and its employees and the third parties from and against any and all expenses, claims, demands, liabilities, losses, costs, damages, actions, suits or other proceedings of any nature or kind, whatsoever sustained, brought or prosecuted in any manner whatsoever relating to this application or any funding resulting here from, including without limitation based upon, occasioned by or attributable to the negligent act or omissions or the willful or reckless misconduct of the vendor/contractor in its fulfillment or utilization of the funds provided by BCCPA. BCCPA acts solely as a third-party funder and as such has no role in prescribing or recommending capital purchases or rental funding, selecting a vendor or contractor and the relationship between the applicant and the vendor or contractor.

I Accept

I'll do this later Back

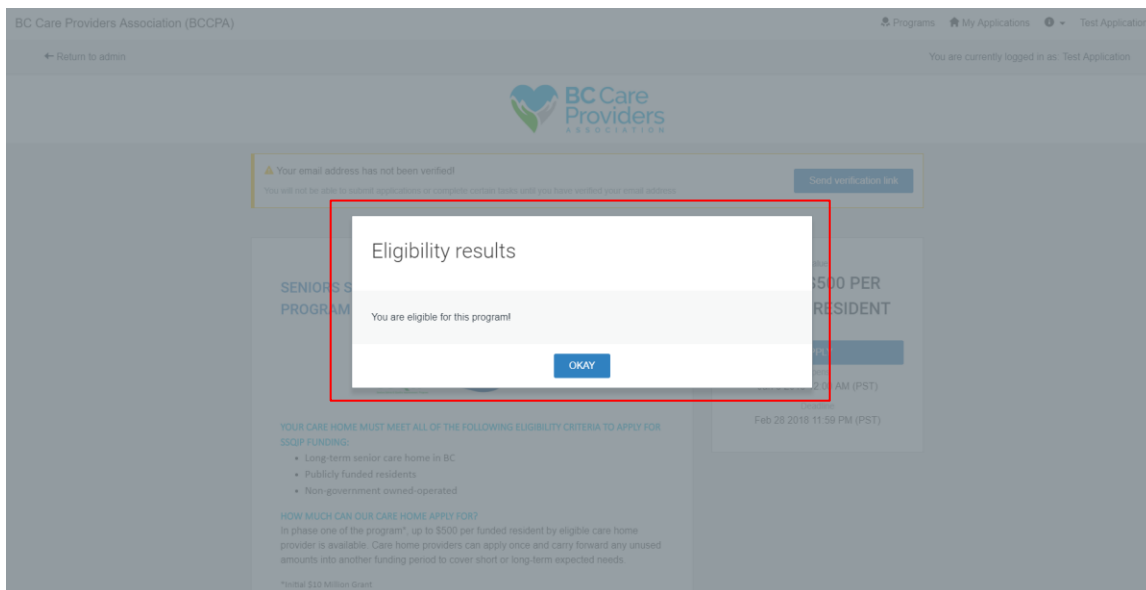
Save my profile

7. Read the **SSQIP Terms & Conditions***.

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

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.

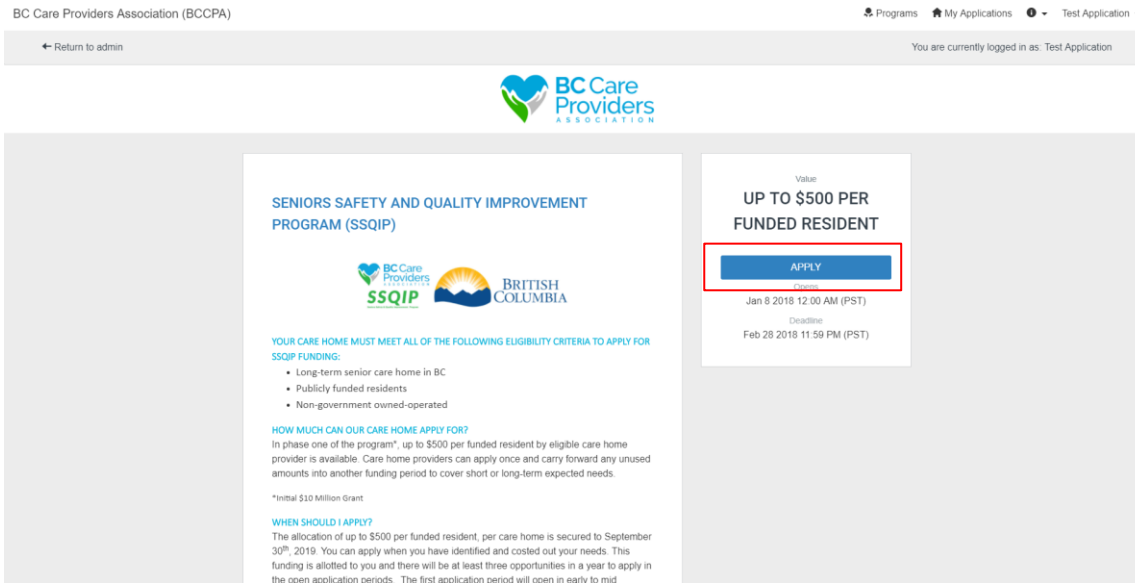


10. Congratulations! You are eligible for SSQIP funding.

Update Eligibility

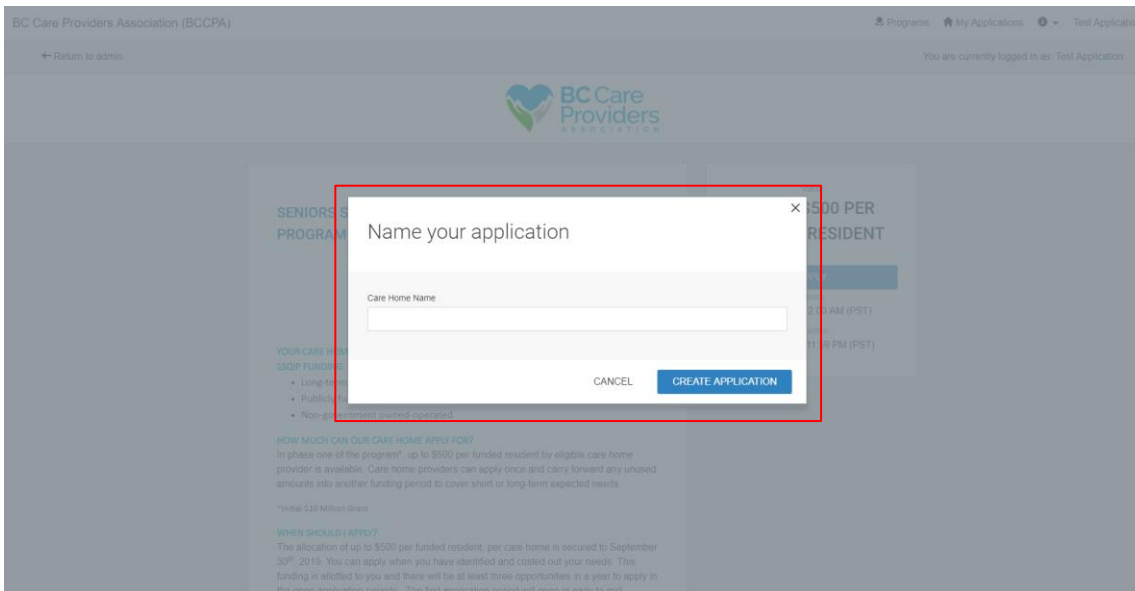
11. To update your eligibility after it has been submitted, follow step 1 from **Edit Account Information & Settings** on page 4.

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.



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



0 of 3 required tasks complete

Last edited: Jan 10 2018 02:59 PM (PST)

REVIEW & SUBMIT

Deadline: Feb 28 2018 11:59 PM (PST)

TA Test Application (Owner)
pamela@bccare.ca

Add collaborator

Seniors Safety and Quality Impr... [Link] Preview ...

BCCPA CARE HOME

ID: SSQIP-000000020 Status: Application created and in progress

APPLICATION ACTIVITY

Your tasks

- Application Form >
- Funding Budget Calculator >
- Upload Intended Outcomes & Metrics(optional) >
- Upload Supporting Documents(optional) >
- Experience Rating >

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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).



0 of 3 required tasks complete

Last edited: Jan 10 2018 02:59 PM (PST)

REVIEW & SUBMIT

Deadline: Feb 28 2018 11:59 PM (PST)

TA Test Application (Owner)
pamela@bccare.ca

Add collaborator

Seniors Safety and Quality Impr... [Link] Preview ...

BCCPA CARE HOME

ID: SSQIP-000000020 Status: Application created and in progress

APPLICATION ACTIVITY

Your tasks

- Application Form >
- Funding Budget Calculator >
- Upload Intended Outcomes & Metrics(optional) >
- Upload Supporting Documents(optional) >
- Experience Rating >

POWERED BY Apply

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4. Complete the following **tasks**:

- Task 1: Application Form
- Task 2: Funding Budget Calculator
- Task 3: Upload Intended Outcomes & Metrics (optional)
- Task 4: Upload Supporting Documents (optional)
- Task 5: Experience Rating

Task 1: Application Form

BC Care Providers Association (BCCPA)

Programs My Applications Test Application



← Back to application

Seniors Safety and Quality Improvem...
BCCPA Care Home
ID: SSQIP-000000020 | Status: Application created and in progress

- Application Form
- Funding Budget Calculator
- Upload Intended Outcom... (optional)
- Upload Supporting Docu... (optional)
- Experience Rating

0 of 3 required tasks complete

Last edited: Jan 10 2018 02:59 PM (PST)

REVIEW & SUBMIT

Deadline: Feb 29 2018 11:59 PM (PST)

Application Form

SSQIP Application Form

FIRST NAME LAST NAME

ROLE AT CARE HOME

PRIMARY CONTACT NO. EXT.

Format as ### - ### - #### (optional)

ALTERNATE CONTACT NO. EXT.

Format as ### - ### - #### (optional)

EMAIL SECONDARY EMAIL

(optional)

WHICH ORGANIZATION ARE YOU A MEMBER OF?
(can select multiple)

- BC Care Providers Association (BCCPA)
- Denominational Health Association (DHA)
- Other

SELECT THE REGIONAL HEALTH AUTHORITY IN WHICH YOU OPERATE
(can select multiple)

- Fraser Health
- Interior Health
- Island Health
- Northern Health
- Vancouver Coastal Health

IS YOUR CARE HOME:

- Not-for-Profit
- For Profit

NUMBER OF BEDS
If there are no private pay beds enter "0"

	# of Beds Occupied	# Total Beds
Publicly Funded		
Private Pay		

SAVE & CONTINUE EDITING MARK AS COMPLETE

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**.

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.



Seniors Safety and Quality Improvem...
BCCPA Care Home
ID: SSQIP-000000020 | Status: Application created and in progress

- Application Form
- Funding Budget Calculator
- Upload Intended Outcom... (optional)
- Upload Supporting Docu... (optional)
- Experience Rating

1 of 3 required tasks complete

Last edited: Jan 10 2018 03:20 PM (PST)

REVIEW & SUBMIT

Deadline: Feb 28 2018 11:59 PM (PST)

Application Form
Completed Jan 10 2018 03:20 PM (PST)

SSQIP Application Form

First Name
Text

Last Name
Text

Role at Care Home
Text

Primary Contact No.
Format as ### - ### - ####
(06-736-4233)

Ext.
(optional)
(No response)

Alternate Contact No.
Format as ### - ### - #### (optional)
(No response)

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)

Programs My Applications Test Application



← Back to application

Seniors Safety and Quality Improvem...
BCCPA Care Home
ID: SSQIP-000000020 | Status: Application created and in progress

Application Form

Funding Budget Calculator

Upload Intended Outcom...
(optional)

Upload Supporting Docu...
(optional)

Experience Rating

1 of 3 required tasks complete

Last edited: Jan 10 2018 03:20 PM (PST)

REVIEW & SUBMIT

Deadline: Feb 28 2018 11:59 PM (PST)

Funding Budget Calculator

Budget Calculator

FORMULA

The "up to" eligible amount is multiplied by \$500 per resident.

ENTER # OF FUNDED RESIDENTS

YOUR CARE HOME IS ELIGIBLE TO RECEIVE UP TO \$ERROR

LIST IN ORDER OF CRITICAL IMPORTANCE

i.e. urgent items for 2018 are to be listed first and items needed in 2019 are to be listed with lower priority.

Select Item (Not Header)	Funding Requested \$	Expected Cost \$	Year Funding Needed	How is Senior Safety Improving as a Result of SSQIP Funding for This Item? i.e. Reduce falls	How is Improv SSQIP f
1	\$	\$			
2	\$	\$			
3	\$	\$			
4	\$	\$			
5	\$	\$			

DO YOU HAVE ANY MORE ITEMS TO ADD?

Yes

No

ADDITIONAL COMMENTS

(Optional)

If you have any additional information or commentary for funding prioritization, please enter it here referencing the line item.

1. Enter in the number of **funded residents**
 - 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.	---	\$	

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

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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**

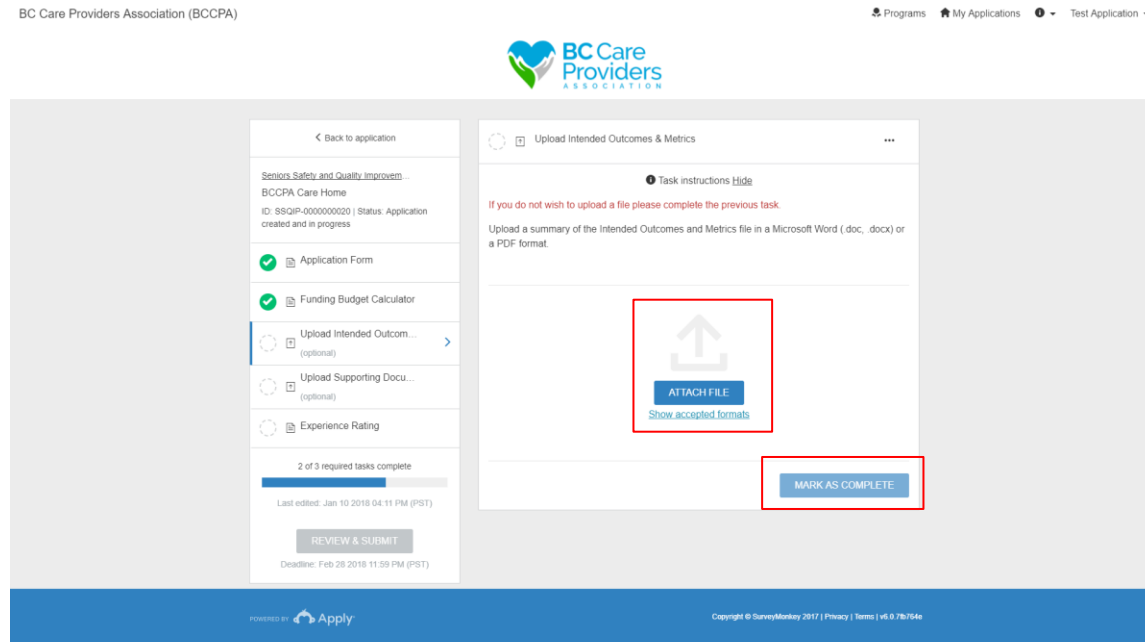
- a. If you select **“yes”**, a table populates to identify the other sources of funding outside of SSQIP, i.e. Health Authority.

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)

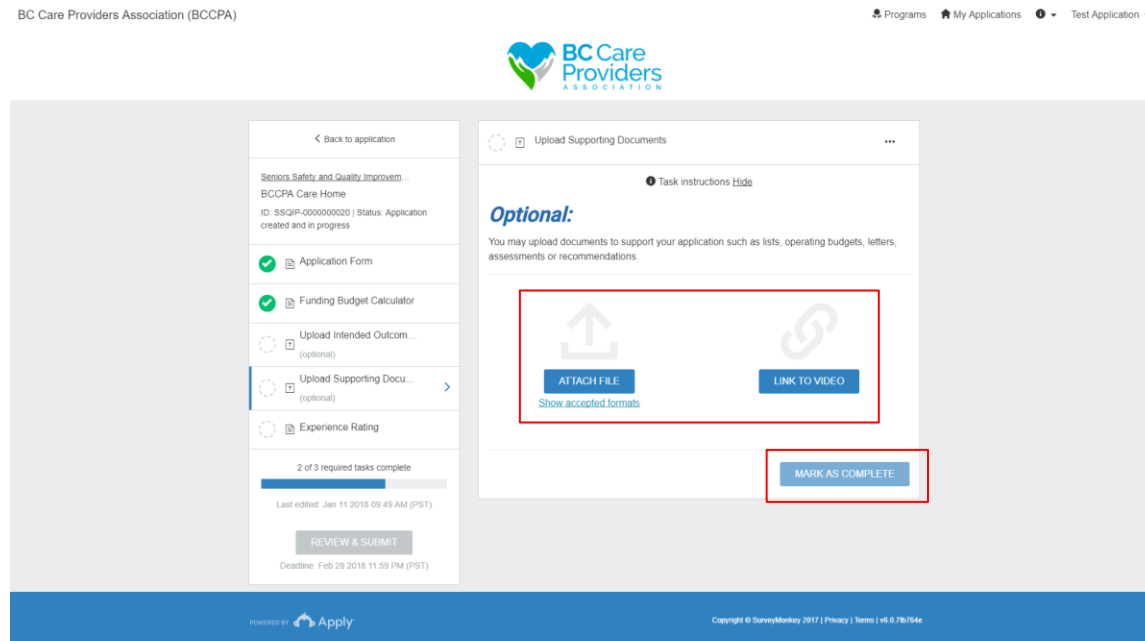


1. **Upload** any additional intended outcomes or metrics for the requested items in the Funding Budget Calculator task*.

* 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”**.
3. 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 4: Upload Supporting Documents (optional)



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”**.
3. 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)

Programs My Applications Test Application



← Back to application

Seniors Safety and Quality Improvement
BCCPA Care Home
ID: SSQIP-0000000020 | Status: Application created and in progress

- Application Form
- Funding Budget Calculator
- Upload Intended Outcom... (optional)
- Upload Supporting Docu... (optional)
- Experience Rating

2 of 3 required tasks complete

Last edited: Jan 11 2018 09:49 AM (PST)

REVIEW & SUBMIT

REVIEW & SUBMIT

Deadline: Feb 28 2018 11:59 PM (PST)

Experience Rating

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.
- Could be better. There are numerous things I would change.

WHAT WOULD ENHANCE YOUR APPLICATION OR BUDGET CALCULATOR EXPERIENCE?

(optional)

WHAT DID YOU LIKE MOST ABOUT YOUR APPLICATION OR BUDGET CALCULATOR EXPERIENCE?

(optional)

(optional)

SAVE & CONTINUE EDITING MARK AS COMPLETE

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1. Please **rate your overall experience** and provide us with some feedback.
2. 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 My Applications Test Application

BC Care Providers Association

Seniors Safety and Quality Improvement Program (SSQIP)

BCCPA Care Home
ID: SSQIP-000000020 | Status: Application created and in progress

- Application Form
- Funding Budget Calculator
- Upload Intended Outcom... (optional)
- Upload Supporting Docu... (optional)
- Experience Rating

3 of 3 required tasks complete

Last edited: Jan 11 2018 10:00 AM (PST)

REVIEW & SUBMIT

Last edited: Feb 20 2018 11:33 PM (PST)

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

BC Care Providers Association (BCCPA)

Programs My Applications Test Application

BC Care Providers Association

Seniors Safety and Quality Improvement Program (SSQIP)

BCCPA CARE HOME Download

ID: SSQIP-000000020 | Status: Application created and in progress | Last edited: Jan 11 2018 10:00 AM (PST)

Test Application (Owner)
james@bccpa.ca

YOUR TASKS

Application Stage 100.0% complete
Last edited: Jan 11 2018 10:00 AM (PST)

APPLICATION FORM
Completed - Jan 10 2018 03:20 PM (PST)

SSQIP Application Form

First Name

Test

Last Name

Application

View all tasks

2. Review your application in the preview under **“Your Tasks”** or **download*** your application

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



← Back to application

Seniors Safety and Quality Improvement Program (SSQIP) Download

BCCPA CARE HOME

ID: SSQIP-0000000000 Status: Application created and in progress Last edited: Jan 11 2018 10:00 AM (PST)

TA Test Application (Owner) pamelaj@bccpa.ca

YOUR TASKS

Application Stage 100.0% complete
Last edited: Jan 11 2018 10:00 AM (PST)

APPLICATION FORM
Completed - Jan 10 2018 03:20 PM (PST)

SSQIP Application Form

First Name

Text

Last Name

Application

Role at Care Home

Non-SSQIP Funding

Are there any other sources of funding your care home will be receiving or eligible to receive for the listed items?

No

Future Open Application Periods

If there are items remaining to be approved for future funding, would you like to:

Carry this application forward.

UPLOAD INTENDED OUTCOMES & METRICS
Incomplete Task instructions

UPLOAD SUPPORTING DOCUMENTS
Incomplete Task instructions

EXPERIENCE RATING
Completed - Jan 11 2018 10:00 AM (PST)

Experience Rating

How Are We Doing So Far?

Rate Your Overall Application Experience!

Great! There is nothing I would change.

POWERED BY Apply

SUBMIT YOUR 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)



Application Submitted

Thank you for submitting your application for SSQIP funding. We will be in touch with a decision after all applications for this open period have been reviewed.

Go to My Applications

OR

View more Programs

6. After submitting your 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)

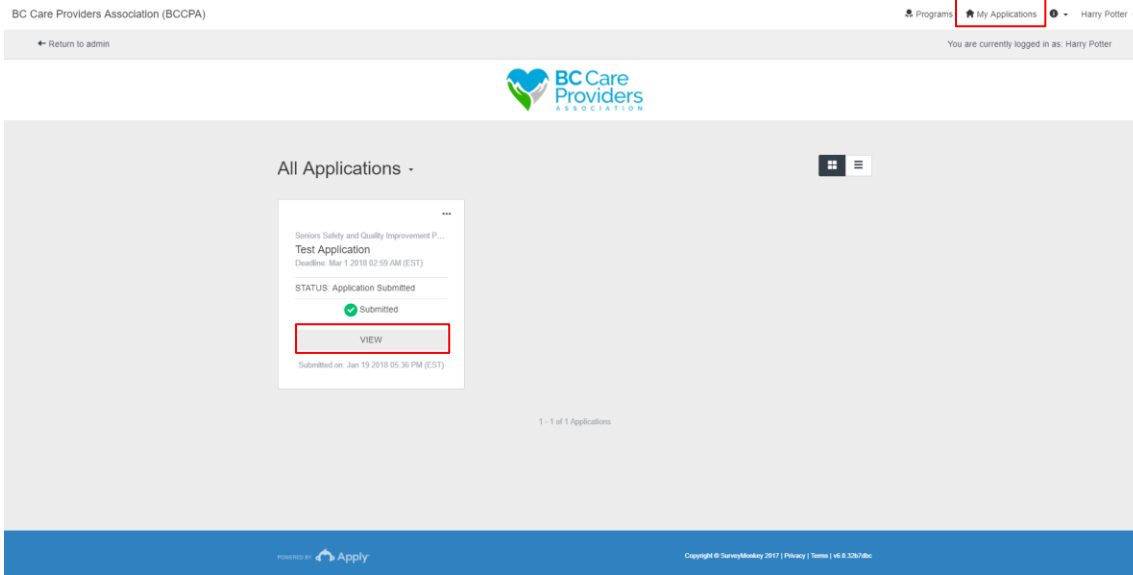


Programs **My Applications** Test Application

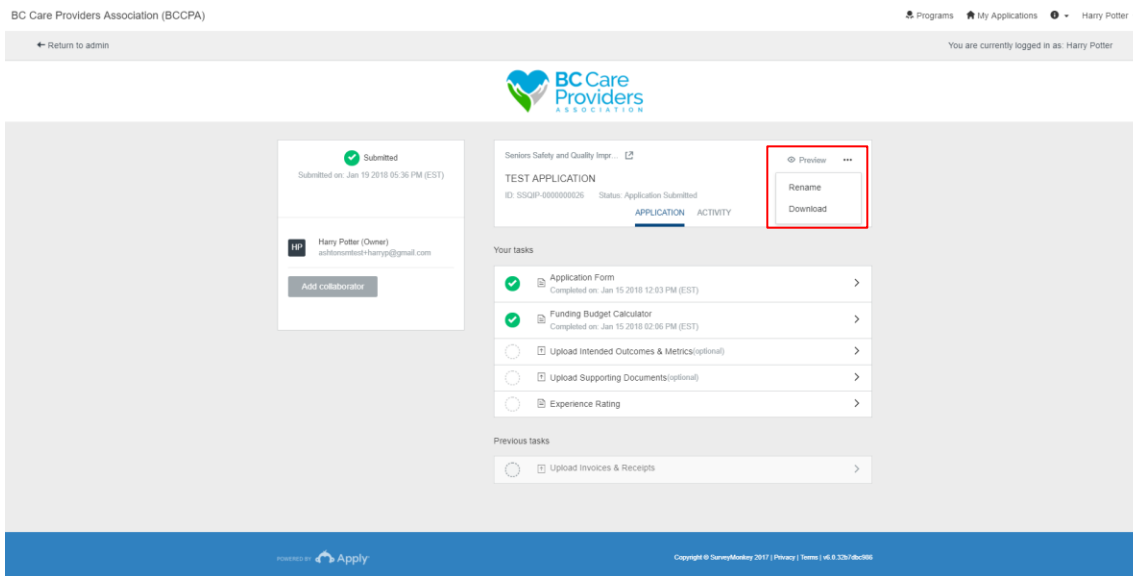
The screenshot shows a web interface for viewing application status. At the top, there is a navigation bar with "Programs", "My Applications" (highlighted with a red box), and "Test Application". Below the navigation bar is the BCCPA logo. The main content area is titled "All Applications" and contains a single application card. The card displays the program name "Seniors Safety and Quality Improvement P...", the organization "BCCPA Care Home", and the status "STATUS: Application Submitted" (highlighted with a red box). Below the status is a green checkmark and the word "Submitted", followed by a "VIEW" button. At the bottom of the card, it says "Submitted on: Jan 11 2018 10:26 AM (PST)". The page footer includes "POWERED BY Apply" and "Copyright © SurveyMonkey 2017 [Privacy/Terms] v6.0 348504".

1. Click **“My Applications”** to view your **application status**.

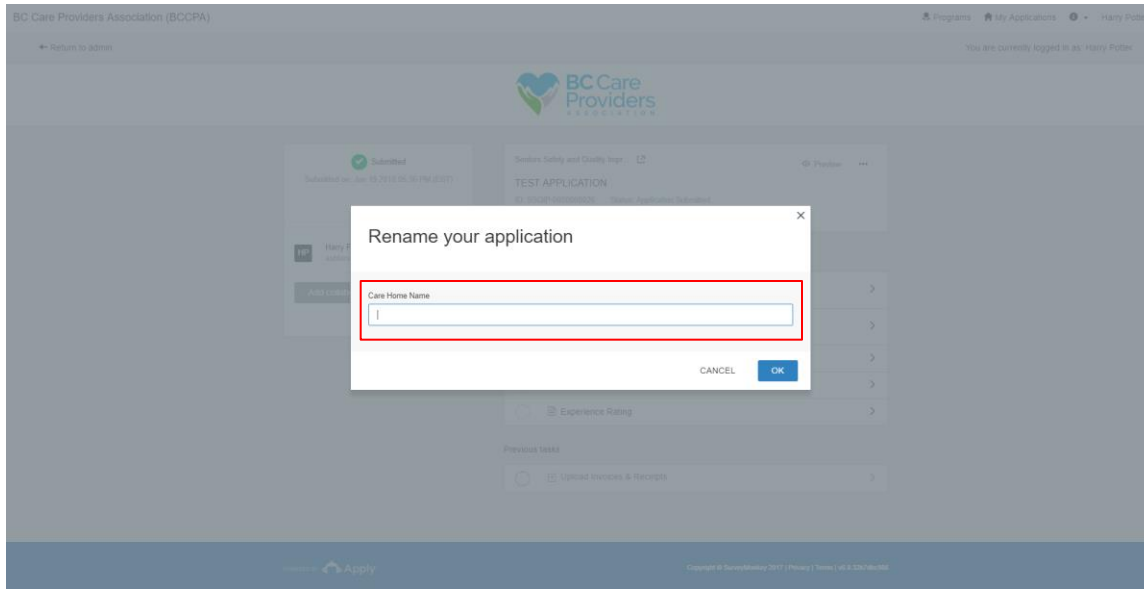
Rename Your Application



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

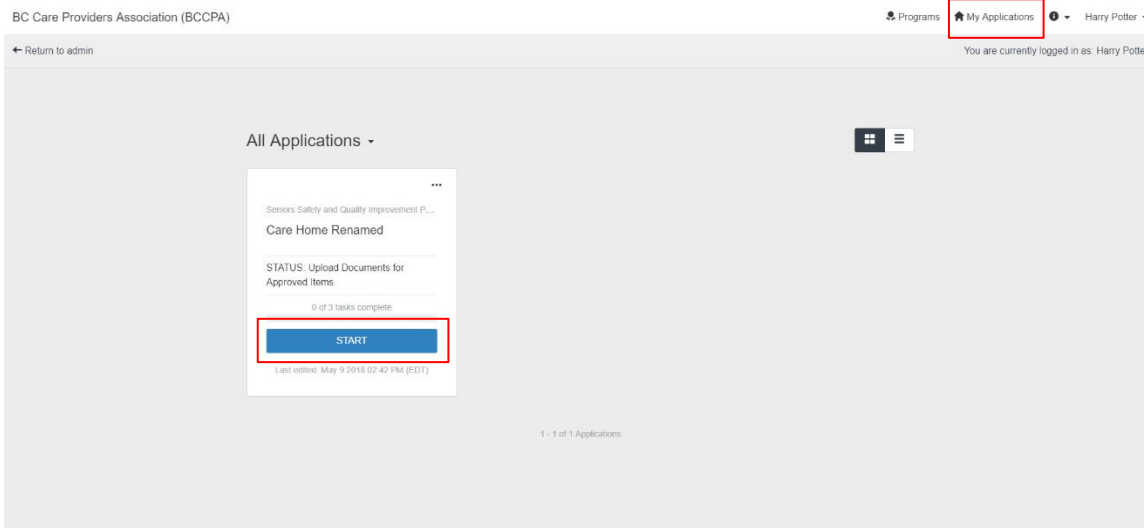


3. Click **“...”** to **Rename** or **Download** your application.



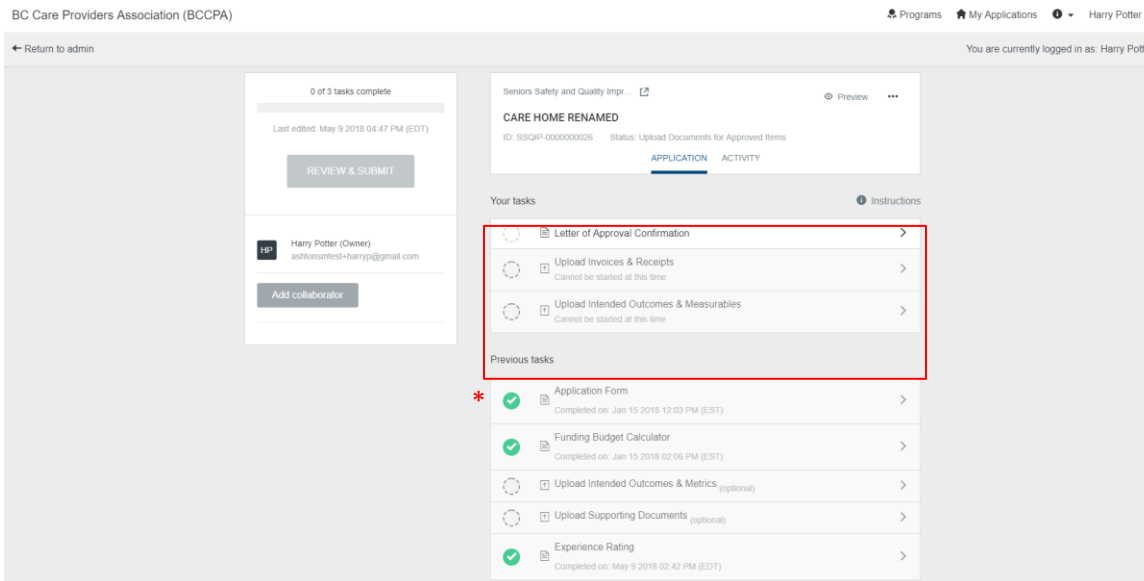
4. Enter the new **Care Home Name** to rename your application, then click **“Ok”**.

Approved Funding – Next Application Steps



1. Log back into [SurveyMoney Apply](#) 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.



* 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) | Programs | My Applications | Harry Potter

Return to admin | You are currently logged in as: Harry Potter

0 of 3 tasks complete

Last edited: May 9 2018 04:47 PM (EDT)

REVIEW & SUBMIT

Harry Potter (Owner)
asthorntest+harryp@gmail.com

Add collaborator

Seniors Safety and Quality Impr... | Preview

CARE HOME RENAMED
ID: SSQIP-0000000026 | Status: Upload Documents for Approved Items

APPLICATION | ACTIVITY

Your tasks

- Letter of Approval Confirmation
- Upload Invoices & Receipts
Cannot be started at this time
- Upload Intended Outcomes & Measurables
Cannot be started at this time

Previous tasks

- Application Form
Completed on: Jan 15 2018 12:03 PM (EST)
- Funding Budget Calculator
Completed on: Jan 15 2018 02:06 PM (EST)
- Upload Intended Outcomes & Metrics (optional)
- Upload Supporting Documents (optional)
- Experience Rating
Completed on: May 9 2018 02:42 PM (EDT)

1. To begin, click on the first task, “**Letter of Approval Confirmation**”

BC Care Providers Association (BCCPA) | Programs | My Applications | Harry Potter

Return to admin | You are currently logged in as: Harry Potter

Back to application

Seniors Safety and Quality Improvement
Care Home Renamed
ID: SSQIP-0000000026 | Status: Upload Documents for Approved Items

- Letter of Approval Confir...
- Upload Invoices & Receipts
Cannot be modified
- Upload Intended Outcom...
Cannot be modified

0 of 3 tasks complete

Last edited: May 9 2018 04:51 PM (EDT)

REVIEW & SUBMIT

Letter of Approval Confirmation

Task instructions Hide

Please Note:

- This task is a prerequisite to task #2 and #3.
- This task can be completed at any time within the allotted time frame as indicated on your letter of approval. The completion of this task verifies with BCCPA that you have received your letter of approval.
- After completing this task, task #2 and #3 can be completed in any order within the allotted time frame as indicated on your letter of approval.

Next Steps

BEFORE MAKING ANY PURCHASES, PLEASE REVIEW THE [SSQIP TERMS & CONDITIONS](#)

CONFIRM THAT YOU RECEIVED THE LETTER OF APPROVAL

- Yes - I received the letter of approval from BCCPA.
- No - I did not receive the letter of approval from BCCPA.

SAVE & CONTINUE EDITING | MARK AS COMPLETE

2. 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

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

← Return to admin You are currently logged in as: Harry Potter

← Back to application

Seniors Safety and Quality Improvem...
Care Home Renamed
ID: SSQIP-0000000026 | Status: Upload Documents for Approved Items

✔ Letter of Approval Confir...

📎 Upload Invoices & Receipts >

📎 Upload Intended Outcom...

1 of 3 tasks complete

Last edited: May 9 2018 05:22 PM (EDT)

REVIEW & SUBMIT

📎 Upload Invoices & Receipts

🔔 Task instructions [Hide](#)

Before completing and submitting this task, please upload your **invoices and receipts** once you have made **all of your purchases** for this application period.

If you require more time to implement the approved items and submit your invoices and receipts as proof of payment, please contact the Programs Coordinator.

As a friendly reminder, the approval of funding cannot be released publicly prior to obtaining written approval from BCCPA. For more information, refer to the [SSQIP terms and conditions](#)

When uploading invoices and receipts, please title all documents in the following format:

- Uploading an invoice:
 - "CareHomeName_ApplicationNumber_invoice_Item"
 - For example: BCCPA_001_invoice_Beds
- Uploading a receipt:
 - "CareHomeName_ApplicationNumber_Receipt_Item"
 - For example: BCCPA_001_Receipt_Beds

↑

ATTACH FILE

[Show accepted formats](#)

BCCPA_001_Receipts_Beds
Added: May 9 2018

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 | My Applications | Harry Potter

Return to admin | You are currently logged in as: Harry Potter

Seniors Safety and Quality Improvement
Care Home Renamed
ID: SSQIP-000000026 | Status: Upload Documents for Approved Items

- Letter of Approval Confir...
- Upload Invoices & Receipts**
- Upload Intended Outcom...

2 of 3 tasks complete
Last edited: May 9 2018 06:29 PM (EDT)
REVIEW & SUBMIT

Upload Intended Outcomes & Measurables

Task instructions Hide

Please download the [SSQIP Intended Outcomes & Measurables Form](#)

Once you have completed the form, please upload it here.

When uploading your intended outcomes and measurables, please rename the document in the following format:

- *CareHomeName_ApplicationNumber_IntendedOutcomes2018P1*
- For example: BCCPA_001_IntendedOutcomes2018P1

ATTACH FILE
pdf, doc, docx

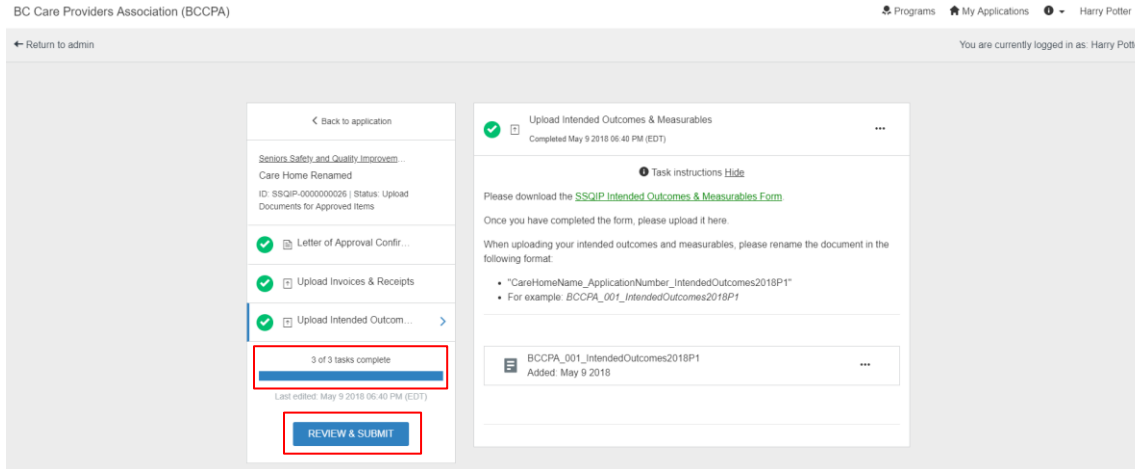
BCCPA_001_IntendedOutcomes2018P1
Added: May 9 2018

MARK AS COMPLETE

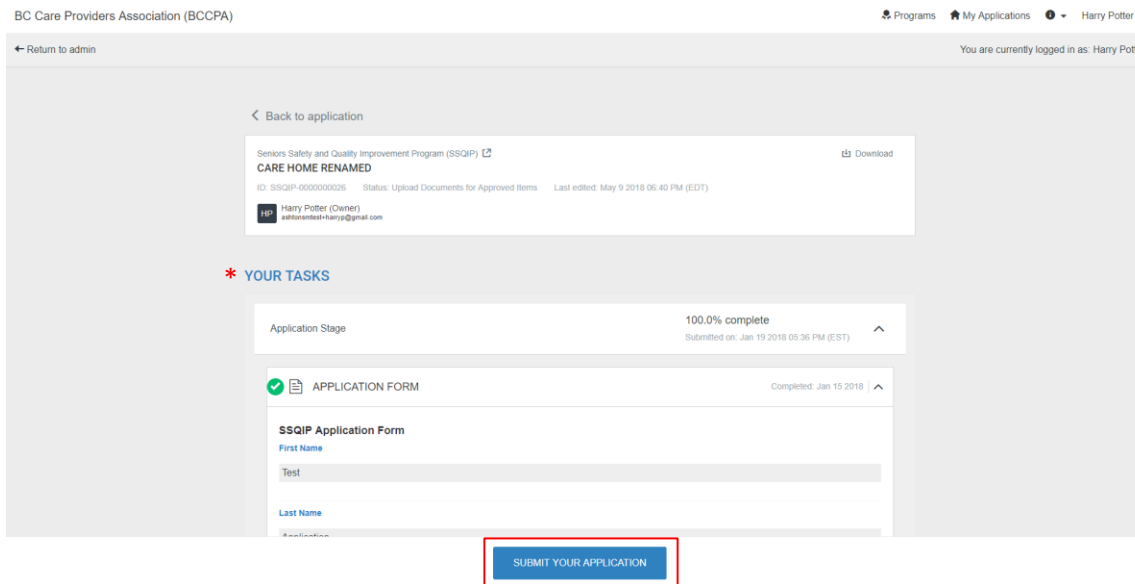
1. To begin task 3, click **“Upload Intended Outcomes & Measurables”**
2. Click the hyperlink on **“SSQIP Intended Outcomes & Measurables Form”** to download the Microsoft Word Document form
3. After completing the form, select **“Attach File”** to upload the document*
4. After uploading a file, click **“...”** 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



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



2. 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