

# Clayoquot Biosphere Trust 2008 Call for Projects

## Application for Funding

All applicants must complete this form (available on our website -- [www.clayoquotbiosphere.org](http://www.clayoquotbiosphere.org)). Please save the document under a new file name before completing. Once finished, please submit electronically to Curtis Cook, CBT Executive Director, via email at [curtis.cook@clayoquotbiosphere.org](mailto:curtis.cook@clayoquotbiosphere.org). In addition, please electronically attach any letters of support specific to your application. Additional information should not exceed 3 pages. Please contact CBT staff if you need assistance or have any questions. Applications must be received by our office by 4p.m. September 30, 2008. Applicants will then be invited to meet with a committee to present their application. Approval of funding will be announced by December 18, 2008.

### 1. Lead Organization

Organization Name: Pacific Rim Communities Seniors Care Society

Mailing Address: [REDACTED]

Contact person: WD Whitey Bernard - President

Job Title: Contact person: Dorothy W. Arnet - Secretary

Telephone: [REDACTED]

Fax: [REDACTED]

Email: [REDACTED]

Has this organization applied for CBT funding in the past? No

Has this organization received CBT funding in the past? No

### 2. Project Details

Project Title: Community Development - specifically extended care, intermediate care, assisted living for seniors.

Funds Requested: \$8,000

Total Project Budget: \$25,000

Start Date: immediate

End Date: 2009

Is this a new or an existing project? since 2006

When are the funds required? when available

3. Project Partners (please use additional pages if required): The CBT considers project partners to be organizations or individuals that are contributing to the project either financially or in-kind.

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact person: \_\_\_\_\_

Job Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Is this partnership confirmed? \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact person: \_\_\_\_\_

Job Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Is this partnership confirmed? \_\_\_\_\_



The Clayoquot Biosphere Trust supports research, education, and training initiatives for conservation, sustainable economic development and community health in the Clayoquot Sound UNESCO Biosphere Reserve Region.  
[www.clayoquotbiosphere.org](http://www.clayoquotbiosphere.org)



Clayoquot  
Sound  
Biosphere  
Reserve

4. Application for Funding Questions: Please briefly answer the following questions in point form or paragraph format. Please limit your responses to the space provided.

a. Introduction to your organization:

See attached description titled: PACIFIC RIM COMMUNITIES SENIORS CARE SOCIETY, TOFINO BC

b. Tell us about your project. Include a description, goals and a timeline for completion:

Correlate existing information acquired from survey, confirm land options for site with Tofino Hospital Foundation, liaise with Vancouver Island Health Authority (VIHA), Department of Transport (DOT re helicopter landing pad), private land owners, develop business plan.

To have a site confirmed - a green architectural design - facility that meets VIHA requirements and serves the west coast communities adequately. One year time frame.



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c. What will be the impact of your project at the individual, community and regional level?

Provide critically needed facility for West Coast Communities to prevent seniors being sent away from Tofino to various points on Vancouver Island and Mainland, addressing all levels of seniors medical care.

d. Describe the community involvement and collaboration with other agencies.

Working with Tofino Hospital Foundation, Coastal Health Care Committee, Vancouver Island Health Authority, District of Tofino, District of Ucluelet. John Fraser, Mayor of Tofino liaising with local First Nations.



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e. How do you plan to communicate the results of your project?

Press, internet, circulation of newsletter. See attached poster, letter and questionnaire. See preliminary master list and spread sheet attached.

f. How will your project help to achieve the CBT's *Mission*?

CBT's Community Health refers to the health of the environment of Clayoquot Sound. Our project is about achieving better health care of the senior citizens of Clayoquot Sound.

g. How will your project contribute to the CBT's Measuring Community Health Initiative?

*Please see our website for a description of this project and a list of indicators that we are interested in.*



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5. Project Budget

Please complete the following project budget including contributions from partner organizations and any other funding sources.

Item & Description	CBT Funds Requested	Confirmed Contributions	Unconfirmed Contributions	Total Cost
Salaries & Benefits				
NONE				
Facilities Rental				
NONE				
Materials & Supplies				
OFFICE SUPPLIES DONATED				
Other (please specify)				
DONATIONS		\$12,621.83		
GRANT FROM DISTRICT OF TOFINO		\$2,500.00		
Total		\$15,121.83		



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Clayoquot Sound Biosphere Reserve

**PACIFIC RIM COMMUNITIES SENIORS CARE SOCIETY**

**TOFINO BC**

*In May 2006, at the instigation by Harold Monks, some members of the Tofino General Hospital Foundation formed a group to discuss concerns regarding intermediate and long-term care for seniors on the West Coast. The mandate of the Tofino General Hospital Foundation is to raise money for the Hospital. As the Foundation cannot lobby government for health care needs the ad hoc group was formed. Our name at that time was Pacific Rim Intermediate and Long Term Care Initiative and we are now a nonprofit Society under our new name, Pacific Rim Communities Seniors Care Society.*

*The group of long time residents and others met on May 6<sup>th</sup> 2006 in the Hospital Board Room. The main concern of the group was the lack of a multilevel care facility on the West Coast encompassing Hesquiaht to the north and Barkley Sound to the south. This necessitates those needing this care, having to leave their families, friends and communities for care in Port Alberni or elsewhere. In 1993 the health authority had plans for a new hospital and multilevel care facility in Tofino; however the health authority changed its mind and the facility was never built.*

*Our group is focusing on finding out how a multilevel seniors care facility could be built here. The Tofino General Hospital Foundation owns a 2.5-acre cleared and serviced waterfront site next to the hospital that can only be used for health care requirements. We will explore potential use of this land and other sites and sources of funding – local, provincial, federal.*

*We have formed a nonprofit society to enable us to proceed with this project. We have had ongoing discussions with Vancouver Island Health Authority and with the Coastal Health Care Committee.*

**Committee Members:**

*Roland Arnet*

*Dorothy Arnet*

*Warren Bernard*

*Richard Close*

*John Fraser*

*Dr. Douglas Hanton*

*Roderick Macdonald*

*Arlene McGinnis*

*Peter Matley*

*Harold Monks – passed away July 28<sup>th</sup>, 2008*

*Vera Webb*

September 2008

PACIFIC RIM COMMUNITIES SENIORS CARE SOCIETY

C/o PO Box 884  
Tofino, BC V0R 2Z0

The PACIFIC RIM COMMUNITIES SENIORS CARE SOCIETY is a not for profit Society that was formed by a group of volunteers to encourage, support and assist in the creation of facilities for assisted living, intermediate and long term care for senior citizens of the communities of Tofino and Ucluelet and the Hesquiaht, Ahousaht, Tla-o-qui-aht, Ucluelet and Toquaht First Nations.

Your help in timely completing and returning the enclosed questionnaire is crucial in establishing the size and type of facility needed to be constructed to meet the majority of the needs of our senior citizens.

We acknowledge that many of you receiving this questionnaire will not have any immediate need for this facility, but probably most of us will sometime in our lives. Therefore we want the community to be aware of what we are trying to accomplish and to encourage their involvement as we work towards our goal of successful completion.

Thank you for your prompt attention to our request and feel free to call us if you have any questions.

Roland Arnet, Dorothy Arnet, Whitey Bernard, Dick Close, John Fraser, Dr. Douglas Hanton, Rod MacDonald, Arlene McGinnis, Peter Matley, Vera Webb

**PACIFIC RIM COMMUNITIES SENIORS CARE SOCIETY**

**INTERMEDIATE AND LONG TERM CARE QUESTIONNAIRE**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ Fax No. \_\_\_\_\_

\_\_\_\_\_ E-Mail \_\_\_\_\_

In terms of your current situation, what type of care do you or your family member need?

Long Term Care or Residential Care – also called Extended Care or Multilevel Extended care. Each level is determined by amount of care required and would provide 24-hour professional care and supervision for those with complex health needs. Personal care, meals, laundry and housekeeping would be provided \_\_\_\_.

Intermediate Care or Supportive Living – also called Assisted Living, includes support services such as meals, housekeeping and assistance with personal care \_\_\_\_.

If not in need of any of the above care at this time, when might you or a family member require it? \_\_\_\_  
Years.

What age range do you or your family member fall within?

55 or younger \_\_\_\_ Over 55 but less than 65 years \_\_\_\_ Over 65 but less than 75 years \_\_\_\_

Over 75 but less than 85 years \_\_\_\_ Over 85 years \_\_\_\_

Do you have any hobbies or recreational interests that you regularly pursue?

Reading \_\_\_\_ Knitting/sewing \_\_\_\_ Cooking \_\_\_\_ Cards/checkers/chess \_\_\_\_

Walking/hiking \_\_\_\_ Gardening \_\_\_\_ Golf \_\_\_\_ Boating \_\_\_\_

Fishing \_\_\_\_ Fitness training \_\_\_\_ Dancing \_\_\_\_ Watching TV \_\_\_\_

Computer/video games \_\_\_\_ Surfing the net \_\_\_\_ Playing a musical instrument \_\_\_\_

Listening to CDs and records \_\_\_\_ Other (specify) \_\_\_\_\_

Please tell us something about the kinds of amenities you would hope to have in a senior's complex.

Intermediate Care or Supportive Living - would you want a kitchenette with cupboards, sink and microwave?  
\_\_\_\_\_.

Would you consider not having a kitchen, if meals were served in a common dining room? \_\_\_\_\_.

Would you prefer in-room storage or common storage lockers situated in a central location?

In room location \_\_\_\_ centrally located \_\_\_\_ some of both \_\_\_\_.

Would you prefer a bathtub to a shower in your bathroom? Bathtub \_\_\_\_ shower \_\_\_\_ both \_\_\_\_.

Long Term Care or Residential Care - would you prefer in-room storage or common storage lockers situated in a central location? In room location \_\_\_\_ centrally located \_\_\_\_ some of both \_\_\_\_.

Would you prefer a bathtub to a shower in your bathroom? Bathtub \_\_\_\_ shower \_\_\_\_ both \_\_\_\_.

SUGGESTIONS OR IDEAS?