



Healthcare Workers' Compensation Fund Proposed Grant Program 2019-2020

Organization: _____

Project Description: _____

Reviewed by: _____ **Date:** _____

ALL THE FOLLOWING CRITERIA MUST BE MET FOR A PROPOSAL TO RECEIVE CONSIDERATION FOR FUNDING:

CRITERIA	YES	NO
Applicant is a current member of HWCF. All applicants must be current on their financial obligations to HWCF to be eligible.		
Grant application was received by close of business March 15, 2019.		
A specific workplace safety initiative targeted at reducing occurrences and/or improving employee safety is identified.		
The project has measurable results. The grant application includes information on how the applying organization plans to measure the results.		
The project is adaptable for use by other Fund members.		
Letter of support from CEO/Administrator and senior level leadership of applying organization is provided.		
Detailed budget is included.		
Applicant indicates willingness to share project information/outcomes with others.		
Project coordinator is identified.		
Applicant acknowledges and agrees to submission of periodic progress on: October 4, 2019; January 10, 2020; July 31, 2020.		



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Proposed Project Budget

EXPENSES

Expense Category	Description	To be paid from grant	In-kind or paid from other sources
<u>Personnel</u> Estimated salaries, wages and fringe benefits for staff time devoted to project		\$	\$
<u>Travel</u> Transportation, lodging and related expenses		\$	\$
<u>Consultants</u>		\$	\$
<u>Supplies & Advertising</u>		\$	\$
<u>Incentives</u>		\$	\$
<u>Capital Costs</u> (explain)		\$	\$
<u>Administrative General/Overhead</u>		\$	\$
<u>Other</u> (explain)		\$	\$
TOTAL EXPENSES		\$	\$

INCOME

Amount requested from HWCF	\$
Financial support from applying organization	\$
Value of expected in-kind support from other sources	\$
TOTAL INCOME available for proposed project	\$



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INDIVIDUAL SCORE SHEET

BASE	Not Apparent	Very Weak	Weak	Good	Very Good	Outstanding
SCALE	0	1	2	3	4	5

	Criteria Description	Comments	Base Score	Criteria Weighting	Total Score
	Problem/Needs Statement			30%	
1	The problem statement clearly identifies a workplace initiative targeted at reducing occurrences and/or improving employee safety.				
2	The initiative represents a significant method of reducing workplace injuries and accidents.				
3	The problem/needs statement is supported with baseline data/statistics or evidence to justify the need to address the problem.				
	Goal/Objectives			15%	
4	Goal of the project reflects the overall result of the project.				
5	Project objectives are realistic and appropriate for the project.				
6	Project objectives are measurable.				
	Project Development			25%	
7	Specific workplace hazard to be impacted by the project is addressed and appropriate.				
8	Activities & methods stated to achieve objectives are reasonable for accomplishing the goals.				
9	Needed resources, such as materials and personnel to carry out the project are described.				



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INDIVIDUAL SCORE SHEET (CONTINUED)

BASE	Not Apparent	Very Weak	Weak	Good	Very Good	Outstanding
SCALE	0	1	2	3	4	5

	Criteria Description	Comments	Base Score	Criteria Weighting	Total Score
	Project Development (Continued)			25%	
10	Desired project outcomes are described and represent an improvement in workplace safety, which will positively impact liability exposure.				
11	All collaborating departments are identified and their role is explained in the project.				
12	Project timeline is provided and represents feasible progress toward completion.				
13	Project is easily adaptable for use by others.				
14	An appropriate team is identified to accomplish the project.				
	Project Management			20%	
15	Method for evaluation of the project's effectiveness is described. Evidence of data related to project and specific long and short term goals to improve processes and outcomes is demonstrated.				
16	Standard to determine success is stated (Compliance rate/improvement in processes or outcomes).				
17	Leadership support is described to accomplish the project.				
	Budget			10%	
18	Budget contains realistic expected expenses.				
	TOTAL SCORE				

GENERAL COMMENTS: _____