



1 Centennial Square  
Victoria, BC V8W 1P6 E

# 2015 Strategic Plan Grant Application Form

## How to Apply:

1. Complete **Application Form** in its entirety and send to
2. Assemble **Eligibility Documentation**

Attach the following *required* documentation to ensure eligibility and completion of the 2015 Grant Application Form.

- X Society or Charity confirmation – Provide society number and Certificate of Good Standing or Charity Registration Number and CRA Canadian Registered Charities details page showing charity status as **registered**
- X Annual Report and Financial Statements – organization's current filed documents with the Registrar of Companies as required by the BC Society Act

## SECTION 1: CONTACT INFORMATION

Organization Name: James Bay New Horizons (JBNH) Victoria Centre - Silver Threads Service (STS)  
Mailing Address: 234 Menzies St, Victoria, B.C. V8V 2G7 2340 Richmond Road, Victoria, B.C. V8R 4R9  
Contact Person: Kim Dixon, executivejb.nh@shawbiz.ca Tracy Ryan, tracryan@silverthreads.ca  
Telephone: JBNH 250-386-4432 STS 250-388-4268 Website: \_\_\_\_\_

## SECTION 2: ORGANIZATION INFORMATION

Are you registered under the *Society Act*? ☒ Yes ☐ No Society Registration Number: JBNH S0011147 STS S005262  
Are you a registered Charity? ☒ Yes ☐ No Charity Registration Number: JBNH 118972728RR0001  
Organization mission/mandate STS 107981037RR0001

**JBNH:** The purpose of the Society is to provide opportunities for individuals to lead more meaningful, active, healthy and complete lives and to provide facilities that will assist in achieving and maintaining activities in the fields of recreation, nutrition, travel, social and community relations as determined by the Society.

**STS:** Silver Threads Service is a charitable, not-for-profit society that enhances social connections and well-being for seniors. We do this by providing programs and services that are accessible by all. Our vision is seniors in Greater Victoria are engaged and supported, enhancing their quality of life.

Brief history and role in benefitting residents of Greater Victoria

**JBNH:** Established in 1974, our Society has served seniors in James Bay and local area by providing activities and programs to meet the needs of recreation, social and healthy living. We also offer support programs enabling seniors to stay in their own homes knowing that there is "extended family" looking out for them. We have about 600 members and partner with several organizations offering them meeting space. We also offer seniors in the community support programs such as Senior Reassurance and Sunday Suppers.

**STS:** Established in 1956, our partnership with the City of Victoria began in 1962. Since we opened our doors, our services, programs and community partnerships have evolved to meet the changing needs of an ever-growing population of older seniors. Silver Threads Service (STS) currently operates two senior activity centres with support from the City of Victoria and the Municipality of Saanich. As well STS offers outreach programs in various locations across Greater Victoria. Our programs and services address the social, health, activity, intellectual, and information needs of seniors and provide essential connections.

How many paid staff at organization? Full Time: JBNH 3 STS 2.5 Part Time: JBNH 1

How many volunteer staff at organization? JBNH 75+ STS 30+ Total volunteer hours: JBNH: Equivalent to 11 FTE  
STS: Equivalent to 4.5 FTE

## SECTION 3: ORGANIZATION FINANCIAL INFORMATION

What is the organization's annual budget? JBNH \$275,000. STS (Victoria Centre-direct only) \$209,836



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What other sources of funding do you receive and how is it used?

Source	JBNH - Total Funding	JBNH - Use	STS - Total Funding	STS - Use
BC Gov't Gaming	\$20,000	ASEL, Senior Hub, Sr Reassurance	\$34,400	Connecting, Info & Referral, Arts, Experience Works
City of Victoria (Core Funding)	\$50,000	Staff Wages	\$50,000	Staff Wages
City of Victoria (Janitorial)	\$26,000	Janitor Wages	0	N/A
United Way	\$15,000	Sunday Supper	0	N/A
Federal Gov't	\$4,000	Summer Student	\$19,896	Online Technology Program

Has the organization filed for bankruptcy or currently seeking credit protection? ☐ Yes ☒ No

## SECTION 4: PROJECT OR PROGRAM INFORMATION

Project or program title: Community Outreach – Apartment Coffee Chats

Brief description of the project or program and why the grant is needed.

As two organizations trying to meet the needs of seniors, it is difficult to identify people that are living in isolation. If these people are not participating in community activities it is hard to identify if they are in need of support. These residents may not be aware of programs, services or agencies that could help them. As seniors age in place, there is a reluctance to ask for assistance until they are in crisis.

What we are proposing is to have an outreach worker first meet with apartment managers and offer to set up coffee parties in activity rooms or front entrances to talk about programs, activities or support services that are available. Our intent is to make these informal (coffee, tea and cookies), introduce ourselves, hand out some information and let people choose to contact us.

Hopefully this will encourage residents to come meet their neighbours, socialize and identify other residents that may not be able to come. We will then contact them on a one to one basis and offer information to programs that may be of interest to them

Does this project or program impact public space? ☐ Yes ☒ No

Please select the Strategic Plan Objective that the project or program aligns with or supports (for further explanation of objectives, please read the full text of the Strategic Plan found at [http://www.victoria.ca/strategic-plan](#)). Check off as many as is appropriate.

- |  |  |
|--|--|
| <input type="checkbox"/> Innovate and Lead   | <input type="checkbox"/> Enhance and Steward Public Spaces, Green Spaces and Food Systems  |
| <input type="checkbox"/> Engage and Empower the Community                              | <input type="checkbox"/> Complete a Multi-modal Active Transportation Network              |
| <input type="checkbox"/> Strive for Excellence in Land Use                             | <input type="checkbox"/> Nurture Our Arts, Culture and Learning Capital                    |
| <input type="checkbox"/> Build Financial Capacity of the Organization                  | <input type="checkbox"/> Steward Water Systems and Waste Streams Responsibility            |
| <input type="checkbox"/> Create Prosperity through Economic Development                | <input type="checkbox"/> Plan for Emergencies Including Climate Change Short and Long Term |
| <input type="checkbox"/> Make Victoria More Affordable                                 | <input type="checkbox"/> Demonstrate Regional Leadership                                   |
| <input checked="" type="checkbox"/> Facilitate Social Inclusion and Community Wellness |  |



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Explain in detail how this project or program will meet and support the City of Victoria's Strategic Plan Objectives.

This program will give residents living in apartments (and perhaps condos) the opportunity to meet their neighbours as well as learn about programs, activities and services available to them in their community. Some seniors have lived in their apartment buildings for several years and are able to get out and about freely. As they age and that ability declines, they stay on their own, sometimes this is by choice but usually it is because of circumstance including health (mental and physical), fear, denial or just a lack of caring and connections to resources. To our knowledge there is not an agency that literally goes door to door to see how seniors are doing. What we plan to do is just that and to identify and support these residents make valuable decisions to their lifestyle and whether they want to live at risk. We want to enable isolated seniors to make informed decisions and support them whatever the outcome might be. We hope to meet newcomers to Victoria and perhaps Canada and to include them in our community and feel good about their decision to live here.

How many will benefit from the project or program? 1000+ Residents Percentage of Greater Victoria Residents? 100 %

Who is your target audience? Seniors living alone that are socially isolated

## SECTION 5. PROJECT OR PROGRAM FINANCIAL INFORMATION

Please attach a detailed breakdown of all expenses for this application.

What is the project or program: Total Cost \$ 19,000 Amount Requested \$ \$10,000.

Administrative costs are capped at a maximum of 18% of total budget. Indicate the percentage of administrative costs: 15 %

How much is the organization contributing to this project or program? \$ 9,000 Cash and in kind

Please indicate the funding sources for this application:

- ☐ Government funding

Organization Name	Contact Person	Phone Number	Amount
BC Gov't Gaming	Already receive funding for our Senior Information Hub		JBNH \$1,500. STS \$1,500.

- ☐ Corporate sponsorships

Organization Name	Contact Person	Phone Number	Amount

- ☐ Matching funds

Organization Name	Contact Person	Phone Number	Amount

- ☐ In-Kind contributions

Organization Name	Contact Person	Phone Number	Amount
James Bay New Horizons	Kim Dixon	250-386-4432	\$3000.
Victoria Silver Threads	Tracy Ryan		\$3000.

- ☐ Waived fees and charges

Organization Name	Contact Person	Phone Number	Amount





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E [grants@victoria.ca](mailto:grants@victoria.ca)

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☐ Other

Organization Name	Contact Person	Phone Number	Amount

**Grand Total of Other Funding Sources** \$ 9,000.

Partial funding may be available. Will the project occur without full funding by the grant? ☒ Yes ☐ No

If you do not receive full funding, what is the impact to the organization and project or program. Please provide an explanation below.

If we do not receive full funding, we will still do our apartment coffee parties, however they will be held less frequent and without the full investment of a staff person planning and implementing the program. We will not be able to do the outreach that we think should be done in an effort to identify those people living in isolation either by choice or circumstances. Regardless of funding, we feel that this is a much needed program and we will attempt to get out in the community. We hope to sustain this program on an ongoing basis.

## SECTION 6. PROJECT OR PROGRAM TIMELINE

Project or program dates From: Sept 2015 To: December 2015

Project or program location: City of Victoria particularly James Bay and Jubilee neighbourhoods initially

Project or program timeline and major milestones.

Date	Milestone
August 2015	Hire Coordinator, research apartment managers contact info
Sept 2015	Send letter of interest to apartment managers and property managers
Sept 2015	Train volunteers on listening skills and how to interview
Sept 2015	Set up schedule of Apartment Coffee Chats
Oct - ongoing	Continue with coffee parties and follow up with frail, isolated seniors

## SECTION 7. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? Minimum 10 Total volunteer hours required: 500+

Can the project or program occur without volunteer support? ☐ Yes ☒ No

## SECTION 8. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How does your organization plan on publicly acknowledging the City's funding support?

☒ Website

☒ Social Media

☐ Sponsor Plaque

☒ Other - signage at the event

☒ Newsletter

☒ Annual Report

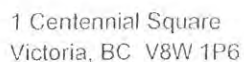
## SECTION 9. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct. I agree to the following terms:

The organization will be in compliance with all applicable municipal policies and bylaws

The organization will publicly acknowledge the grant awarded by the City

The organization is in good standing with either: (1) the Province of BC as a registered



# 2015 Strategic Plan Grant Application Form

The grant application meets all the eligibility requirements of the City's Grant Policy

Date: June 23<sup>rd</sup>, 2015

**James Bay New Horizons  
Victoria Silver Threads Service  
City of Victoria – Strategic Plan Grant  
Seniors Community Outreach Program**

**Budget**

<b>Revenue</b>	<b>Detail</b>	<b>Budget</b>
City of Victoria	Community Grant	\$10,000
James Bay New Horizons	In kind contribution	\$4,500
Victoria – Silver Threads Service	In kind contribution	\$4,500
<b>Total Program Costs</b>		<b>\$19,000</b>
<b>Expenses</b>	<b>Detail</b>	<b>Budget</b>
Part time Coordinator	20 hrs wk x \$20 x 20 wks	\$8,000
Benefits, employment costs	12%	\$960
Administration	15% (of overall program)	\$2,850
Coffee Supplies & snacks	4 months x \$250	\$1,000
Printing, photocopying	4 months x \$250	\$1,000
Phone, internet		\$300
Staff mileage, parking	4 months x \$100	\$400
Supervision & support	3% (of overall program)	\$570
Computer & IT	Laptop	\$700
Facility & Office space		\$2,720
Contingency		\$500
<b>Total Program Expenses</b>		<b>\$19,000</b>



Canada Revenue  
Agency

Agence du revenu  
du Canada

## REGISTERED CHARITY INFORMATION RETURN SUMMARY

000126

OTTAWA ON K1A 0L5

JAMES BAY NEW HORIZONS SOCIETY  
C/O TREASURER  
234 MENZIES  
VICTORIA BC V8V 2G7

Date issued

2015-06-11

Notice Number

01

BN/Registration Number

11897 2728 RR 0001

Thank you for filing the charity's Form T3010, *Registered Charity Information Return*, or changes to the Form, for the fiscal period ending 2014-12-31.

**Please check the information in this summary carefully.**

### Important message

You did not make any changes on Form TF725, Registered Charity Basic Information Sheet.

### Financial information

We have processed the charity's financial information as submitted. This information may be subject to further review. Should there be a discrepancy between declared and recalculated amounts, it is the charity's responsibility to verify the information submitted and, if applicable, submit a Form T1240, *Registered Charity Adjustment Request*.

Declared	Total assets	Recalculated
183,911		183,911

Declared	Total revenue	Recalculated
266,350		266,350

Declared	Total liabilities	Recalculated
71,909		71,909

Declared	Total expenditures	Recalculated
263,328		263,328

If you have any questions, or do not agree with the information in this notice, you can write us at:

Charities Directorate  
Canada Revenue Agency  
Ottawa ON K1A 0L5

You can fax us at 613-954-8037.

You can also telephone us at:

1-800-267-2384, or

1-800-665-0354 for TTY service for persons with a hearing or speech impairment.

Visit our Web pages at [www.cra.gc.ca/charities](http://www.cra.gc.ca/charities).

Director General, Charities Directorate





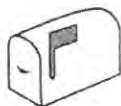
2015 Annual Report  
Incorporation Number: S-0011147

JAMES BAY NEW HORIZONS SOCIETY  
234 MENZIES STREET,  
VICTORIA BC V8V 2G7

**FILE ONLINE NOW**



To file your BC Society Annual Report immediately, go to:  
**[www.bcregistryservices.gov.bc.ca](http://www.bcregistryservices.gov.bc.ca)**  
and use **ACCESS CODE: 135069227**.



Complete this section if submitting by mail.  
Annual Reports submitted by mail may take up to eight weeks to be filed.  
**PLEASE PRINT CLEARLY.**

**1. Annual General Meeting Date**

Date your Annual General Meeting was held: 2015 10/2/27  
(YYYY/MM/DD)

# 2090  
FEB 12/15  
25

The date of the Annual General Meeting must be during the same calendar year of the Annual Report.  
If no Annual General Meeting was held, write "NO MEETING HELD" in the date field above.  
NO MEETING HELD cannot be submitted for the current year until the year is over

**2. Registered Office Address (Location of Records) - Additional \$15.00 for Address Updates**

**Physical Address Required.** (Post Office Box alone will not be accepted.)

234 MENZIES STREET,, VICTORIA BC V8V 2G7

**Mailing Address** (If different from physical address)

234 MENZIES STREET,, VICTORIA BC V8V 2G7

Enter new physical address if it has changed

Enter new mailing address if it has changed

**3. Society Email Address**

executivejb.nh@shawbiz.ca

Update email address if it has changed. Email address may be used as a contact for this form

OFFICE USE ONLY





#### 4. Society Directors

Before you file your Annual Report, please review the directors listed below. If this list does not match the society records, contact BC Registry Services now at 1 877 526-1526.

- Directors listed below cannot be changed if no meeting was held.
- One director must be a BC resident.
- Director addresses must be a physical address. Post Office Box alone is not accepted.
- Full names of directors are required, initials only are not accepted.
- Draw a line through name if director has ceased, and amend the list in the space provided.

Last Name	First Name	Residential Address (Must be a physical address)	Postal Code
Black	Alfred	206 - 406 SIMCOE ST, VICTORIA BC	V8V 1L1
Cavanaugh	Sylvia	209-566 SIMCOE STREET, VICTORIA BC	V8V 1L9
Edmonstone	Ellen	104 - 562 SIMCOE ST, VICTORIA BC	V8V 1L9
Floyd	Nancy	214 - 1030 PENDERGAST ST., VICTORIA BC	V8V 2X2
Gillespie	Maeva	101 - 25 GOVERNMENT ST, VICTORIA BC	V8V 2K4
Lawson	Joy	309 - 160 GOVERNMENT ST, VICTORIA BC	V8V 2K7
Logie	Anne	701-139 CLARENCE ST, VICTORIA BC	V8V 2J1
Robertson	Jan	3137 GLEN LAKE RD, VICTORIA BC	V9B 4B5
Ross	Ted	211 - 151 ST. ANDREWS ST, VICTORIA BC	V8V 2M9



Ruttan	Helen	304 1950 BEE STREET, VICTORIA BC	V8R 6P5
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5. Signature

*X Dyer*

Sign here. I certify that this information is accurate and complete.

*2015/03/01*

Date Signed (YYYY/MM/DD)

6. Return Form and Fee to BC Registry Services

Mailing Address:

PO Box 9431 Stn Prov Govt, Victoria BC, V8W 9V3

Physical Address:

2nd floor, 940 Blanshard Street, Victoria BC, V8W 3E6

Questions? Call 1 877 526-1526

Need help completing this form? Go to [www.bcregistryservices.gov.bc.ca](http://www.bcregistryservices.gov.bc.ca) for further instructions.

Please make cheque payable to Minister of Finance. Write your incorporation number S-0011147 on the cheque.

☒ Checklist if Submitting by Mail:

- ☒ \$25.00 Annual Report filing fee included.
- ☐ \$15.00 An additional fee is required if address updated within section 2, for a total fee of \$40.00.
- ☐ All data provided: Annual General Meeting date. Registered office address and director updates made if required.
- ☐ Form signed.