



Patient Comfort & Kindness Fund

What is the Patient Comfort & Kindness Fund?

Increasingly, our Foundation is receiving requests from departments within the Hospital for grants that help us to comfort and care for the patients we are honoured to serve. Based on this growing demand, St. Joseph's Healthcare Foundation created the Patient Comfort & Kindness Fund. The Fund will be used to support specific projects within St. Joseph's Healthcare Hamilton that have a direct impact on the comfort and care of patients and which are not currently covered by the Hospital's operating budget.

When receiving requests to the Patient Comfort & Kindness Fund, the Foundation will consider:

- Requests should have a direct impact on the comfort and care of patients at St. Joseph's Healthcare Hamilton and should be for projects that are not funded through operating budgets.
- Funds could be granted from a fund closely aligned or designated to the clinical area submitting the request, or where no patient comfort fund exists, funds from the Foundation's general patient comfort fund may be used.
- In general, requests for patient comfort fund grants should not exceed \$5,000.
- Specific departmental patient comfort funds may be set up with a minimum balance of \$10,000.
- St. Joseph's Healthcare Foundation will grant a maximum of \$25,000 per year to support patient comfort fund requests. (Approximately 5 grants of up to \$5,000, or more grants of a smaller denomination depending upon volume of requests received and funds available.)

Application & Granting Process:

- To request a grant from the Patient Comfort & Kindness Fund, departments are encouraged to complete the attached application form and have it approved by their clinical director and vice-president.
- Forms may be submitted to info@stjoesfoundation.ca or via mail to the Foundation for the 2021 granting period between June 1 – July 16, 2021.
- The application window will be open once annually, in the spring/summer.
- The application window will be one month in duration.
- Successful applicants will be notified and funds will be disbursed in the fall of the same year.
- Requests to the Patient Comfort & Kindness Fund will be reviewed and selected by the Foundation's Executive Team and/or Board of Directors in consultation with Hospital Leadership.
- The Foundation reserves the right to request more information about a grant application prior to making a decision.



Patient Comfort & Kindness Fund
Grant Application Form – June 1 – July 16, 2021

Date of Application: _____

Applicant Name: _____

Title of Applicant: _____

Department: _____

Campus: _____

Phone #/Ext: _____

Email Address: _____

Amount Requested \$: _____

Budget Breakdown \$ (Personnel/Supplies/Equipment/Other i.e. Services/Rental): _____

Project Description/Funding Request: (150 words max.)

Describe the Impact of this Grant on the Lives of the Patients/Clients you Serve: (100 words max.)

Application Period: **Circle One** June 1 – July 16, 2021 / Urgent Request

Clinical Director Name: _____

Vice-President Name: _____

Clinical Director Signature: _____

Vice President Signature: _____

Clinical Director Email: _____

Vice President Email: _____

Applicant Signature: _____

Please have this application form signed by your Clinical Director and Vice-President prior to submitting to St. Joseph's Healthcare Foundation via scan and email: info@stjoesfoundation.ca or mail to St. Joseph's Healthcare Foundation c/o Patient Comfort & Kindness Fund, 224 James Street South, Hamilton ON L8P 3A9.