

56 Queen Street Port Hope, ON L1A 3Z9

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## 2025 Donation Request Form

Please complete the below 2025 donation request form. Any questions that have a red \*asterisk are considered mandatory fields. Completed hard copy applications can be mailed, hand delivered or placed in our drop-box at Town Hall, 56 Queen Street, Port Hope, L1A 3Z9.

### Organization Information

**Organization Name: \***

Community Health Centres of Northumberland

**Address (Including Postal Code): \***

100-99 Toronto Rd, Port Hope, L1A 3S4

### Contact Information

**First and Last Name of Contact Person: \***

Becky Lyon

**Title of Contact Person: \***

Program Developer

**Phone Number: \***

905-885-2626

**Alt. Phone:**

999-999-9999

**Email: \***

[blyon@chcnorthumberland.ca](mailto:blyon@chcnorthumberland.ca)

# Donation Request Information

## 1. Total Request (Up to \$2,500) : \*

\$2500

## Date of Your Organization's Event: \*

2/3/2025



## 2. Please provide your reasoning for the requested donation and description of how the funds will be utilized: \*

Preventative Health Awareness Month encourages individuals of all ages to take charge of one's health and wellbeing. This can include making healthy lifestyle choices, getting enough sleep and/or identifying risk factors for disease.

The Community Health Centres of Northumberland (CHCN) Community Program staff understand that reaching personal health goals can be complicated, at times arduous, if not impossible to achieve.

In recognition of Preventative Health Awareness Month, CHCN wishes to broaden our health promotion program reach for equity deserving populations within Northumberland County. We are seeking to mitigate common barriers that CHCN clients have identified to be impacting their program participation which has included transportation issues, a lack of access to program equipment, and medical barriers. As such we are in the process of developing a CHCN Client Support Fund which is planned to be launched in February 2025, in celebration of Preventative Health Awareness Month.

The support fund is planned to contain three areas of financial assistance to expand programming access and support:

1. Financial assistance to support accessing internal and external community-based health promotion programs linked to our Social Prescribing program pathways.
2. Financial support to access medical equipment to support CHCN program participation.
3. Financial access in supporting basic needs upon request.

Eligible applicants include CHCN clients of the community health centre. Individuals will be given priority should they identify from our listed priority indicators that include but are not limited to: CHCN clients without a family physician, identified CHCN clients struggling with mental health and/or addictions, CHCN clients impacted by precarious housing and/or food insecurity as well as CHCN clients identifying as youth at risk or the elderly living with complex chronic conditions.

Upon completion of the CHCN intake form reviewed by the Health Equity Committee for eligibility, CHCN clients can submit a request for financial assistance of up to \$300.

## Other Financial Information

**3. Please indicate financial support you are expecting to receive from other organizations in 2025: \***

The CHCN financial metrics for 2025 indicate that planned expenses for the upcoming year will be equal to the planned revenue for the upcoming year. The funders of the CHCN (Ontario Health East) do not provide funding to assist with client needs such as those listed above.

Diversification of our revenue is an ongoing objective. We will continue to seek opportunities through grants and donations to access funds to support community needs, beginning with our health promotion campaign planned for February 2025, in celebration of Preventative Health Awareness month.

**4. If Council approves your Donation Request, please indicate how the Municipality of Port Hope would be given recognition for this donation: \***

The CHCN Community Program staff utilize various social media platforms to acknowledge the generous support of our donors. CHCN utilizes Facebook, Instagram and our website to profile organizational and community partner support.

Sample:

The Community of Health Centres of Northumberland values meaningful collaboration with our clients, partners and communities. We would like to thank the Municipality of Port Hope for providing funding for the Client Support Fund as part of supporting Preventative Health Awareness Month.

**5. Any additional information you find necessary:**

With a median age of 52.4 years for the region, Northumberland County's aging population has also witnessed a 77% increase in new Canadians moving to Northumberland, with 10.8% of families falling under the low-income bracket, according to the 2023 Vital Signs Report. Though CHCN is allotted core funding for its primary care services, community-based program funds are restricted. A client support fund will greatly benefit our equity deserving community members and further our commitment to equity, diversity and inclusion of all CHCN program participants.

**Should Council approve your Donation Request please indicate the following:**

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**Special instructions (optional):**

N/A

**First and Last Name of authorized individual: \***

Taryn Rennicks

**Please provide the date you are signing this document: \***

9/25/2024



**Please provide the signature of the authorized individual: \***

A handwritten signature in black ink, appearing to be 'Taryn Rennicks'.

Personal information is collected on this form under the authority of the Municipal Act and the Municipal Freedom of Information and Protection Act (MFIPPA). This information, once collected, may be accessible by members of the public upon request, unless exempted by law. Furthermore, this information may be published as part of the public record, in accordance with the legal requirements set out in MFIPPA and other legislation. Questions regarding the collection, use and disclosure of personal information can be directed to the Municipal Clerk at [905-885-4544](tel:905-885-4544) or [clerk@porthope.ca](mailto:clerk@porthope.ca).