DISCLAIMER: This is a SAMPLE grant created to assist grant applicants in the SHIP Grant writing process. This sample was based on a funded SHIP Grant.

SAMPLE

Safety and Health Initiatives Program

Grants Guidelines and Application

Effective

April 1, 2016 – December 31, 2019

Michael N. Volforte, Director
Governor’s Office of Employee Relations

Wayne Spence, President
Public Employees Federation, AFL-CIO
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### Safety and Health Initiatives Program

**Table of Contents**

#### Program Guidelines

- **A.** Purpose
- **B.** Funding Plan and Program Highlights
- **C.** Eligibility Criteria
- **D.** Submission
- **E.** Grants
- **F.** Reimbursement
- **G.** How to Apply
- **H.** Budget
- **I.** Additional Information and Assistance

#### Program Application

- **A.** Application Cover Sheet
- **B.** Project Narrative
- **C.** Project Budget
- **D.** Project Overview
Safety and Health Initiatives Program

Program Guidelines

A. Purpose

The Safety and Health Initiatives Program (SHIP) provides grant funding for safety and health training programs. Joint Labor and Management grant proposals are a vehicle by which labor and management work together to address safety and health training needs of PEF represented employees. Grant proposals must have the support of both labor and management, and address education or training needs related to:

- changes in agency or organization mission or goals
- changes in work processes
- technological change
- prevention of work-related injury and illness
- reduction of workers' compensation and related costs
- compliance with standards, code rules and regulations

B. Funding Plan and Program Highlights

The SHIP Grant program is funded by Article 18.4 of the 2016-2019 negotiated Agreement between the State of New York and the Public Employees Federation (PEF), AFL-CIO and administered by the joint State of New York and PEF Article 18, Health and Safety Committee.

All labor and management applicants will be notified if the project is approved. The agency will be notified on how to proceed.

<table>
<thead>
<tr>
<th>SHIP Program Highlights</th>
</tr>
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<tbody>
<tr>
<td>Proposals must have joint support of labor and management representatives, throughout the planning, implementation and evaluation process. Management representatives must include a representative that acknowledges NYS procurement policies/guidelines will be adhered to, as well as accepts that specific documentation requirements will be necessary for reimbursement.</td>
</tr>
<tr>
<td>SHIP proposals are evaluated on a continuous first come, first served basis.</td>
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<tr>
<td>The Joint State of New York and PEF, Article 18 Health and Safety Committee reviews and makes final decisions on all SHIP grant applications.</td>
</tr>
<tr>
<td>The program expires on December 31, 2019. <strong>All SHIP projects must be completed by December 31, 2019.</strong></td>
</tr>
<tr>
<td>Reimbursement request invoices and support documentation must be submitted no later than <strong>December 31, 2019.</strong></td>
</tr>
</tbody>
</table>
C. Eligibility Criteria

Each application that is submitted will be evaluated in accordance with the following eligibility criteria:

1. The proposal addresses identified health and safety education and/or training needs of PEF-represented employees related to:
   - changes in work processes
   - technological change
   - prevention of work-related injury and illness
   - reduction of workers’ compensation and related costs
   - changes in legal and/or regulatory requirements
   - changes in agency or organization mission and/or goals
   - other specific challenges to health and safety
   - initial compliance with standards, code rules and regulations

2. The proposal shows that labor and management representatives have collaborated on and support the proposal.

3. Program proposals cannot be used to duplicate other labor-management funded programs, or to supplement or replace an agency’s budget for routine or required training programs.

4. Where applicable, the agency contributes to the project. This could include in-kind contributions of personnel and agency resources, as well as release time for participants.

5. The project evaluation plan goes beyond participant satisfaction surveys to include measurements such as pre-tests, post-tests and post-learning surveys of participants, supervisors, or agencies.

6. We encourage projects that:
   - have the potential to be replicated in other agencies
   - involve more than one agency
   - are delivered to agency employees statewide
   - can be sustained beyond the initial project
   - teach skills to prepare for both current and future workforce needs
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Examples of Prior SHIP Grant Projects

- Infection Control Certification Training
- Workplace Violence Prevention Program – Beyond Regulatory Mandate
- Back Injury/Ergonomics Program and Training
- Safe Patient Handling
- Bloodborne Pathogens and TB Training – Beyond Regulatory
- Slips, Trips and Falls Training
- Hazard Assessment
- Health and Safety Program Development
- Health and Safety Committee Training
- Right-to-Know Training – Beyond Regulatory
- Emergency Preparedness/Response

D. Submission

There is a limit of one project per application. However, applicants may submit applications for more than one project.

E. Grants

Small grants are a maximum of $5,000 and large grants are a maximum of $15,000. Applications will be reviewed by the Joint State of New York and PEF Article 18, Health and Safety Committee. The Committee may ask for clarification or for more information.

The determination will be one of the following:

- Approval: The proposed project can move forward in accordance with section H.
- Conditional Approval: Approval will be granted if additional information is provided and/or specific modifications to the project are made.
- Disapproval: A proposal is disapproved for specific written reasons. This does not preclude the applicant from revising the proposal and resubmitting at a later date.

F. Reimbursement

Training must be completed no later than December 31, 2019. Within 60 days of the completion of the approved training, the reimbursement process requires the following documentation:

1. Provided journal entry coded by your fiscal office;
2. Grant approval letter;
3. Course outline/agenda;
4. Sign-in sheet(s);
5. Agency proof of payment including:
   - Vendor invoice(s), including receipts;
   - Documentation voucher was paid, e.g., P-card statement or screenshot of paid Voucher in SFS.
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**G. How to Apply**

The SHIP guidelines and application are available on the PEF website at: [http://www.pef.org/member-resources/health-and-safety/available-grants](http://www.pef.org/member-resources/health-and-safety/available-grants) or by contacting the PEF Occupational Health & Safety Department at: healthandsafety@pef.org or by calling 800-342-4306 X 254.

1. Complete all four parts of the SHIP Application:
   - **Part A:** Cover Sheet
   - **Part B:** Project Narrative
   - **Part C:** Project Budget
   - **Part D:** Project Overview

2. Obtain the required signatures of management and labor representatives.

3. Send the completed application to:
   - **Email:** healthandsafety@pef.org
   - **Mail:** NYS Public Employees Federation, AFL-CIO Occupational Health & Safety Department 1168-70 Troy-Schenectady Road P. O. Box 12414 Albany, NY 12212-2414
   - **Fax:** (518) 250-7839

**H. Budget**

The detailed budget shall list each and every funded activity and cost. For example, list the number of training hours, cost per hour, and cost for training materials, as well as total cost. When an outside provider is used for delivering services, a signed and detailed proposal from the provider must be attached to the application. Relevant state procurement procedures must be followed.

**I. Additional Information and Assistance**

The Governor’s Office of Employees Relations and the Public Employees Federation, AFL-CIO program staff are available to discuss your proposal with you prior to submitting an application. Please contact one of us to ensure that your proposal is appropriate and fundable under the program guidelines.

Edward Cottrell, GOER...............................(518) 473-8375 or Edward.Cottrell@goer.ny.gov
Mike Blue, PEF..............................................................(518) 785-1900 or Mblue@pef.org
Darlene Williams, PEF ..........................................................Dwilliams@pef.org
PEF Health and Safety Department............... (800) 342-4306 x254 or healthandsafety@pef.org

Safety and Health Initiatives Program iv January 2018
SHIP Grant Application

Conflict Resolution/ Creating a Respectful Workplace

Program Title

Any Agency

Agency

Please send completed application to:

Email: healthandsafety@pef.org

Mail: NYS Public Employees Federation, AFL-CIO

Occupational Health & Safety Department

1168-70 Troy-Schenectady Road

P. O. Box 12414

Albany, NY 12212-2414

Fax: (518) 250-7839Attn: PEF H&S
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**SAMPLE**

Safety and Health Initiatives Program Application

Applications will be reviewed on a continual basis.

SHIP Program Guidelines and Application are available at:

http://www.pef.org/member-resources/health-and-safety/available-grants/

**Multiple Proposals:** Although funding for more than one project may be requested, describe only one project per application.

**Date of Submission:** __1/20/18______________________

**Part A. Application Cover Sheet**

1. Agency name: **Any Agency**

2. Facility (if applicable): **Any Facility**

3. Project title: **Conflict Resolution/ Creating a Respectful Workplace**

4. Brief project description: **Offer a Preventing Violence in the Workplace/ Creating a Respectful Workplace Training that will be delivered to employees between November 15th 2018 and December 10th 2018.**

____________________________________________________

____________________________________________________

____________________________________________________

____________________________________________________

____________________________________________________
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Part A. Application Cover Sheet (continued)

5. Total number of PS&T, CSEA, M/C, or other unions participating: 60 people at three locations

6. Titles of targeted employees: Supervisor, Nurse, Engineer, Inspector, Clerk, Secretary, Specialist, Division Manager, Receptionist, Security, Project Coordinator

7. Project Coordinator: Provide the name of the site contact or lead person who will be responsible for fulfilling all project requirements (project implementation and evaluation).

Name: John Doe
Title: Project Coordinator
Work Location: Any Agency H.Q.
Address: 12 Main Street
          Albany, NY
Phone: (555) 555-5555
Fax: (555) 555-5555
Email: John.Doe@any_e-mail
8. **Labor-Management Contact Information:** By submitting this application, the agency management and PEF representatives named below certify that all information contained in this application is accurate and complete, and that development of this grant proposal has been a joint collaboration. In addition, agency management and PEF representatives understand that NYS procurement protocols and procedures must be followed with all grant money usage. Furthermore, reimbursement will only be provided when ALL of the requirements as specified in the award letter are fulfilled.

**Management Representative**

Name: Carla Rodriguez  
Title: Supervisor  
Address: Any Agency- Regional Office  
4 Sunshine Court  
Rochester, NY  
Phone: (555) 555-5555  
Email: Carla.Rodriguez@any_e-mail  
Signature: Carla Rodriguez  
Date: 1/15/18

**Management Fiscal Representative**

Name: Julia Mason  
Title: Financial Director  
Address: Any Agency- Regional Office  
4 Sunshine Court  
Rochester, NY  
Phone: (555) 555-5555  
Email: Julia.Mason@any_e-mail  
Signature: Julia Mason  
Date: 1/15/18

**PEF Representative**

Name: George Smith  
PEF Local No.: Region 1 Division 1  
Address: Any Agency- Regional Office  
15 Maple Lane  
Queens, NY  
Phone: (555) 555-5555  
Email: George.Smith@any_e-mail  
Signature: G. Smith  
Date: 1/17/18
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**SAMPLE**

Safety and Health Initiatives Programs Application

**Part B: Project Narrative**

Attach a typed narrative that answers the following questions. Be specific and number your answers to correspond with question numbers below.

1. **Describe the health and safety need addressed by your proposal and how you identified this need. If there was a change that precipitated this need, describe that change.**

   Creating a respectful workplace. *The Respectful Workplace* is a training series designed to help organizations address behavioral and value issues that can allow co-worker conflicts to escalate. The series treats co-worker conflict as an outgrowth of hostility, harassment, bullying and intimidation which has not been effectively dealt with, and arms employees and managers with the tools they will need to ensure respectful workplace relations.

2. **Describe the proposed delivery methods for the project (online course, workshop, train-the-trainer, teleconference, curriculum development) and basis for selecting the delivery methods.**

   The course will be delivered as a Train-the-trainer Program to a total of 60 people in 3 locations. It is intended that these trainers will go on to train an additional 2,000 employees. We chose this method based on the demographics of the agency to maximize the reach of the program in various statewide locations.

3. **If the program includes a training component, please provide a Course Outline. You may attach additional sheets as necessary.**

   *Program Contents:* 4 - 1 hour modules

   **Module 1:** *Opening the Right Doors*, teaches employees skills for dispute resolution and diffusing hostility. We learn to take responsibility for eliminating intimidation, bullying and harassment from our workplace culture.

   **Module 2:** *Managing Harmony*, defines the role leaders must play in creating and supporting a non-violent, respectful workplace. We explore the organizational costs of inappropriate behavior, diffusing hostile situations, aligning policy and behavior with the organization’s values, how conflict can be a positive force, and the organization’s responsibility to provide effective avenues for dispute resolution.

   **Module 3:** *Working with Labor/ Management Committees* to effect change in the workplace. We will discuss possible action plans to create a working dialog to decrease co-worker conflict.
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**Module 4:** Training back at your worksite will assist trainers in developing a plan and training style that will best fit their facility. In addition, we will discuss a strategy plan for the arrangement of their upcoming trainings.

**Scenarios:**
Each program in the Respectful Workplace series includes several dramatizations designed to help focus and stimulate discussion. There are 10 of these scenes.

4. Describe how this project will benefit employees and your agency.

While the media has focused on the spectacular but very rare instances of lethal workplace violence, the reality in most workplaces is very different. We deal with occurrences of hostility, intimidation, harassment and other damaging behavior. The perpetrators are often clients and consumers but sometimes can be fellow employees and managers; this is known as co-worker or type III violence. Unlike the rare, extreme cases, the more common manifestations of workplace violence take a daily toll on most workplaces. Left unchecked, co-worker conflict can lead to workplace violence. The Respectful Workplace series is a resource designed to help organizations address co-worker conflict and prevent workplace violence.

5. Describe the actions and steps your agency will take to reinforce this project in the workplace.

Staff face many challenges in the workplace. This program addresses the causes of co-worker conflict and will ensure that staff have access to a conflict resolution program. All staff will have the opportunity to participate in the training.

6. Describe how you will communicate to eligible employees the availability of the project or training.

We will use a train the trainer program model. An announcement will be sent to all employees for instructors and resource people via e-mail and internet postings on the train-the-trainer program. Staff who are interested in developing their skills, and train in the conflict resolution curriculum will be recruited.

7. Describe how you will recruit and select participants.

Each worksite will provided10 representatives to the train-the-trainer program. Those representatives will bring back the information to their worksites and share with team members via a team training. Trainers can be requested to present the program to specific work areas upon request/need.

8. Describe how the project will be evaluated. You are required to go beyond a participant satisfaction survey to include measurements such as pre-tests, post-tests and post-learning surveys of participants, supervisors, or agencies.

Joint agency health and safety committees will monitor the success of the program by having all participants complete an evaluation after training. An evaluation summary will be reviewed by the health and safety committee members. By raising awareness of respect in the workplace, we hope to see a decrease in disrespectful behaviors. Calls to EAP, Unions, and Affirmative action regarding
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Occurrences of hostility, intimidation, harassment, and other damaging behaviors will hopefully decrease. EAP and Affirmative Action Representatives will be surveyed quarterly to report aggregate health and safety contacts received on co-worker conflict issues. Since the agency will own the series, we can use it on a regular, on need basis, or upon request. We will also determine the need for trainings based on data from our injury and incident reports, the occurrence of an incident, and employee request.

9. **Describe the agency’s contribution to this project, including space, material duplication, subject matter expertise, travel and release time, etc.**

The agency will ensure that staff are made available to attend the training. The agency will provide all audiovisual equipment and conference space for the trainings. Management will support staff who volunteer to be trainers by ensuring that they are made available to participate and provide subsequent trainings.

10. **Describe any additional information you would like to be considered in reviewing this application.**

Please see attached training outline and cost estimate from trainer.

11. **Describe costs associated with a small ($5,000 or less) or a large ($15,000 or less) grant.**

We are applying for a large grant of $8,234.45.
Part C: Project Budget

Please list all costs within the four budget categories. Attach additional sheets if necessary.

1. **Personnel**: Includes fees for consultants, and workshop presenters, along with any consultant travel, lodging, and meals (NYS does not cover lunches). Include per day fee, where it applies.
   **Example**: Workshop Presenter Fee: $800 per day x 2 days = $1,600.
   - Consultant Fees: $125/hour x 5 hours = $625.00
   - Workshop Presenter Fees: $125/hour x three ⅓ days = $1,500.00
   - Consultant Travel: 870 miles total x $0.535 per mile = $465.45
   - Consultant Lodging: $150 per night x 2 nights = $300.00
   - Consultant Meals: $229.00
   - Other (Specify): Misc (parking/tolls): $75.00
   **b. Subtotal (personnel)**: $3,194.45

2. **Materials and Supplies**: Includes workshop materials and handouts, printing, film or video rental, and postage for publicity mailings. Specify quantities where appropriate.
   **Example**: Printing: 0.10 per page x 100 pages = $10.
   - Workshop Materials: $6.00 x 60 = $360
   - Printing: (250 pages x 60 binders) x $0.10 per page = $1,500
   - Film or Video Rental: $0
   - Postage: $0
   - Other (Specify): Conflict Resolution Resource Book: $25 per book x 60 books = $1,500
     Flash Drives with Resource Content: $8 per flash drive x 60 flash drives = $480
     CD of Resource Videos and Content: $20 per CD x 60 CDs = $1,200
   **c. Subtotal (materials/supplies)**: $5,040.00
Part C: Project Budget (continued)

3. Facilities: Includes audio visual equipment and room rentals (rate per day). State space should be used if available. 
   **Example:** Room Rental: $600 per day x 3 days = $1800.

   Equipment Rental: $0
   Room Rental (include rate per day): $0
   Other (Specify): $0
   ____________________________ $ ____________

   **d. Subtotal (Facilities) $  0 ____________**

4. Specify items that do not fit into the above categories.

   Item 1: ______________________________  $ ____________
   Item 2: ______________________________  $ ____________
   Item 3: ______________________________  $ ____________
   Item 4: ______________________________  $ ____________

   **e. Subtotal (Other) $ ______________**

**Total Funding Requested From All Categories:**

   **a. Subtotal (personnel) $ 3,194.45**
   **b. Subtotal (materials/supplies) $ 5,040.00**
   **c. Subtotal (Facilities) $ 0**
   **d. Subtotal (Other) $ 0**

**TOTAL FUNDING REQUESTED (add amount requested in all categories): $ 8,234.45**

**COST PER PARTICIPANT (total cost/ number of participants) $ 137.25**
Part D: Project Overview

1. If there is a vendor that you would like to be considered, provide the name, qualifications, resume or curricula vitae, and contact information for that vendor.

John Albertson, Professional Conflict Resolution Advisor
Any Advisor Company Inc. 4269 West Broadway Street, Albany, NY
John.Abertson@any_e-mail (555)555-5555

2. List the addresses where the project will be delivered, including city and facility.

   Any Agency H.Q.- 12 Main Street, Albany, NY

   Any Agency- Regional Office- 4 Sunshine Court, Rochester, NY

   Any Agency- Regional Office- 15 Maple Lane, Queens, NY

3. What is the preferred delivery method? (check one)

   Online course □     Workshop □     Train-the-trainer ☑     Other (specify) □

4. What is the proposed duration for this project? (halfday; full-dayetc.)
   Half day (approximately 4 hours)

5. Additional comments:
   None
SAMPLE

Safety and Health Initiatives Program Application

Sample Training Outline:

1. **Module 1: Opening the Right Doors**, teaches employees skills for dispute resolution and diffusing hostility. We learn to take responsibility for eliminating intimidation, bullying and harassment from our workplace culture.
   a. Opening the Right Doors PowerPoint
   b. Resolving Conflict: Case Scenario Activity

2. **Module 2: Managing Harmony**, defines the role leaders must play in creating and supporting a non-violent, respectful workplace. We explore the organizational costs of inappropriate behavior, diffusing hostile situations, aligning policy and behavior with the organization’s values, how conflict can be a positive force, and the organization’s responsibility to provide effective avenues for dispute resolution.
   a. Managing Harmony PowerPoint
   b. Skit activity: Conflicts within the Workplace and Resolution

3. **Module 3: Working with Labor/Management Committees** to effect change in the workplace. We will discuss possible action plans to create a working dialog to decrease co-worker conflict.
   a. Working with Labor/Management Committees PowerPoint
   b. Creating an Agenda items on Conflict Resolution
   c. Action Plan Discussion

4. **Module 4: Training back at your worksite** will assist trainers in developing a plan and training style that will best fit their facility. In addition, we will discuss a strategy plan for the arrangement of their upcoming trainings.
   a. Training back at your worksite PowerPoint
   b. Personalized Plan Development for your Worksite
SHIP Consultant Cost Estimate Sample:
USE COMPANY LETTERHEAD PROPOSAL

To: John Doe (Project Coordinator)
From: John Albertson (Consultant name)
       Professional Conflict Resolution Advisor/ Any Advisor Company Inc. (Title/Company)

Project title: Conflict Resolution/ Creating a Respectful Workplace
(Title of project/presentation/training)

Cost Estimate
PROJECT DEVELOPMENT AND DELIVERY
Research and training design 5 hours @ $125 per hour = $625.00
Training Presentation 12 hours @ $125/hour = $1,500.00
TOTAL = $2,125.00

TRAVEL (The training will be conducted in 3 locations, Albany, Rochester and Queens)
LODGING
Hotel: 2 night at $150/night = $300.00
TOTAL = $300.00

MILEAGE miles at 535¢/mi.
Albany – 50 miles R/T @ .535/mi = $26.75
Rochester – 480 miles R/T @ .535/mi = $256.80
Queens – 340 miles R/T @ .535/mi = $181.90
TOTAL = $465.45

PER DIEM (GSA by county)
Albany ½ day @ $59.00/day = $29.50
Rochester 1.5 days @ $59.00/day = $88.50
Queens 1.5 days @ $74/day = $111.00
TOTAL = $229.00

MISCELANEOUS Expenses (Parking, Tolls, , etc.)
= $75.00

TOTAL ESTIMATED COST = $3,194.45

Sincerely,

John Albertson, Professional Conflict Resolution Advisor
Any Advisor Company Inc.
4269 West Broadway Street, Albany, NY
John.Albertson@any_e-mail (555)555-5555