



2024-2025 Judy Housley Safety Partners Matching Grant Program Guidelines

We are pleased to announce that on the 27th year of offering this program the grant will now be titled the Judy Housley Safety Partners Grant.

***OBJECTIVE:** To help eligible members purchase safety items designed to reduce workers' compensation claims.*

The Judy Housley Safety Partners Grant provides funding for Public Entity Partners members to purchase safety and loss prevention items or training aimed at reducing work related injuries and accidents.

Please read this information in its entirety before completing the application:

- 1) Public Entity Partners will **reimburse up to 50 percent** of the cost of the safety-related approved item(s) with a maximum reimbursement based upon earned workers' compensation premium from the previous year.
- 2) **Matching grant funds must be used for employee safety related items.**
- 3) Entity must be an existing member and must currently have **workers' compensation coverage** as of **7/1/2024**.
- 4) Entity must be in good standing **and in compliance with previous loss control recommendations.**



DEADLINE: Friday, August 16, 2024 (close of business)

GRANT NOTIFICATION DATE: Week of September 9, 2024

ELIGIBILITY: Available **ONLY** to members with **Workers' Compensation Coverage** as of **July 1, 2024**. Your **expenditure** may be made between **July 1, 2023 and April 1, 2025**.

RULES FOR PARTICIPATION

1. **Applications must be submitted online.** The application is **DATE SENSITIVE** and is subject to available funds.
2. A signed **Resolution** or **Motion** (by the appropriate official: mayor or chairman of the board) passed by the governing body of the city/agency **MUST BE** provided. For boards of local government agencies that do not pass resolutions, a Motion is attached and may be signed by the appropriate Executive. In addition, also available on our website, please find a "fillable" Model Resolution/Motion, for your convenience.

NOTE: If your resolution/motion cannot be approved and signed when your application is ready, you may submit the application only. However, the resolution/motion must be sent by no later than October 1, 2024. Since the application is date sensitive, it is NOT necessary to submit the application and resolution/motion together. Please note that your grant reimbursement check will not be sent to you until we have received the document.

3. Public Entity Partners will reimburse approved grants for one-half of the paid expenditures (50 percent), up to the maximum funding level for the participant's assigned classification.
4. *If* the Grant Committee approves your application, you will be asked to submit proof of payment(s) for your safety-related purchased item(s) before we can process your grant check. Invoices alone will NOT be used as proof of payment. **Please see Page 3 for mandatory checklist of items needed for Grant reimbursement.**

GRANT REIMBURSEMENT CHECKLIST:

1. “Notification of Approval” letter
2. Signed Resolution/Motion
3. Cover sheet listing description of items purchased, quantities, and grand total of all purchases. All receipts must follow in order of the cover sheet.
4. Two proofs of payment which must include the following:
 - 1) CANCELLED check/bank statement OR credit card receipt/credit card statement OR Automated Clearing House (ACH) OR Automated Funds Transfer (AFT)
 - 2) Copy of invoice OR purchase order (serving as the backup to the cancelled check or credit card receipt). Submitting invoices alone will not be accepted.

Forward all receipts/documentation to:

Tahtia Mitchell
Grant & Scholarship Program
Tmitchell@PEpartners.org
Fax: 615-371-9212

The deadline for us to receive your application is Friday, August 16, 2024 (close of business). Grant notifications will be distributed the week of September 9, 2024.

Only ONE grant application may be approved for each town/city/agency during any given FISCAL YEAR. You may not “roll-over” an application from one fiscal year to another.

If approved for a grant, your proof of payment for expenditures must be received by April 1, 2025, or your grant money WILL be awarded to the next application.

PLEASE NOTE : The funding for this program is limited and is time-sensitive. It is important that you are diligent in filing for reimbursement. Members who submit late reimbursement receipts may jeopardize their eligibility to receive a grant the following fiscal year. Please do not delay and plan ahead to submit reimbursement items as soon as the Approval Notification letter is received.



GRANT CONSIDERATIONS: Consideration of grants will be based on a variety of issues, such as your entity's risk management practices, loss experience, and availability of funding and submission date.

1. The primary consideration will be the amount of available funding for the fiscal year.
2. Priority will be given to risk exposures noted in the loss control site surveys, recommendations and/or loss trends, and a history of sound risk management practices.

Grant funding will depend on the **earned workers' compensation premium from the previous year**. Your earned premium from the previous year is available **after July 5, 2024**, at which time you may email Tahtia Mitchell at TMitchell@PEpartners.org to inquire about your classification.

If you need to know about your classification or if you have additional questions, please contact:

Tahtia Mitchell
Grant & Scholarship Program
Tmitchell@PEpartners.org
1-800-624-9698

Rating Classifications Funding Levels

(based upon earned workers' comp premium
for previous year 2023-2024)

Class I – Up to \$4,000

Class II – Up to \$3,000

Class III – Up to \$2,000

Class IV – Up to \$1,500

Class V – Up to \$1,000

Class VI – Up to \$500

Class VII – Up to \$250

Workers' Compensation Coverage Classification Levels

Class I – Contributed earned premium for the previous year \$400,000 or more in the requested coverage area.

Class II – Contributed earned premium for the previous year between \$200,000 and \$399,999 in the requested coverage area.

Class III – Contributed earned premium for the previous year between \$100,000 and \$199,999 in the requested coverage area.

Class IV – Contributed earned premium for the previous year between \$25,000 and \$99,999 in the requested coverage area.

Class V – Contributed earned premium for the previous year between \$10,000 and \$24,999 in the requested coverage area.

Class VI – Contributed earned premium for the previous year between \$2,500 and \$9,999 in the requested coverage area.

Class VII - Contributed earned premium for the previous year less than \$2,500

**MODEL RESOLUTION
FOR GOVERNMENTAL ENTITIES**

**A RESOLUTION AUTHORIZING
THE CITY OF _____
TO PARTICIPATE IN
the *Judy Housley Safety Partners Matching Grant Program***

* * * * *

WHEREAS, the safety and well-being of the employees of the City of _____ is of the greatest importance; and

WHEREAS, all efforts shall be made to provide a safe and hazard-free workplace for the City of _____ employees; and

WHEREAS, Public Entity Partners seeks to encourage the establishment of a safe workplace by offering a "*Safety Partners Matching Grant Program*"; and

WHEREAS, the City of _____ now seeks to participate in this important program.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF _____, TENNESSEE the following:

SECTION 1. That the City of _____ is hereby authorized to submit application for the *Judy Housley Safety Partners Matching Grant Program* through Public Entity Partners.

SECTION 2. That the City of _____ is further authorized to provide a matching sum to serve as a match for any monies provided by this grant.

Resolved this _____ day of _____ in the year of _____.

Mayor

ATTEST:

City Recorder

MODEL MOTION
FOR GOVERNMENTAL ENTITIES
THAT DO NOT UTILIZE RESOLUTIONS

A MOTION AUTHORIZING

TO PARTICIPATE IN
the Judy Housley Safety Partners Matching Grant Program

* * * * *

WHEREAS, the safety and well-being of the employees of _____
_____ is of the greatest importance; and

WHEREAS, all efforts shall be made to provide a safe and hazard-free workplace for the
_____ employees; and

WHEREAS, Public Entity Partners seeks to encourage the establishment of a safe workplace
by offering a “*Safety Partners*” *Matching Grant Program*; and

WHEREAS, the _____ now seeks
to participate in this important program.

I, therefore, move that the _____ is hereby
authorized to submit application for the *Judy Housley Safety Partners Matching Grant
Program* through Public Entity Partners; and that the _____ is
further authorized to provide a matching sum to serve as a match for any monies provided
by this grant.

A motion was made by _____ and
properly seconded, and then passed on by the Board on _____ day of
_____ in the year of _____.

Appropriate Signature