Winchester Hospital
FY26 Community Grants Request for Proposals

At Winchester Hospital, member of Beth Israel Lahey Health (BILH), we are committed to improving the health and well-being of residents within our Community Benefits Service Area (CBSA). Through our Community Benefits Department, we work with residents and key community health stakeholders to address identified community health needs and priorities through our Community Health Needs Assessment (CHNA) which was last conducted in 2025. Winchester Hospital will award grant funding to community organizations that can implement evidence-based programs and services to address those needs in the following health priority areas:

- Equitable Access to Care
- Social Determinants of Health: Housing and Food Access
- Mental Health and Substance Use
- Complex and Chronic Conditions

BILH is committed to its WE CARE Values and its Community Benefits investments align with these values:

Wellbeing. We provide a health-focused workplace and support a healthy work-life balance.
Empathy. We do our best to understand others' feelings, needs and perspectives.
Collaboration. We work together to achieve extraordinary results.
Accountability. We hold ourselves and each other to behaviors necessary to achieve our collective goals.
Respect. We value diversity and treat all members of our community with dignity and inclusiveness.
Equity. Everyone has the opportunity to attain their full potential in our workplace and through the care we provide.

Please reference the 2025 Winchester Hospital Community Health Needs Assessment and 2026-2028 Implementation Strategy to inform your application to this funding opportunity. All funded programs must align with the 2026-2028 Implementation Strategy and must report on standard process activities and outputs (see Appendix C. for further details). All strategies must align with the BILH Community Benefits Guiding Principles of *accountability, community engagement, equity and impact (more details in Appendix B)*. Grant awards will range from a minimum of $10,000 to a maximum of 25,000, with an estimated 6-8 proposals funded.

Eligibility Criteria: Evidence-based programs must the following criteria:

- **Health Issue:** Must address at least one of the priority health needs and be able to demonstrate measurable impact within the program implementation timeframe.
- **Winchester Hospital CBSA Cities/Towns and Focus Populations:** Must be conducted in and/or reach residents living in one or more of the Winchester Hospital Community Benefits Service Area cities and towns: Medford, North Reading, Reading, Stoneham, Tewksbury, Wakefield, Wilmington, Winchester and Woburn. Focus Populations include: youth, older adults, low resource populations, racially, ethnically, and linguistically diverse populations, LGBTQIA+ individuals, and people living with disabilities.
- **Non-Profit Status:** Must be a 501(c)(3) nonprofit community-based organization or public agency.

Implementation Timeframe: Programs must be implemented between April 2026-April 2027 with annual renewal considerations to be made dependent on program progress, impact, community need and availability of funding.

Reporting Requirements: Grantees are required to participate in biannual reporting (6-months and 12-months post award) via the Beth Israel Lahey Health Community Benefits database. BILH Program Evaluation expectations are outlined in Appendix C.

Scoring: Applicants will be scored on the following criteria in Appendix B.

How to Apply & Deadline: Send application that includes completed application tables from Appendix A AND

completed Excel budget template to be downloaded from the funding opportunities web posting to LeighAnne.Taylor@bilh.org by February 9, 2026. Applicants will be notified of funding decisions by March 2, 2026.

Appendix A: Application Tables and Budget Template

Please complete the tables below and the budget template linked below and email to LeighAnne.Taylor@bilh.org by February 9, 2026.

1) **Organization overview**

Organization name	*Name of the program*
Organization mission	*Please share your organization's mission.*
Link to website	*Please include a link to your website or social media platform.*

2) **Program overview**

Program name	*Name of the program*
Evidence-based or evidence-informed and program history (150 words max)	*Is the program evidence-based or evidence-informed (definitions below)? Please briefly describe any available data that supports the program's effectiveness. If this is an existing program, describe the program's history and demonstrated outcomes and how supportive funding would expand the existing program.* *Evidence-based programs have been informed by research findings and then systematically studied and proven to demonstrate measurable outcomes.* *Evidence-informed programs are designed using research findings but may not have been formally studied.*
Program purpose (200 words max)	*Why are you looking to implement this program? How will this program meet community needs? What do you aim to achieve with this program?*
Communities of focus and demonstrated experience working with communities (100 words max)	*Who do you aim to reach with this program? What are their key demographics? Please include how you will ensure an equitable approach in reaching these populations. Please include your organization's history of working in the highlighted CBSA city/town/neighborhood(s) and with the focus populations.* *Eligible Communities: Medford, North Reading, Reading, Stoneham, Tewksbury, Wakefield, Wilmington, Winchester, and Woburn AND Focus Populations: youth, older adults, racially, ethnically, and linguistically diverse populations, LGBTQIA+ individuals, and people living with disabilities*

In the following tables, please provide a 2-3 SMART goals that guide your program's design. The SMART goals should align with your stated program need/purpose in section 2 and incorporate BILH standard metrics outlined in Appendix C.

SMART Goal #1	*What do you aim to achieve?*	Timeline: *start-completion*
Activities	*What will you do to achieve your goal? In bullet points, list and briefly describe the activities. Note who (role(s)/job title(s)) is responsible for the activity(ies).*	
Proposed Metrics	*How will you track progress? Please refer to Appendix C for BILH's standard metrics.*	

SMART Goal #2	*What do you aim to achieve?*	Timeline: *start-completion*
Activities	*What will you do to achieve your goal? In bullet points, list and briefly describe the activities. Note who (role(s)/job title(s)) is responsible for the activity(ies).*	
Proposed Metrics	*How will you track progress? Please refer to Appendix C for BILH's standard metrics.*	

If you do not have a third SMART goal, input not applicable into the first line (it is permissible to have only 2).

SMART Goal #3	*What do you aim to achieve?*	Timeline: *start-completion*
Activities	*What will you do to achieve your goal? In bullet points, list and briefly describe the activities. Note who (role(s)/job title(s)) is responsible for the activity(ies).*	
Proposed Metrics	*How will you track progress? Please refer to Appendix C for BILH's standard metrics.*	

3) **Budget**

Total amount requested ($10,000-25,000) with an itemized list of all expenses. Grant funds may be used for project staff salaries, data collection and analysis, meetings, supplies, related travel, and other direct project-related expenses. Indirect expenses (i.e. items that are associated with running the organization, such as administrative staff salaries and benefits, rent, utilities, office supplies, etc.) may not exceed 10% of the total budget. Grant funds may not be used to provide medical services, to support clinical trials, to construct or renovate facilities or capital expenses, or as a substitute for funds currently being used to support similar activities. Please use the following budget template.

Appendix B: Scoring

As applications are scored, reviewers will keep the following Beth Israel Lahey Health Community Benefits guiding principles in mind:

- **Accountability**: Hold each other to efficient, effective and accurate processes to achieve our system, department and communities' collective goals.
- **Community Engagement:** Collaborate meaningfully, intentionally and respectfully with our community partners and support community initiated, driven and/or led processes especially with and for populations experiencing the greatest inequities.
- **Equity**: Apply an equity lens to achieve fair and just treatment so that all communities and people can achieve their full health and overall potential.
- **Impact**: Employ evidence-based and evidence-informed strategies that align with system and community priorities to drive measurable change in health outcomes.

Applications will be scored on a scale of 1 to 4, where 1 = Disagree, 2 = Somewhat Disagree, 3= Somewhat Agree, and 4 = Agree, using the scoring criteria below.

Scoring Criteria:
1. Organizational mission aligns with guiding principles
2. History of working in CBSA city/town/neighborhood(s)
3. Proposed project meets a demonstrated community need for defined focus populations through application of an equity lens.
4. Proposed project is evidence-based or evidence-informed
5. Goals and intended impact, as defined by process and outcome measures, are reasonable and aligned with guiding principles
6. Requested funding is reasonable for proposed activities (if not, additional funding sources are in place/identified)

Appendix C: BILH Program Evaluation

BILH funded programs should include applicable process measures from Table 1 below, to be incorporated into the 2-3 SMART goals included in your proposal.

Table 1. Example Process Metrics

Shared Process Metrics for all BILH-Funded Programs
• Number of unique individuals served As applicable to the program: • Number of services delivered • Number of activities or events conducted to a group or at the community level • Number of participants attending activities or events conducted to a group or at the community level • Number of organizations and/or providers engaged throughout the grant period, disaggregated by activity and existing/new. If applicable: • Number of products/weight of products/units delivered • Number of staff hired current staff roles continued • Number of staff trained • Number/percent of recipients reporting satisfaction and/or program meeting their needs among those enrolled/eligible

If your program collects outcome metrics, please consider including these in your SMART goals as applicable. Examples in Table 2 below.

Table 2. Example Outcome Metrics

Shared Outcome-level Metrics for BILH-Funded Programs	
Short term outcomes	#/% of participants reporting increased knowledge #/% of participants reporting increased awareness of resources and support #/% of partners reporting adapting programs based on their program data # of new linkages made with community organizations and/or providers
Medium term outcomes	#/% of participants reporting improved behaviors #/% of participants reporting improved help seeking behaviors #/% of participants reporting use of knowledge of and access to resources and support # of new relationships with community organizations established
Long term outcomes	#/% of participants reporting secure housing status #/% of participants reporting improved outcomes # of relationships with community orgs sustained