

Franklin County/North Quabbin CHIP Network

Community Voices Mini-Grants

The CHIP Network's vision is that all residents of Franklin County and the North Quabbin Region have the opportunity to pursue healthy lifestyles and achieve social, emotional, physical, and spiritual well-being; and to participate in shaping the systems that affect their health.

Thanks to funding from Baystate Health Systems, the Community Health Improvement Plan (CHIP) Network is able to offer our member organizations funds to help involve and support the capacity of people with lived experience in decision-making and oversight.

The purpose of these grants is incentivizing and maintaining community engagement and removing barriers to participation by community members in the work of members of the CHIP Network, working on CHIP priorities. Funds can be used to support those serving on advisory councils, participants in focus groups, youth leaders, etc.

Fundable Expenses

- Stipends for advisory committee members
- Gas or grocery cards for focus group participants
- Paying for a childcare provider at an event to get parent feedback
- Paying for someone to survey participants/residents to get their input on program design or a new policy or rule at the local or state level
- Board training for community members serving on boards of CHIP members
- UP to \$50 for food for meetings to gather community input
- Other expenditures which make it easier for those with lived experience to participate in the shaping the systems that affect their health

Expenses which do not qualify for funding: Staff time and promotional materials

Funding Range: 0-\$400 per grant. If your application is funded, you will enter into a contract with the Franklin Regional Council of Governments for the funds, which will be reimbursed to you upon proof of expenses (if you need some of the funds up front this is negotiable).

Please note: These funds are available in FY19 and 20 and are entirely dependent on continued availability of grant funds.

Reporting: Please be prepared to submit a brief summary of what you learned from the work supported by these funds.

Applications accepted on a rolling basis

See attached application form



CHIP COMMUNITY VOICES FUNDING APPLICATION FORM

NAME:

AGENCY/PROGRAM:

EMAIL:

ADDRESS:

DESCRIPTION OF PROPOSED USE OF FUNDS:

USE OF FUNDS	AMOUNT
TOTAL AMOUNT REQUESTED:	

TIMELINE:

PROPOSAL RELATES TO WHICH CHIP PRIORITY? (see list of priorities at frcog.org/chip)

Submit completed form to Walker@frcog.org, or Phoebe Walker at FRCOG, 12 Olive Street, Greenfield MA 01301 -- Questions? Call (413) 774-3167 x 102

For more information or to see a copy of the Community Health Improvement Plan and the priority strategies, visit www.frcog.org/CHIP