

# HEALTHYbeginnings

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## Purpose

Healthy Beginnings Endowment, a permanently restricted fund of Concord Hospital, was established as part of the 1996 “Campaign for the Family” by Oglesby Young, MD.

Funds/income available from this endowment will be distributed annually, in consonance with the Hospital’s spending policy, to provide programs, services, and support for initiatives to enhance maternal, women’s and child health and the health of families in our region. The endowment is meant to prove a means to enhance the coordination of health programming and services for the families in our community and may support initiatives of Concord Hospital, Concord Regional Visiting Nurse Association, Riverbend Community Mental Health and other community not-for-profit organizations to meet the needs of parents in the Greater Concord area. Concord Hospital’s Primary Service Area: Allenstown, Andover, Barnstead, Boscowen, Bow, Bradford, Canterbury, Center Barnstead, Chichester, Concord, Deering, Dunbarton, Epsom, Henniker, Hillsborough, Hopkinton, Loudon, Northwood, Pembroke, Penacook, Pittsfield, Salisbury, Suncook, Warner, Washington, Weare, Webster, Windsor.

## Goals

- To provide funds annually to programs, services and projects that contribute most to positive child development and the health of the family;
- To encourage collaboration and coordination among community providers so as to ensure a focused, collective approach in meeting the needs of area families and eliminate duplication of effort and of expended funds;
- To involve care providers and community members in determining those programs most vital and deserving of support.

## Funding Decisions

A volunteer advisory committee makes annual recommendations to the Concord Hospital Trust for its endorsement as to the most appropriate use of funds available after considering the health needs of families in the region, **with preference given to programs where collaboration is evident**. The Concord Hospital Trust Office of Philanthropy administers the Fund and provides support to the advisory committee.

## Criteria

Funds will be distributed for organizations and programs that meet the following criteria:

- Age Demographic Birth to age five (5);
- Concord Hospital’s Primary Service Area;
- Qualified 501(c)3 or not-for-profit organization;
- Program specifically reflects and support the parent/child unit.

## **\*\* Funding Process \*\***

Interested departments or organizations should submit a completed funding application to Jessica Lassonde in the Concord Hospital Trust Office via email at [jlassonde@crhc.org](mailto:jlassonde@crhc.org) by, **January 14, 2019**. The Healthy Beginnings Endowment Committee will review applications and make funding recommendations to the Concord Hospital Trust Board of Trustees. **Recipients will be notified in February.**

Recipients must complete and sign a “**Terms of Award**” document before funds will be released. **Funds not used for intended purposes shall be returned to the Healthy Beginnings Endowment.**

A **written follow-up report is required six months** following funding.

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Organization Name:		
Mailing Address:		
City, State, Zip:		
Contact Person:		
Email Address:		

	YES	NO
Is the Organization a 501(C)(3) Tax Exempt Entity / or is the Program/Service a Community Benefit? If Yes, please include letter of exemption	<input type="checkbox"/>	<input type="checkbox"/>

**Program/Service Need:**

**How was the need identified?**

**Is the proposed program/service a duplication or modification of another in our community? If so, how and by whom?**

	YES	NO
Does the program/service represent partnership with another organization (i.e. referrals, trainings, core responsibilities, collaborations of budget, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>

**If yes, who and in what way(s)?**

**What are the program/service objectives?**

**Primary population served and expected number served:**

**How many months in a given year, on average, do you serve the age demographic population (e.g. birth to five (5) years)?**

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Does your program/service offer any in-kind or charitable services? If yes, please explain:

How will/do you measure the results/outcomes of your program?

Please define your fiscal year (i.e. October 1 - September 30):

What were the results for the most recent fiscal year?

How will the funds from the Healthy Beginnings Endowment specifically be used?

If you do not receive Healthy Beginnings Endowment funding, how will this impact your program/service?

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**Organization / Department Financial Summary**

*Please provide information from most recent audit or annual financial statement.*

		<i>Last Fiscal Year</i>		
		Source of Support	Amount	%
Last Fiscal Year (FY) Ended Date	2018	Government Grants & Contracts	\$	
		Program Fees/Sales & 3 <sup>rd</sup> Party Payments	\$	
Last FY Total Expenditures *		Endowment/Interest Income	\$	
		Other Earned Income	\$	
Last FY Total Income		Benefits	\$	
		Membership	\$	
Operating Fund Balance at End of Last FY (from financial statement/audit balance sheet?)	\$	United Way/Federated Arts	\$	
		<i>Contributions</i>		
Current (projected) FY Operating Budget	\$	Business	\$	
		Individuals	\$	
		Foundations, Grants, Other	\$	
		<b>TOTAL</b>	<b>\$</b>	

*\* If operating surplus or loss is more than 5% of total income, please comment:*

**Specify budget for proposed program:**

<b>Anticipated Expenses:</b> (please identify all items)	
<b>Anticipated Revenue:</b> (please identify all sources)	

**Total amount requested:**

\$

**Plans for future funding and self-sustainability:**