



**Request for Application: Building Bicycle Helmet Equity  
Community Based Organization Partners for Bike Helmet Distribution**

**Submission Deadline: Monday, March 11, 2024, at 5:00 pm EST**

Chronic Disease Prevention and Control Division  
Community Initiatives Bureau

Date posted: February 16, 2024

## Overview

The Boston Public Health Commission (BPHC) is the local public health department for the City of Boston. BPHC's mission is to work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequities. The Chronic Disease Prevention and Control Division at the BPHC is seeking community-based organizations, who support the wellness of Boston residents by promoting physical activity, bicycling, and injury prevention, to partner with BPHC and distribute free bicycle helmets to Boston residents, especially for those that are low-income. Bicycle helmet use is an effective intervention that's shown to reduce the risk for bicycle-related head injury by as much as 85%.

## Project Timeline

Friday, February 16, 2024	RFA released
Monday, February 26, 2024	Questions are due
Wednesday, February 28, 2024	Answers to questions are posted online
Monday, March 11, 2024, at 5 pm EST	Application due date
Monday, March 18, 2024	Awardees will be notified
March 18 – April 1, 2024	BPHC will work with the awardee to finalize their helmet order
April 1 - April 15, 2024	Work with helmet distributor, HelmetsRUs Worldwide, to order and ship the helmets to each CBO awardee

## **Scope of Work**

The “Bicycle Helmet Equity” project will provide bicycle helmets free of charge and make them more accessible to Community Based Organizations (CBOs). CBOs must be able to receive shipments during April and May 2024 from the supply vendor and store helmets appropriately. CBOs will distribute helmets for free to families in their communities who need them. CBOs must track and report on their helmet distribution activities. CBO’s must also commit to attending one mandatory in person training on helmet fitting. The ideal organization would have the capacity to store upwards of 50 helmets and distribute them as we receive requests.

### **Eligibility**

CBOs located in the City of Boston, and serving Boston residents, are eligible to apply. Organizations serving communities of color in Dorchester, East Boston, Hyde Park, Mattapan, and Roxbury will be prioritized. Individuals are not eligible to apply.

### **BPHC will:**

- Purchase, order, and ship helmets to the CBO location
- Provide promotion of CBO partners and helmet distribution events
- Provide training on proper helmet fittings to each partner CBO

### **Awardees must agree to the following:**

- Designate one staff member or volunteer as the point-person for all communication between BPHC and the organization
- Assign a representative to attend a helmet fitting and safety training
- Provide a detailed workplan on how helmets will be distributed and how events are promoted to the public. Co-brand with BPHC as a sponsor of the event or activity.
- Receive helmet shipment and provide appropriate storage space for the helmets. Must have the capacity to store and distribute a minimum of 50 helmets. Total awarded will be subject to availability of funding.
- Distribute the helmets to individuals and families who may not be able to purchase them on their own
- Submit a summary report on the distribution activities

## Proposal Requirements

Submit Application online via Microsoft Form: by Monday, March 11th, 2024, at 5:00 pm. Link to form: <https://forms.office.com/g/ZnEgip4kgi>

### Application Sections & Questions (must complete the final form using the link above)

#### Section 1: Organization Information (name, address, contact person, etc.)

1. Name of Organization
2. Organization Street Address (example: 1234 Main St)
3. Organization City Area (example: Dorchester)
4. Organization Zip Code
5. Mailing Address, if different from street address
6. Contact Person Name:
7. Contact Person Email Address
8. Contact Person Phone Number

#### Section 2: Information on the community(ies) your organization supports

9. Indicate which racial/ ethnic group(s) your organization primarily serves.
  - American Indian/ Alaska Native
  - Asian
  - Black or African American (non-Hispanic/ Latinx)
  - Hispanic/ Latinx
  - Native Hawaiian or Pacific Islander
  - White
  - Other
10. Which neighborhood below does your organization PRIMARILY serve? (select one)
  - Allston/Brighton
  - Back Bay (Back Bay, Downtown, Beacon Hill, West End)
  - Charlestown
  - Dorchester (02121/02125)
  - Dorchester (02122/02124)
  - East Boston
  - Fenway
  - Hyde Park
  - Jamaica Plain
  - Mattapan
  - Roslindale
  - Roxbury

- South Boston
- South End
- West Roxbury

11. Which other neighborhoods below does your organization serve?

- Allston/Brighton
- Back Bay (Back Bay, Downtown, Beacon Hill, West End)
- Charlestown
- Dorchester (02121/02125)
- Dorchester (02122/02124)
- East Boston
- Fenway
- Hyde Park
- Jamaica Plain
- Mattapan
- Roslindale
- Roxbury
- South Boston
- South End
- West Roxbury

12. How does your organization support bicycling and physical activity and/or the health of residents in your neighborhood?

**Section 3: Experience and plan/ timeline for helmet distribution**

13. Does your organization have any experience with bike helmet distribution or helmet fitting? If so, please share more information on what you have done or any other relevant experience.

14. Which of the following best describes how the helmets will be distributed? Select all that apply.

- Given out at a public community event
- Distributed through your organizations' programming
- Given to individuals or families by request
- As part of a Boston Public School program
- Other (please specify)

15. Please describe how you plan to distribute the helmets and include a tentative timeline for the next year (2024):

16. Describe in detail how you will do the following:

- 1- Promote safety and encourage proper helmet use
- 2- Focus on low-income families and individuals who are not able to purchase a helmet for themselves

3- BPHC will provide helmet fitting training to all awardees. How will you incorporate helmet fitting into your distribution plans?

**Section 4: Helmet Order Details:** CBOs must have the capacity to store and distribute a minimum of 50 helmets. The maximum request is 500 helmets. The total awarded will be subject to other applications received and availability of supplies. Please use the links below and break down how many of each type of helmet and size you are requesting and include a total amount at the end. If none in that category, put "none" or "0".

Helmet type	# Small	#Medium	#Large	# Extra Large (limited styles and amounts)
17. <a href="#">Model 02 Supreme Bike Helmet</a>				Not available in XL
18. <a href="#">Model 06 Bike Helmet</a>		Not Available		Not available in XL
19. <a href="#">Model 08 Premium Bike Helmet</a>				
20. <a href="#">Model 09 Flash Graphics</a>				
21. <a href="#">Model 15G Toddler Bike Helmet</a> (all one size)				
22. Total helmets requesting:				

**Submission Instructions**

Please submit applications by completing this online form:

<https://forms.office.com/g/ZnEgip4kgi>

For questions, please contact Emily Shenk: [eshenk@bphc.org](mailto:eshenk@bphc.org) or 617-534-2529

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