Program Overview

Please provide the following information.

City of Winston-Salem
ARPA Transformational
Non-Profits Application

This application portal is to request funding from the City of Winston-Salem as part of the Transformational Non-Profits Application Process. Applications received through this portal will only be reviewed by the City of Winston-Salem. Other jurisdictions may have separate application processes. Please contact other jurisdictions (e.g., Forsyth County) for instructions regarding requests to those jurisdictions.

Submitting an application does not guarantee funding. Please see the section below regarding the scoring process. The Mayor and City Council will have final decision-making authority regarding program funding requests.

Non-profit organizations may submit funding requests for capital or operating costs.

Minimum Criteria

- Must be registered non-profit organization (includes faith-based organizations providing a public purpose)
- Must have been incorporated as a non-profit for at least one year

Scoring Process and Matrix

All completed applications will undergo a review to ensure required documents are attached. Fully completed applications will be reviewed by selected City staff members and scored based on the scoring matrix approved by the Mayor and City Council. Click here to view the scoring matrix. Scored applications will be reviewed by the City’s Management Team for potential recommendation to the Mayor and City Council who will have authority to appropriate funding for programs.

Staff reserves the right to contact any applicant to request clarification or additional details regarding application responses and materials.
Defining Performance Measures

Sections of the application will reference performance measures and outcomes as required by the U.S. Department of Treasury. Specifically, the application will request workload and effectiveness/outcome measures. Please see this video (https://www.cityofws.org/2809/Performance-Measures-Video) for general information on performance measures.

Upcoming Application Orientation Session

The City will host a virtual application orientation session on April 1, 2022 at 10:00 am. The meeting will take place virtually via the Zoom platform and will also have a live simulcast on the City’s YouTube page. The link for that meeting will be posted the morning of the meeting to the website: www.cityofws.org/clfrf

Contact Information

For any questions or concerns, please email ARPA@cityofws.org or call City Link at 336-727-8000.
A. Contact Information

Please provide the following information.

ORGANIZATION/AGENCY INFORMATION
A.1. Organization/Agency Name
Exchange Club Center For The Prevention Of Child Abuse Of North Carolina, Inc. (The Parenting PATH)

A.2. Mailing Address
500 W. Northwest Blvd. Winston-Salem, NC 27105

A.3. Organization Website
www.parentingpath.org

A.4. Year 501 (c)(3) Status Obtained
1,981

A.5. Organization/Agency Fiscal Year
-71,630

A.6. Federal Tax ID Number

A.7. Federal DUNS Number

A.8. Federal SAM Registered?
Yes

ORGANIZATION/AGENCY CONTACT INFORMATION
EXECUTIVE DIRECTOR
A9. First Name
Elizabeth

A10. Last Name
Miller

A11. Title
CEO

A12. E-mail
elizabeth.miller@parentingpath.org

A13. Phone Number
(336) 748-9028

BOARD CHAIR
A14. First Name
Jessica

A15. Last Name
Spencer

A16. E-mail
obxpepe@gmail.com

A17. Phone Number
(336) 971-7388

A18. Term Expiration Date
06/30/2022
B. General Project Information

Please provide the following information.

PROJECT INFORMATION
B.1. Project/Program Title
Short Term Counseling

B.2. Project Location/Address
500 W. Northwest Blvd. Winston-Salem, NC 27105

PROJECT CONTACT/MANAGER
B3. First Name
Elizabeth

B4. Last Name
Miller

B5. Title
CEO

B6. E-Mail
elizabeth.miller@parentingpath.org

B7. Phone Number
(336) 748-9028
C. General Project Narrative

Please provide the following information.

C.1. Provide description of project and how funds will be used

Living in a poor or low-income household has been linked to poor health and increased risk for mental health problems in both children and adults that can persist across the life span. Despite their high need for mental health services, children and families living in poverty are least likely to be connected with high-quality mental health care.

In Forsyth County, 48.4% of children live in low-income homes, per the 2022 NC Child Data Card. According to the US Census Bureau 13% of citizens in the county live in poverty, greater than the national poverty rate of 10.5%. The uninsured rate in North Carolina is 12.9% versus 10.4% nationally (data provided by KFF State Health Facts). North Carolina ranks 42 of 50 stats for overall youth mental health (report card by Hopeful Futures). Compared with children of higher socioeconomic status (SES), children of low SES experience higher rates of parent-reported mental health problems and higher rates of unmet mental health needs.

Poverty can also adversely affect children’s mental health through family and community-level factors. Families living in poverty experience a unique array of stressors (eg, food insecurity, housing problems). These stressors can increase parental risk for mental health problems and substance abuse, which can diminish their capacity to engage in positive parenting practices (eg, warmth and responsiveness, nurturance, supervision) and increase the potential for child abuse and neglect. (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5192088/)

Children and families living in poverty face a range of barriers that reduce their ability to access mental health services, maintain compliance with treatment, and achieve favorable treatment outcomes. Funds will be used to provide free time-limited therapy to children (age 2-18) and adults (ages 18+) with the intent of providing crisis intervention and linking clients to long-term services in the community. Time-limited therapy, also known as short-term or brief therapy, is a valuable form of therapy and can improve people’s lives. Arranged within a set period of time, usually up to ten sessions, this type of therapy can be more beneficial to some clients in certain circumstances than longer-term counselling.

C.2. How will a participant access the proposed project/program, use the services, and derive a beneficial outcome from participation?

Participants are able to self refer to the program. Referrals will also be accepted from Forsyth County Department of Social Services, Guardian ad Litem, Forsyth County District Court, Winston-Salem Forsyth County Schools, Winston-Salem Police, Forsyth County Sheriff’s office, Bridges to Hope Family Justice Center, and health care providers including but not limited to Novant, Atrium Wake Forest Baptist.

Participants will be screened by an intake coordinator who will assess program eligibility, provide scheduling for services and who will assist in linking participants to long-term care. Program eligibility includes: Forsyth County residents who are at or below the 300% Federal Poverty Level.
In addition, all clients will be assessed using the Economic Mobility Roadmap, to determine their starting point and ending point on the Roadmap. There are five categories beginning at Crisis, moving to: Vulnerable, Stable, Self Sufficient and Thriving. This is based on the Forsyth County Economic Mobility Matrix and a copy has been uploaded to documents.

Participants will receive between four and twelve counseling sessions (with potential for 15 depending on client need) using a short-term counseling model. Short-term counseling addresses problems like depression, anxiety, grief, stress, relationship issues, and substance abuse. In one 2006 study, participants showed reliable and clinically significant improvement of 88% after just one session.

Services begin with a thorough assessment that helps to clarify the problem and explore what caused it to occur. The client then works with a Licensed Professional Counselor (LPC), a Licensed Professional Counselor Associate (LPCA), a Licensed Clinical Social Worker (LCSW) or a Licensed Clinical Social Worker Associate (LCSW-A) one-on-one to develop specific goals, which are included in the Individualized Treatment Plan. Some commonly treated issues include adjustment to life transitions, coping with a loved one who suffers from addiction, relationship issues, anxiety, depression and grief. Individual Short-Term Counseling is provided for both individuals and family members to ensure full involvement, support and awareness of the Individualized Treatment Plan.

Accessibility: A month to two months therapy is a more accessible solution to many living in poverty who may not have access to reliable transportation or be able to take enough time away from work for long-term therapy.

Beneficial Outcomes: 80% of clients will make progress toward treatment goals or improved functioning
80% of clients will report services facilitated healing
80% of clients will receive a warm handoff to a mental health counselor/agency
60% of clients receiving a warm handoff will engage in treatment with the mental health counselor/agency
80% of all clients will report moving at least one level on the Economic Mobility Road Map.

C.3 Total estimated number of unique participants to be served annually
200

C.4. Will program beneficiaries be only residents of Winston-Salem?
No

Describe the other areas (counties) that will benefit
Forsyth County

Estimate the percentage of beneficiaries that will be residents of Winston-Salem
90.00 %

TOTAL FUNDING REQUEST
C.5. Total Operating Funding Request
$465,843.70

C.6. Total Capital Funding Request
$0.00
SPENDING TIMEFRAME

C.7 Capital Spending Timeframe
0

C.8 Operating Spending Timeframe
24 months
D. Project Budget Categories

Please provide the following information.

Use templates below to input the **total** Project Budget (only requested expenses and estimated revenues related to the program or project for which you are requesting funding) by clicking Add Column. Please include all funding from the City and other sources.

<table>
<thead>
<tr>
<th>Operating Costs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Practical Counselor/Licensed Clinical Social Worker (2.0FTE) * 24 months</td>
<td>$260,000.00</td>
</tr>
<tr>
<td>Clinical Supervision for Licensed Practical Counselor/Licensed Clinical Social Worker (.2 FTE) * 24 months</td>
<td>$32,000.00</td>
</tr>
<tr>
<td>Intake Coordinator to schedule appointments, conduct intakes, community liaison to Community Mental Health Organizations (2.0FTE) * 24 months</td>
<td>$85,000.00</td>
</tr>
<tr>
<td>FICA for 3.2 FTE @ .0765 * salary</td>
<td>$28,840.50</td>
</tr>
<tr>
<td>Health Insurance @ $425/month * 24 months * 3.2 FTE</td>
<td>$32,640.00</td>
</tr>
<tr>
<td>Dental Insurance @ $49/month * 24 months * 3.2 FTE</td>
<td>$3,763.20</td>
</tr>
<tr>
<td>Three laptop computers @ $700/computer &amp; IT support ($350/year * 2 years)</td>
<td>$2,800.00</td>
</tr>
<tr>
<td>Phone &amp; Internet for office staff at $200/month * 24 months</td>
<td>$4,800.00</td>
</tr>
<tr>
<td>Utilities for office staff @$125/month * 24 months</td>
<td>$3,000.00</td>
</tr>
<tr>
<td>Office supplies</td>
<td>$4,000.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$456,843.70</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Capital Costs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>No capital costs associated with this project</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**PROJECT/PROGRAM REVENUE CATEGORIES**

Please fill out the revenue estimate table. **Note: operating revenues and expenses must be balanced (be equal).**

<table>
<thead>
<tr>
<th>Operating</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Winston-Salem Funding</td>
<td>$465,843.70</td>
</tr>
</tbody>
</table>

$0.00

$0.00
Please list below all known/expected individual grants and contributions totaling 10% or more of the project's budget. 

**Note**: capital revenues and expenditures must be balanced (be equal)

<table>
<thead>
<tr>
<th>Capital</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Winston-Salem Funding</td>
<td>$0.00</td>
</tr>
<tr>
<td></td>
<td>$0.00</td>
</tr>
</tbody>
</table>
E. Demographic and Geographic Distribution

Please provide the following information.

Demographic distribution is an assessment of the level of the project funds spent on a program or service provided at a physical location in a Qualified Census Tract (QCT), OR where the primary intended beneficiaries live within a QCT, OR whether the program benefits residents that earn less than 60 percent of median income for the City, OR whether over 25 percent of program beneficiaries are below the federal poverty line.

E.1 Is this project/program located in a QCT or serve residents that live in a QCT?
Yes

If yes, what percentage of clients served are estimated to be residents of QCTs? Click here to view the QCT mapping tool
90.00%

E.2 If the project or program is not a QCT or specifically serve residents in a QCT, will residents meet the following criteria:

☐ 25% or more of participants below the federal poverty line or participants served make less than 60% of the Area Median Income

☐ The project/program does not operate in a QCT, and beneficiaries neither reside in a QCT nor meet the income thresholds mentioned above.
F. Alignment to Strategic Plan

Please provide the following information.

Strategic planning is a process in which organizational leaders determine their goals and objectives, and allocate needed/limited resources to successfully achieve those goals and objectives. Click here to view Winston Salem's Strategic Plan. The Strategic Plan includes three (3) tiers of priorities:

Tier 1:
- Focus on job creation/sustainability and workforce development
- Collaboration and funding for pre-K opportunities
- Funding for affordable housing
- Funding for economic development

Tier 2:
- Poverty reduction/cessation
- COVID reopening plan
- Community engagement (Power of connections)
- Funding for arts

Tier 3:
- Community Fundraising
- Environmental initiatives
- Address digital divide
- Address childcare needs
- Neighborhood maintenance
- Organization efficiency and public-private partnerships
- Law enforcement reform

F.1. Please select the primary priority from the list above addressed by your project/program.
Tier 2

F.2. Please select the secondary priority from the list above addressed by your project/program.
Tier 1
F.3. Please describe how the workload or outcomes from your project/program addresses the primary priority you selected.

Mental health is essential to a person’s well-being, healthy family and interpersonal relationships, and the ability to live a full and productive life. People, including children and adolescents, with untreated mental health disorders are at high risk for many unhealthy and unsafe behaviors, including alcohol or drug abuse, violent or self-destructive behavior, and suicide—the 11th leading cause of death in the United States for all age groups and the second leading cause of death among people age 25 to 34.

Mental health disorders also have a serious impact on physical health and are associated with the prevalence, progression, and outcome of some of today’s most pressing chronic diseases, including diabetes, heart disease, and cancer. Mental health disorders can have harmful and long-lasting effects—including high psychosocial and economic costs—not only for people living with the disorder, but also for their families, schools, workplaces, and communities. (Office of Disease Prevention and Health Promotion)

Poor mental health also has profound economic consequences. In 2013, mental disorders were the leading element in health care spending in the United States, some $201 billion, as compared with $147 billion for another major area of expenditure, heart conditions. A prime reason for this difference was the much greater levels of spending on long-stay institutions (nursing homes, psychiatric institutions, and prisons), as well as on mental health support for those on active military duty. In total, 40% of all mental health–related spending was on these forms of care. Excluding dementia, total costs of mental illness were still $163 billion.

These health system costs represent still only a minority of the total adverse impacts of poor mental health. Poor mental health also increases the risks of additional physical morbidities, such as diabetes, and premature mortality. Notwithstanding these additional health system costs, most of the costs to society from poor mental health fall beyond health care systems. Many of these costs arise from reductions in contributions to national economic output, mainly through curtailed participation in employment, as well as lower levels of volunteering and informal caring. Society also incurs additional spillover effects, such as increased strains placed on police and the criminal justice system, and family members experience physical and mental health impacts. (https://www.annualreviews.org/doi/10.1146/annurev-publhealth-040617-013629)
G. Collaboration

Please provide the following information.

Collaboration is when an organization is partnering or proactively working with one or more external stakeholders to achieve the same goal.

G.1. How many other external partners, organizations, stakeholders will you be collaborating with to provide the project/program?
2

G.2. Please provide the names of the organizations and the roles they will serve in the project/program?
The Parenting PATH will provide services for clients under 18 and will subcontract to the Mental Health Association to provide services to adults 18+. The Mental Health Association will also provide knowledge, evaluation and community connections to be able to refer clients to long term counseling homes.
Please provide the following information.

Per U.S. Treasury rules and associated guidance, the City’s framework for using these funds aligns with specific administrative reporting requirements. The administration/reporting criterion has three core elements: 1) the organization’s/project’s development of clear performance indicators and measurable outcomes, 2) the use of evidence-based interventions, 3) and the City’s evaluation of organization and project risk.

H.1. Please clearly define the workload and outcome measures that are associated with your project/program

<table>
<thead>
<tr>
<th>Workload</th>
<th>Each LPC/LCSW will be expected to carry a case of at least 20 clients at a time. This will result in each seeing approximately 100 clients/year (200 clients total).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effectiveness/Outcome</td>
<td>80% of all clients will report improved outcomes in measurable objectives.</td>
</tr>
</tbody>
</table>

H.2. Does the project/program use evidence-based interventions?

No

H.3. For transparency purposes, the risk matrix is attached. This is NOT required, however, you can self-assess if you wish. Please fill out and upload the Risk Matrix.

☑️ Risk Matrix

Bid Sheet.xlsx
I. Capacity

Please provide the following information.

An organization’s capacity can be defined as its ability to implement the proposed project, as characterized by the alignment of its mission and vision with the proposed project, existing internal infrastructure to support it, and its plan for implementation and assessment of project success.

I.1. Please provide your organization’s vision and mission statements and explain the alignment between the proposed project/program and the organizational mission.

The Parenting PATH’s mission is to strengthen families, support parents and prevent and treat child abuse and neglect.

The Mental Health Association in Forsyth County is the community connector, educator and resource navigator for mental health care in Forsyth County, North Carolina.

I.2. Describe the organization’s current infrastructure and capacity to deliver the program services or complete the project. Include any relevant current programming and experience providing similar services.

The Exchange Club Center for the Prevention of Child Abuse of North Carolina, Inc. (The Parenting PATH) is a local, non-profit agency with a 41-year track record of making the world a safer place for our children. Child abuse is a serious issue that continues to impact families in this community. The Parenting PATH’s mission is to strengthen families, support parents and to prevent and treat child abuse. The Parenting PATH is the primary child abuse prevention agency in Forsyth County, providing 14 different services or programs to prevent and treat child abuse in Forsyth County and northwestern North Carolina. The Parenting PATH collects extensive demographic data regarding the families served through programs at our agency, and uses a cloud based client management system to track referrals and services. The Parenting PATH engages in yearly reviews of program data, evaluating effectiveness of practices of each program and examining trends in referrals to both internal and external programs. This evaluation allows The Parenting PATH to determine when and if new evidence based practices are appropriate for the agency and what new referral pathways the agency may need to seek. In all Parenting PATH programs, we engage in quarterly quality improvement programs, designed to seek client input regarding services and to inform agency policies and procedures.

The Parenting PATH has operated since 1981, and has been awarded an Intensive Family Preservation Services (IFPS) contract through the Department of Health and Human Services (FY 2015-FY 2021). IFPS provides intensive in-home intervention to families who are in imminent danger of having children removed from their home due to abuse or neglect. The agency serves 174 families a year through IFPS with a contract in excess of $1,000,000/year of state funding. Through Parent Aide, the agency works with between 30 and 50 families each year to prevent child abuse and neglect in families with children aged 1-12. For more than 10 years, the agency has received funding from the Juvenile Crime Prevention council from the Department of Public Safety of North Carolina, managing state funding to provide home visiting to families at risk of involvement with the criminal justice system. The agency offers parenting classes and has three licensed clinicians on staff who are able to provide services to families. For more than 10 years The Parenting PATH has received funding from the North Carolina Department of of Health and Human Services to provide Respite Care to families at-risk of abuse and neglect.
1.3. Describe the program/project implementation plan. Include any known barriers to success and how those will be overcome

Success in recruiting and maintaining parent participation will be accomplished through the development of trusting rapport with parents from the initial intake. The Parenting PATH staff members and Mental Health Association staff members have demonstrated the art of rapport building with the most mistrusting parents. Through their own experiences, education, personal knowledge, and persistence; staff enter into the initial conversations without judgement. Staff meet the family where they are and build their respect and trust one session at a time.

Once rapport has been built, the staff maintain the level of engagement through interventions/activities that create moments of awareness and gems of learning for the family. These activities are geared towards the specific needs of each family. When the family starts seeing small successes, when they feel valued and supported, they are more willing to engage on a deeper level. Parents offer unique insights to improve the quality of services and have an essential voice in ensuring that the program meets community needs.

Another method of maintaining parent participation is connecting the families to additional resources. These resources range from long term psychotherapy, to long-term housing and food insecurities support. The Parenting PATH staffs’ ability to identify resources for families reduces unnecessary stress so parents can implement the learning received through our services. When families experience success with outside resources, these are the moments where they feel less isolated and have the opportunity to connect with other individuals who may share similar stressors.

The agency offers several avenues for current and previous service consumers to become involved and assume a leadership role. Organizational decisions involve transparency and building and maintaining trust with the clients and the community. The Parenting PATH conducts customer satisfaction surveys for all clients receiving services. The agency partners with community organizations, community members and former clients for our Parent Support Advisory Board. The Parenting PATH Board of Directors also has former service recipients as members.

Client satisfaction surveys and telephone follow up will be used to evaluate services along with feedback from the Parent Support Advisory Board. Parents/caregivers will be recruited and asked to volunteer with a variety of service events.

The Parenting PATH offers a 24 hour “warm-line” that is handled by experienced staff well-equipped in managing a variety of crises. Staff is actively involved in numerous community teams, such as the Child Abuse Multidisciplinary Team and the Child Abuse Preventive Collaborative, in addition, to the strong relationship that exist with representatives of the local Department of Social Services, the District Attorney’s Office. These relationships reduce the barriers that families could face accessing services and help staff support families when referring them to services to assist with the social and emotional needs of their children. Opportunities for parent engagement are promoted by The Parenting PATH and encouraged at many different levels.

I.3a. Describe the program assessment plan including how the data will be collected for selected performance metrics and any other evaluation tools that will be used to determine program/project success.

The Intake Coordinator will review client goal plans and make notes regarding progress or lack thereof. The Intake Coordinator will also review the anonymous client satisfaction surveys so that the service providers are not accessing the anonymous feedback. The Intake Coordinator will ensure that data is entered in a timely, accurate manner. The Licensed Practical Counselor or Licensed Clinical Social Worker will conduct follow up evaluations after 4 sessions, 8 sessions, 12 sessions and 16 sessions (if still enrolled).
The Parenting PATH conducts anonymous customer satisfaction surveys for all clients receiving services to ensure that families feel affirmed and respected. These are compiled by the Office Manager and reviewed quarterly by the Chief Operating Officer and the CEO.

There will be formal and informal evaluations. These methods of evaluations include: client records (documentation of services- intake, placements, discharge and follow up); reports to the Parent Support Advisory Board and The Parenting PATH Board of directors; system database, monthly reports, quarterly reports; client satisfaction surveys.

The Parenting PATH actively works to ensure that outputs are tracked and outcomes are measured accurately, by following these guidelines: Identify problems early, inform strategies for improvement, track progress on proposed grant outcomes, and identify short and intermediate term measures that are predictive of long-term program success. Continuous Quality improvement efforts will provide the tools to maintain fidelity to guidelines.
J. Impact/Community Need

Please provide the following information.

Impact/Community needs concern whether or not the proposed project will address an identified need within the community and what the short term (One year) and long term (3 years) impact of this project will be.

J1. Describe the identified community need for this project/program. *Cite specific data or studies/reports that have identified this as a community need.*

In Forsyth County, 48.4% of children live in low-income homes, per the 2022 NC Child Data Card. According to the US Census Bureau 13% of citizens in the county live in poverty, greater than the national poverty rate of 10.5%. The uninsured rate in North Carolina is 12.9% versus 10.4% nationally (data provided by KFF State Health Facts). North Carolina ranks 42 of 50 stats for overall youth mental health (report card by Hopeful Futures). Compared with children of higher socioeconomic status (SES), children of low SES experience higher rates of parent-reported mental health problems and higher rates of unmet mental health needs.

Poverty can also adversely affect children’s mental health through family and community-level factors. Families living in poverty experience a unique array of stressors (eg, food insecurity, housing problems). These stressors can increase parental risk for mental health problems and substance abuse, which can diminish their capacity to engage in positive parenting practices (eg, warmth and responsiveness, nurturance, supervision) and increase the potential for child abuse and neglect. (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5192088/)

In the United States, one in five adults has a clinical mental disorder. Anxiety disorders are the most common, followed by substance use disorders and mood disorders such as depression. Nationally, about 76% of employees reported that they struggled with their mental health, and 42% were diagnosed with a clinical mental health disorder.

Addressing mental health needs in school is critically important because 1 in 5 children and youth have a diagnosable emotional, behavioral or mental health disorder and 1 in 10 young people have a mental health challenge that is severe enough to impair how they function at home, school or in the community.

Many estimates show that even though mental illness affects so many of our kids aged 6-17 at least one-half and many estimate as many as 80% of them do not receive the mental health care they need. (Association for Children's Mental Health).

Nationally, only 40 percent of students with emotional, behavioral and mental health disorders graduate from high school, compared to the national average of 76 percent; and, Over 50% of students with emotional and behavioral disabilities ages 14 and older, drop out of high school. (Association for Children's Mental Health).

Children and families living in poverty face a range of barriers that reduce their ability to access mental health services, maintain compliance with treatment, and achieve favorable treatment outcomes.
J2. Describe the short-term impacts of the project/program and how they align with the community need identified above.
Short-term counseling addresses problems like depression, anxiety, grief, stress, relationship issues, and substance abuse. In one 2006 study, participants showed reliable and clinically significant improvement of 88% after just one session.

J3. Describe the long-term impacts of the project/program and how they align with the community need identified above.
Research shows that the impact of mental health intervention programs and found that financial and employment situations improve as mental health improves. The conventional practice of most mental health agencies also contributes to disparities in access to mental health care and having short term counseling available to both children and adults will increase access, and increase compliance with care.

Long term impacts also include greater ability to be self-sufficient, reduced healthcare costs, improved employment, reduction in employee absenteeism and a higher high school graduation rate.

J4. Referencing previous section on outcomes, describe how the impacts noted above will be measured.
Outcomes will be measured through progress on the goal plan (both short term and long term goals), links to long-term community services, access to long-term community services and improvement on the Economic Mobility Roadmap.
K. Funding Stability

Please provide the following information.

Funding stability is an assessment of both the organization's annual funding and the planned funding mechanism for the project/program from grants, donations, sales, and other income generators. To the extent possible, the City wishes to ensure applying entities have sustainable funding sources outside the City's ARPA allocation. An entity will be deemed as having superior funding stability if it demonstrates at least three years of sustainable grant, contribution, and/or fee-based revenues to cover operating costs. The entity must also demonstrate commitments from other organizations to cover the full cost of project deficits or future-year operating costs (in combination with realistic fee-based revenue assumptions).

K.1. Have your organization's operating revenues covered operating expenses the last three years?
Yes

K.2. Approximately what percentage of your organization's total budget is covered by competitive grants that you must re-apply for?
90.00 %

K.3. What percentage of your project/program's budget is covered by City ARPA funds as part of this request?
17.00 %

K.4. Please provide narrative on funding for this program after City ARPA funding has been exhausted.
We will work with insurance/Medicaid to seek reimbursement for long-term maintenance of the program. Once established we will be able to offer services at cost from insurance/Medicaid and not require co-pay from clients.

K.5. Please attach commitment letters from other organizations showing financial support for the project/program.
☐ Commitment Letters

**No files uploaded**
L. Representation

Please provide the following information.

Representation deals with how diverse an organization's leadership is compared with community demographics, which includes Winston-Salem's race/ethnic backgrounds as well as gender. Local non-profit organizations should reflect the communities they serve. Since organizations are requesting to receive ARPA funding through the City, we must ensure these entities hold themselves accountable to having diverse staff and leadership panels.

L.1. Provide a list of board members including the race, ethnicity, and gender identification for each member.

<table>
<thead>
<tr>
<th>Name</th>
<th>Race</th>
<th>Ethnicity</th>
<th>Gender Identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jessica Spencer</td>
<td>Caucasian</td>
<td>Non-Hispanic</td>
<td>Female</td>
</tr>
<tr>
<td>Demetria Nickens</td>
<td>Black</td>
<td>Non-Hispanic</td>
<td>Female</td>
</tr>
<tr>
<td>Vanessa McMinn</td>
<td>Other</td>
<td>Hispanic</td>
<td>Female</td>
</tr>
<tr>
<td>Travis Whitfield</td>
<td>Caucasian</td>
<td>Non-Hispanic</td>
<td>Male</td>
</tr>
<tr>
<td>Kia Chavious</td>
<td>Black</td>
<td>Non-Hispanic</td>
<td>Female</td>
</tr>
<tr>
<td>Caitlin Dorsch</td>
<td>White</td>
<td>Non-Hispanic</td>
<td>Female</td>
</tr>
<tr>
<td>Amber Flint</td>
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<td>Non-Hispanic</td>
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<td>Katie Foster Fowler</td>
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<td>James Francis</td>
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<td>Todd Hairston</td>
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<td>George Munford</td>
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<tr>
<td>Wilfredo Ortiz-Loyola</td>
<td>Other</td>
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<td>Ali Poplin</td>
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<td>Tim Weatherspoon</td>
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<td>Elizabeth Walsh</td>
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</tr>
<tr>
<td>Sally Williard</td>
<td>Caucasian</td>
<td>Non-Hispanic</td>
<td>Female</td>
</tr>
</tbody>
</table>
M. Required Documents

Please provide the following information.

For North Carolina Secretary of State - Current and Active Status, [Click Here](#)

**Documentation**

- **Code of Conduct/Conflict of Interest Policy** *Required

- **Copy of the agency's latest 990 Form as submitted to the Internal Revenue Service** *Required
  2020-990-The Parenting PATH - Client Copy.PDF

- **Organization By-Laws** *Required
  Board of Director Bylaws 1.2021 Revisions.docx

- **Articles of Incorporation** *Required
  Articles of Incorporation.pdf
  Amended Articles of Incorporation.pdf

- **Organization Policies (including personnel, formal non-discrimination, procurement, accounting, etc)** *Required
  Non Discrimination.pdf
  PP Procurement Policies Procedures_PROJ013149.pdf
  Bookkeeping Procedures Revised 6.22.2021.docx
  The Parenting PATH Employee Policy Handbook July 2021.docx
  Mental Health Association Letter of Support.pdf
- **IRS 501(c)3 Designation Letter** *Required*

- **Most recent audited financial statements or a third-party review** *Required*
  The Parenting PATH 6-30-2021 - FS.pdf

- **North Carolina Secretary of State - Current and Active Status** *Required*
  Secretary of State Filing.pdf
Please provide the following information.

☑️ I certify that all information entered into this application is true.

Elizabeth M. Miller

*Electronically signed by elizabeth.miller@parentingpath.org on 4/25/2022 4:55 PM*

04/25/2022