

# FollowUp Form

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## *Website*

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Has this report been posted on the PCF website?

Yes

## *Pinellas CARES Nonprofit Partnership Fund*

Please do not submit your final December report until all supporting fiscal documentation has been collected and can be compiled for submission.

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### **Project Name**

PAR COVID-19 Precautions and Behavioral health Outreach Technology (PARbot) Extension Program

### **Priority Funding Areas**

Behavioral Health

### **Award Type**

Installment

### **Unit of Service**

This will only be visible to Administrators and will enable question branching in the case that an organization has specified a unit-of-service cost.

### **Amount Awarded for Future Programming**

\$402,779.00

### **Amount Spent - December 27 to 30, 2020\***

How much grant funding was spent between **December 27 and 30, 2020**?

\$0.00

### Amount Spent - December 2020\*

How much grant funding was spent during the **entire month of December 2020**?

\$11,827.15

### Amount Spent as of December 30, 2020\*

How much of the awarded funding was spent from project inception to December 30, 2020?

\$398,908.87

### Brief Spending Narrative\*

Please briefly explain the spending activities from **December 27 to December 30, 2020**. If you have not expended any funds, please explain why.

**Example:** ABC Charity has only expended \$1,000 this week on program personnel while our food pantry was open. ABC Charity buys its food in bulk on the 15th of every month, and therefore there will be an uptick in expenditure that week.

N/A - no new spending activities were anticipated in the last week of the grant period.

### Client Story\*

Please give the true story of a client served this month by your programming. You may change identifying details. This allows us to connect to your programming on an emotional level.

We have a client who currently brings a 2 1/2 yr old to the developmental center. She entered treatment with minimal ability to engage with a significant hx of trauma from the age of 2 months and a hx of over 50 treatment episodes having been institutionalized since the age of 12. She had obviously had enough education on her trauma and on coping skills, so treatment focused on her belief that she was capable and could live an independent life, was safe in the here and now, and if she used the skills she has learned, could live out her dreams. She began changing her beliefs about 4 months into treatment and hasn't looked back. She has remained free of drugs and stable from MH sx. Is caring for her 2 1/2 yr old and an infant, is in her second year of college with an excellent GPA, has travelled to see her older children she had not seen for may years and reestablished a relationship with them and this two year period is the longest in her adult life she has not been institutionalized.

## *Behavioral Health Metrics*

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### December 27 to 30, 2020 - Individuals Served - Behavioral Health\*

Please specify the number of individuals that were given behavioral health services between **December 27 and 30, 2020** through your programming.

1017

### December Projections - Number Served - Behavioral Health

This was the number of individuals your organization projected it would serve in **December 2020** through this grant funding.

2000

### December 2020 - Actual Total # Served - Behavioral Health\*

Please specify how many individuals were given behavioral health services through your funded programming in **December 2020**.

3857

### Measurement - Behavioral Health

This is the measurement that your organization specified it would use to measure progress through this grant.

Admission Numbers

### December Projections - Progress Rate - Behavioral Health

This was the estimated progress rate from your application for **December 2020**. This was the projected improvement based on the Measurement from your application, viewable above.

10

### December 2020 - Actual Progress Rate - Behavioral Health\*

Please specify the ACTUAL progress rate for **December 2020 (in a percentage)** based on the Measurement indicated in your original application.

43

### December 27 to 30, 2020 - ZIP Codes of Individuals Served - Behavioral Health\*

Please SUCCINCTLY describe the ZIP codes of program services and program recipients (if recipient data is available). **These numbers should add up to the number of total individuals served specified above for the week of December 27 to 30, 2020.**

**FOLLOW THE EXAMPLE FORMAT EXACTLY.**

**ZIP CODE: Number served**

**Example**

Group Therapy (Program Service ZIP Code)  
33705: 15

Telehealth Counseling (Participant ZIP Codes)

33782: 5

33764: 3

33760: 8

33760: 917 33771: 88 33705: 4 33709: 8

## *Advanced Funds - Justification of Expenditures*

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### **Monthly Expense Reporting\***

Please complete the Pinellas CARES Advanced Funds Monthly Expense Reporting worksheet, attach appropriate backup documentation, and **upload as a PDF here**.

If you have a regular reporting/invoicing process, you may use your own similar worksheet, however, for your convenience, we have provided a template you can **DOWNLOAD HERE**.

If you have any notes on this, please put them in the field below.

12-2020 PINELLAS CARES FINAL REIMBURSEMENT.pdf Reimbursement Request is for \$371,407.18. All items were received and all payments have been issued and cleared. Please note there were two lost checks (Amazon and Positive Promotions), we replaced those with wire payments, all supporting documentation is attached. If you have any questions, please contact Jana Law at [jlaw@operpar.org](mailto:jlaw@operpar.org). Thank you!

### **Does the above documentation contain live signatures?\***

The accounting documentation above requires live signatures on the template in the "Prepared by" and "Reviewed by" lines. Please check that signatures are present, and affirm this by checking the box below.

Yes, there are live signatures in the documentation attached above.

## *Final Survey*

We would like your feedback on the CARES experience. Please complete the following anonymous survey:

<https://www.surveymonkey.com/r/DCFW7RN>

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I have completed this survey