

## 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*

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#### Project Name

Attending to Infant-Family Mental Health during COVID-19 in Pinellas County

#### Priority Funding Areas

Behavioral Health

#### Award Type

Installment

#### Amount Awarded for Future Programming

\$178,004.00

#### Amount Spent - February 1, 2021 to February 28, 2021\*

How much grant funding was spent **between February 1, 2021 and February 28, 2021?**

\$100.00

#### Amount Spent as of February 28, 2021\*

How much of the awarded funding was spent from project inception to February 28, 2021?

\$113,828.55

## Brief Spending Narrative\*

Please briefly explain the spending activities from **February 1, 2021 to February 28, 2021**. If you have not expended any funds, please return to the top of this report and indicate so.

**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.

During the month of February 2021, only one expense posted to the project; a \$100 payment to Ryan Carpenter for his services in December 2020. A Baby Talk event was hosted on February 25, 2021. No expenses were posted to the grant for this event since we had not yet received the extension.

## 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.

The J. family attended the Baby Talk event on Thursday, February 25 at the Dr. Carter G. Woodson Museum. They picked up meals for their children and were excited to see their daughter's preschool teacher among the many community members attending in support of the event. They had a chance to talk with her about their daughter, and with another familiar member of the project staff about a family celebration and some recent challenges. The children played nearby and enjoyed snow cones as the adults visited. Mrs. J was especially interested in the book "I am Perfectly designed", which she received in the gift bag of educational materials given her and planned to read the book with the children that evening.

## Behavioral Health Metrics

### February 1 to February 28, 2021 - Individuals Served - Behavioral Health\*

Please specify the number of individuals that were given behavioral health services between **February 1 and February 28, 2021** through your programming.

163

### Measurement - Behavioral Health

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

Social and Emotional Competence of Children Scale from the Parent Assessment of Protective Factors

### February 2021 - Actual Progress Rate - Behavioral Health\*

Please specify the ACTUAL progress rate **for January 2021 (in a percentage)** based on the Measurement indicated in your original application.

100

## February 1 to February 28, 2021 - 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 time between February 1 and February 28, 2021.**

**FOLLOW THE EXAMPLE FORMAT EXACTLY, INCLUDING THE COLON.**

**ZIP CODE: Number served**

### Example

Group Therapy (Program Service ZIP Code)

33705: 15

Telehealth Counseling (Participant ZIP Codes)

33782: 5

33764: 3

33760: 8

Zip code #Fam #children #adults 33712 14 31 29 33711 2 3 2 33713 1 3 2 33705 6 10 11 33709 1 5 1 33702 1 2 1 33731 1 3 1 33598 1 2 2 33647 1 2 2

## *Advanced Funds - Justification of Expenditures*

### 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.

Reimbursement Request and Backup Documentation - February.pdf

### 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.