

# 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

### **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**

\$178,004.00

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

How much grant funding was spent between **September 27 to 30, 2020**?

\$3,551.58

### **Amount Spent - September 2020\***

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

\$14,676.00

### Amount Spent - October 1 to 3, 2020\*

How much grant funding was spent between **October 1 to 3, 2020**?

\$4,722.60

### Amount Spent as of October 3, 2020\*

How much of the awarded funding was spent **from project inception to October 3, 2020**?

\$19,399.00

### Brief Spending Narrative\*

Please briefly explain the spending activities from **September 27 to October 3, 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.

During the week of September 27, 2020- October 3, 2020 the Family Study Center team were preparing for the launch of 2 essential program components, the "Baby Talk Academy" and the "Parent Cafe" series. Both of these components were scheduled to start the week of October 5, 2020. During this funded week the FSC team were preparing and distributing marketing materials to advertise these upcoming events, translating curriculum into effective virtual platforms and delivery styles, coordinating with guest speakers on program goals, content and delivery, establishing communication streams with community providers and families about the project components, preparing staff to efficiently deliver impactful services in a virtual environment.

### 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.

Pregnancy and child birth are pivotal yet scary events for many new parents. Having a baby now with the worries of COVID can be very frightening. The fear of Mom, baby or a coparent getting sick is palpable. These concerns begin during prenatal visits and do not stop after baby is safely home from the hospital. Parents are more fearful now about their health and the health of their babies and young children than they have ever been. Having and raising an infant used to be a family and community adventure but the isolation of parenting alone has left new parents feeling lonely, overwhelmed, stressed, disconnected, and depressed. Our project has had the opportunity to serve pregnant and new parents who are often alone and struggling for support. On our first webinar we had not only new parents but also community representatives from several agencies working to support fragile families, teen mothers, homeless parents and families struggling with substance use or mental health issues.

## ***Behavioral Health Metrics***

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

Please specify the number of individuals that were given behavioral health services between September 27 and 30, 2020 through this grant funding.

0

### **October 1 to 3, 2020 - Individuals Served - Behavioral Health\***

Please specify the number of individuals that were given behavioral health services between October 1 and 3, 2020 through this grant funding.

0

### **September Projections - Number Served - Behavioral Health**

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

100

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

Please specify how many individuals were given behavioral health services in September 2020 through this grant funding.

35

### **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

### **September Projections - Progress Rate - Behavioral Health**

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

80

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

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

80

### September 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.**

**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  
0

### October 1 to 3, 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.**

**FOLLOW THE EXAMPLE FORMAT EXACTLY.**

**ZIP CODE: Number served**

**Example**

Group Therapy (Program Service ZIP Code)  
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Telehealth Counseling (Participant ZIP Codes)  
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33764: 3  
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Zip codes were not collected during the weeks of the project. Zip codes are now being collected and will be reported in subsequent reports.

## *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.

We will submit Sept and October official expense reporting once a contract is signed and all expenses are accurately represented in our general ledger with appropriate backup documentation.