

Program Overview

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
10:19 AM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

Program Overview

Please provide the following information.



City of Winston-Salem
ARPA Transformational
Non-Profits Application

City of Winston-Salem
P.O. Box 2511
Winston-Salem, NC 27102
336-727-8000
ARPA@cityofws.org

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/clrf

Contact Information

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

A.Contact Information

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
10:27 AM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

A.Contact Information

Please provide the following information.

ORGANIZATION/AGENCY INFORMATION

A.1. Organization/Agency Name

Bethesda Center for the Homeless

A.2. Mailing Address

930 North Patterson Avenue Winston-Salem, NC 27101

A.3. Organization Website

www.bethesdacenter.org

A.4. Year 501 (c)(3) Status Obtained

1,989

A.5. Organization/Agency Fiscal Year

7

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

Baraka

A10. Last Name

Riptoe

A11. Title

Executive Director

A12. E-mail

baraka.riptide@bethesdacenter.org

A13. Phone Number

(336) 722-9951

BOARD CHAIR

A14. First Name

Linda

A15. Last Name

Barnes

A16. E-Mail

lindajb@cityofws.org

A17. Phone Number

(336) 747-7372

A18. Term Expiration Date

07/31/2022

B. General Project Information

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
10:30 AM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

B. General Project Information

Please provide the following information.

PROJECT INFORMATION

B.1. Project/Program Title

BCH Transformational Change for Life Accountability and
Generational Stabilization

B.2. Project Location/Address

930 North Patterson Avenue Winston-Salem, NC 27101

PROJECT CONTACT/MANAGER

B3. First Name

Ashley

B4. Last Name

Martin

B5. Title

Associate Executive Director

B6. E-Mail

ashley.martin@bethesdacenter.org.

B7. Phone Number

(336) 722-9951

C. General Project Narrative

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
11:37 AM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

C. General Project Narrative

Please provide the following information.

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

Bethesda Center for the Homeless (BCH) respectfully requests a grant from the City of Winston Salem in the amount of \$1,000,000 (\$500,000 over a two year period) to support the Transformational Change for Life Accountability and Generational Stability Program, which includes intensive case management, housing and supportive services at Housing Authority of Winston Salem (HAWS), and direct lifetime mentorship with community stakeholders at Agape Faith Church in Winston Salem, NC.

On any given night in Forsyth County, there are over 500 homeless individuals in the community (sheltered and unsheltered). The most recent unsheltered count was 250 individuals living in places not meant for human habitation. BCH strives to partner with the community to eradicate that number as we remain the only day and emergency night shelter that houses 100 people each night in the area. Despite the homeless population, there are no other facilities like Bethesda Center for the Homeless in Forsyth County. It is our mission to develop and implement a cost-effective and recidivism reducing program that meets the needs of a diverse population working to break the cycles of homelessness and intergenerational poverty by addressing homelessness due to 1) unemployment, 2) addiction, 3) trauma, and/or 4) mental/ physical illness, and 5) COVID, we are able to divert people out of homeless situations, and possibly the criminal justice system by utilizing and accessing local social services. Each agency's collaboration facilitates the exchange of discipline specific expertise, information, and resources in order to assist program participants in achieving permanent self-sufficiency not only for themselves, but for their families for generations to come as they learn to become and remain independent. The BCH staff is committed to seeking alternatives to the normal course of homelessness for those in need of basic but essential stabilization skills. Our program will serve homeless individuals and families in Forsyth County. Through a viable collaborative relationship with HAWS, our Guests (we do not call anyone "homeless") are prioritized for housing in Sunrise Towers, Piedmont Park, and Cleveland Homes. Homeless families are supported in Piedmont Park and Cleveland Homes, the head of the household must have a disabling condition causing their current housing situation. Chronically homeless individuals are prioritized for Sunrise Towers, single units. The federal definition for a chronically homeless person is, 'an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or has had at least 4 episodes of homelessness in the past 3 years'. The 4 episodes must total a year.

The funds requested will also provide financial assistance to include rental assistance for one year and step down assistance for the second year. The funds will also finance deposits, moving expenses, furniture, and medical needs if necessary. The case manager will coordinate wrap around mainstream services that will support the individual or family transitioning from homelessness. Mainstream services include but not limited to: medical and mental health through partnerships with Novant Health, Baptist Mobile Health, United Health Centers, POSSE Health, and North Carolina Counts Coalition, substance use, food stamps, disability benefits, budgeting, identification, clothing, and transportation and other services as identified in their individuals' service plan. Supportive services provided by the case manager will be able to significantly contribute to the quality of life of the guests receiving services.

Our first goal is to provide stable and permanent housing to the homeless families and individuals that we serve. This program will help eradicate the homelessness that is so prevalent in Forsyth County. In order to serve our guests, we will

not only focus on permanent housing but also provide supportive services that are necessary for ongoing stability. Though the use of the evidence-based practice, Critical Time Intervention (CTI), individuals will receive intensive case management which helps vulnerable individuals during their transition strengthen their network and community support. CTI requires an intensive progressive engagement approach to case management, meaning that homeless individuals will have a minimum of one face to face contact per week based upon their individual needs. Intensive case management will remain in place for a year and step down case management will occur in the second year. We have found that second year to be fruitful for stability as the case manager remains as a viable contact for the now housed individual.

Our second goal is to increase household income through earned income, disability benefits or retirement benefits. Even though, financial assistance will be provided for the household during the two years of the program, securing viable stable income will be necessary moving forward. CTI is compounded with our lifetime mentorship program with a community stakeholder of Agape Faith Church as we have learned that community connections also contribute to stability and resource sharing.

For many of our Guests, the day is consumed with a search for food, clothing and shelter- our facility eliminates this burden and allows them to focus on obtaining a home of their own. Due to mental illnesses, a fraction of this population is mentally competent enough to attend court and stand trial in instances where they find themselves in predicaments that lead to arrest on various public disorderly conduct charges and opt to obtain food, clothing and shelter in the county jail. To address the issue, our program also functions as a specialized court program tailored to the needs of defendants who are charged with misdemeanor and felony offenses that result from the homeless condition. Because frequent contact with police perpetuates the cycle of homelessness, and in many cases hinders the ability to obtain housing, the program is designed to 1) reduce recidivism, 2) mitigate court and jail costs, 3) build community collaboration, 4) improve access to community resources, and 5) assist those lacking permanent residence to access vital services and secure employment. The implementation of our program will reduce the continuous re-entry of defendants into the court system and promote personal accomplishment more frequently than traditional court measures that utilize incarceration as a method of rehabilitation. Accordingly, we expect to efficiently clear the court calendar from legal matters related to destitute circumstances because the program uniquely assists program participants in accessing community resources that support self-stabilizing behaviors. We do not differentiate between those whose offenses contributed to homelessness and those whose offenses are the result of homelessness.

For those lacking stable housing and living on the streets, or otherwise have endured financial difficulty, some lack governmental resources. All lack a permanent place to call home. It is important to remember: it is the condition of being homeless that is undesirable, not the people. These Guests are still our neighbors to more affluent communities in Winston Salem. Recent communications with Winston Salem Police Department reveal that the average daily cost of county jail is \$ 56.00 per day. In the event that severe medical or mental health services are needed, the cost of incarceration exceeds \$76.00 per day. According to the North Carolina Department of Community Affairs, the required income to afford a two bedroom apartment at fair market rent is \$29,084, which is difficult for families already facing dire financial circumstances. The Forsyth County Solicitor's Office is presently prosecuting more than 40 cases where homelessness is the underlying issue, and these matters will continue to be recidivist cases until the core concerns are resolved. Presently, the court may attempt to accommodate homeless individuals who are unable to pay a fine by offering community service as a viable option however, even with a court order to complete community service, defendants are released back into an unstable setting. Because, the issue of securing stable and sustainable housing remains the critical factor, the individual may be re-arrested, and sequentially recycled through the system until the life situation changes. The Department of Justice estimates that about two-thirds of people who are released from prison will, without supportive services, return to the correctional system within three years. This means that rehabilitation is limited unless life stabilization is addressed. For program participants, unless legal issues are resolved, life stabilization is impeded: there can be no government sponsored assistance, no public housing, no treatment for substance and alcohol abuse, no food stamps, and no veteran's assistance. Accordingly, the homeless person becomes even more marginalized. With BCH, participants integrate their activities in a stable housing setting and/or a shelter while their case

is being adjudicated. This is an opportunity to enhance their lives, not a handout. Our goal is to help program participants regain productive lives by utilizing tools to overcome a lack of job skills, employment and housing. During our counseling sessions, we speak directly to the participants, discussing with them their compliance to program rules and commitment to achieving stabilization, much like an appointed judge would do. Each person will be required to list the most meaningful or helpful activities as well as their plans for the future as opposed to living with no permanent residence and retaining constant mobility, sleeping in various parks, personal vehicles, public transit stations, and/or highway bridges. Additional program goals include:

- ☑ Develop alternative sentencing options for program participants
- ☑ Building communal collaboration
- ☑ Implement and operate mentoring/ counseling sessions for homeless individuals
- ☑ Reduce the number of hearings required to resolve cases involving homelessness
- ☑ Resolve 80% of the program's caseload within a 90 day period
- ☑ Reduce court and jail costs associated with homeless individuals
- ☑ Improve rates of successful program completion without incarceration
- ☑ Assisting program participants in accessing vital services and jobs for themselves and households so as not to impose on taxpayer dollars for the foreseeable future

Current systematic measures that encourage deterrence provide evidentiary support that traditional approaches are ineffective in curtailing the homeless disposition. Due to the economic turndown and COVID, the number of Guests with stabilization needs have increased and corresponding options have remained less than effective in reducing recidivism for both homelessness and our court system. BCH assists in reducing a revolving door of justice to a problem-solving, prosocial program, building upon interpersonal connections among stakeholders, who include social workers, homeless defendants, other nonprofits, health facilities, and city staff. Our collaboration with other charitable organizations, governmental institutions, and social service agencies to ensure that program participants have a means of resolving their homeless, health, and legal issues that might otherwise be an impediment to their stability. In this manner, cases that formally rotated through the system again and again can be resolved with finality, ultimately resulting in savings to the city of Winston Salem.

We are a supplemental program to existing diversion programs, which do not specifically address issues of homelessness or have disqualifying criteria for this population. We are uniquely able to compliment our hospitals, mental health facilities, and justice systems as participants with multiple life stressors (i.e., homelessness, alcoholism, drug addiction, and mental illness) are engaged in gainful activity and removed from the roadways, doorways, transit stations, parks, and other gathering places where they may be susceptible to arrest. Amidst such factors, securing employment or receiving state and/or federal benefits (housing, Social Security, Disability, Veterans Assistance, Welfare, etc.) is now possible. After completing our 90 day program, participants may be referred to a long-term community mentoring program that may continue practices of a healthier, financially stable, noncriminal, and tax paying lifestyle.

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

BCH will promote the program during shelter and case management orientation that occurs weekly at the shelter. BCH will operate the program on a 'Housing First' approach, meaning no preconditions to enter into the program as we remain a low barrier facility in order to serve the most people in need. BCH will also continue to communicate with local shelters and partnering agencies, promoting the program and updating availability to accept referrals to Coordinated Intake Center (CIC). We will also maximize our own marketing/ social media presence to communicate the program availability to the general public. BCH will accept referrals through community advocates, including local law enforcement and the courts, as well as word of mouth. Individuals will be assessed to address service needs as well as supportive needs. The service plan assists and supports the homeless individual(s) through goal setting in an effort to

have a beneficial outcome from services received. Intensive case management is the driving force for a beneficial outcome by walking closely providing a holistic approach to service needs for the individual.

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

250

C.4. Will program beneficiaries be only residents of Winston-Salem?

Yes

TOTAL FUNDING REQUEST

C.5. Total Operating Funding Request

\$1,000,000.00

C.6. Total Capital Funding Request

\$0.00

SPENDING TIMEFRAME

C.7 Capital Spending Timeframe

Not applicable

C.8 Operating Spending Timeframe

two years from award date

D. Project Budget Categories

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
12:28 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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.

Operating Costs	Total
Intensive Case Manager for 2 years	\$100,000.00
Intensive Case Manager for 2 years	\$100,000.00
Data Manager to track socio demographic details and program effectiveness for 2 years	\$20,000.00
Professional development for 2 Intensive Case Managers for 2 years	\$25,000.00
Office Supplies for two years- pens, copy paper, staples, tape, print cartridges, calendars, binders file cabinets, etc for 2 case managers for 2 years	\$10,000.00
Partner and community education to include formal community meetings, transportation for unsheltered guests, food, for two years	\$30,000.00
Equipment for 2 case managers for two years to include phones, laptop, internet service, office furniture	\$25,000.00
2 years of Marketing, communications, and development of program to general public	\$30,000.00
Independent Program Evaluator (Doctorate Level) for 2 years	\$30,000.00
Shelter operations for 250 guests, each year for 2 years	\$630,000.00
	\$1,000,000.00

Capital Costs	Total
No capital costs for this project	\$0.00
	\$0.00

PROJECT/PROGRAM REVENUE CATEGORIES

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

Operating	Total
This program does not generate facility/ program revenue	\$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)

Capital	Total
Donations (predicted)	\$235,000.00
Foundation Grants (predicted)	\$430,000.00
	\$665,000.00

E. Demographic and Geographic Distribution

Case Id: 15311
Name: BCH Transformational Change and Life
Address: *No Address Assigned

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
12:29 PM

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)

100.00 %

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

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
1:07 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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 1

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

Tier 2

F.3. Please describe how the workload or outcomes from your project/program addresses the primary priority you selected.

This program comprehensively addresses the housing, homelessness, and supportive needs of the homeless, including the underlying causes of their condition by focusing on job/ income creation/sustainability and workforce development. We actively contribute to the economy of Winston Salem by connecting Guests to benefits where applicable, including Veterans Assistance, disability, SSI, etc. and encourage a minimum of two job applications weekly, like Department of Labor. Case Managers assists Guests with completion of applications as needed and host weekly resume sessions. Many Guests are "working homeless" as they have employment during the day and sleep at our facility at night. These Guests have access to internship programs and professional development of partners (i.e., Providence Culinary), in order to build to a life of stability that supports them long after they exit our program. This addresses the second tier of priority as poverty reduction/cessation and community engagement (power of connections) continues to evolve our program. Even current service providers of our shelter, to include the cleaning company, has expressed interest in hiring and training employees/ Guests from our program as they exit. We provide services to 100 homeless individuals (60 men and 40 women) daily, with a 90 day planned program and we encourage stability during the entire term of enrollment as new community members seek our assistance. Our day shelter can see well over 100 homeless individuals on any given day. On a day to day basis, our day and night shelter can serve up to 200 plus homeless individuals daily. Unfortunately, we are dealing with a housing crisis and it affects our homeless population drastically as they are without financial resources and supportive services to meet their needs. Through this program, we are able to house individuals into stable permanent housing at three identified properties in Forsyth County. Our homeless individuals are prioritized first as BCH and the community recognizes the need to help this vulnerable population.

Workload outcomes of our Intensive Case Management is a critical program component and requires the Coordinator, Data Management, and Executive Team's daily monitoring of program compliance. In order to maintain effective communication, the Lead Case Manager act as the central contact for organizing information and indicating matters requiring action to the remainder of the team members, consulting with and updating the Executive Team weekly. Staff also maintains program status reports, participant progression reports, follow up treatment recommendations, outcomes, and other critical elements that must be communicated or added into the CMIS and HMIS systems, which are both used at all levels of program operation to maintain interagency communication and effective case management for each participant.

BCH will use Homeless Management Information Systems (HMIS) to track goals, trends, and performance measures. With the use of the HMIS, the Case Manager will be able to complete interim reporting to update income. Service tracking in HMIS can be utilized for referrals and outcomes. HMIS is significant for reporting measures and can be tailored as needed for this intensive case management program. HMIS reports will be reviewed monthly to review trends such as service use, income, and housing stability to name a few. Guests charts will be composed to include but not limited to assessments, consent for services, goal/action plans and case notes indicating progress. Weekly and monthly monitoring will be available and annual reviews of our program will be conducted in order to gauge programmatic effectiveness.

This program addresses the community's needs by providing essential services to shelter residents and rehousing homeless individuals as quickly as possible, and then maintains consistency via partnership to "coach" individuals to a life of independency beyond our 90 day shelter stay. Many of the homeless participants have health challenges, mental health challenges, and substance use disorders. In order for BCH to be successful providers, we ensure that the case managers participate in mandatory training. These trainings enhance their skillset making them more than qualified to work with the participants. BCH will monitor programming through intake and goal setting for the individual. The case Manager will be able to staff the case with the clinical supervisor to ensure that goals and plan of action are appropriate. Reports can capture the individuals served, goals, and resources so that performance measures can be gauged to determine program efficacy. We also utilize the Homeless Management Information System (HMIS) where data trends and performance measurements can be monitored through the ongoing reporting

system. If goals are not achieved, program adjustments can be reviewed and recommended to ensure that guests are successful and stable through our Program Evaluator.

BCH has a proven successful track record with long-term housing placements, and our alignment with Winston Salem's strategic plan will continue as advised by officials. We are constantly meeting and engaging our participants 'where they are in an effort to support and promote long-term stability to remain compliant as well. Additional program goals entail:

- To obtain stable housing for 250 guests and assist them into becoming gainfully employed/ financially self-sufficient
- Enhance public safety and public health by reducing recidivist cases with local law enforcement/ court and regularly holding mental/ physical access to health through community partnerships
- Enhancing program participant's ability to function healthfully in our community (i.e., maintaining income/ employment, maintaining housing, having access to healthcare, having prosocial contact and relationships with other community citizens and stakeholders, etc.)

G. Collaboration

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
1:14 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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?

3+

G.2. Please provide the names of the organizations and the roles they will serve in the project/program?

Housing Authority of Winston Salem (HAWS)- provides housing resource

Department of Labor- provides employment/ work development resource

Agape Faith Church in Winston Salem, NC.- provides mentor/ community stakeholder consultation

Sunrise Towers, Piedmont Park, and Cleveland Homes- provides housing resource

Novant Health- provides physical/ mental health access

Baptist Mobile Health- provides physical/ mental health access

United Health Centers- provides physical/ mental health access

POSSE Health- provides physical/ mental health access (STD/ STI infectious disease)

North Carolina Counts Coalition- nonprofit official partnership to build interagency partnership across NC for equity, justice, and inclusivity

Winston Salem Police Department- provides referrals and community engagement

Providence Culinary- provides employment/ work development assistance

Winston Salem State University- provides interns and referral for neutral program evaluator

Atruim Health Financial Dept/ St. Andrews Presbyterian Church- provides mentor/ community stakeholder consultation

H. Administration/Reporting

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
1:41 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

H. Administration/Reporting

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

Workload	<p>PHASE 1: Engagement/ Motivation – In this crucial phase, the Case Manager focuses on engaging & motivating the Guest to participate in comprehensive treatment, & reducing underlying factors & negativity. Techniques (i.e., reframing) address maladaptive perceptions and beliefs, raise confidence in the treatment process, and promote belief that positive change can occur. As a result, Guest experiences an increase in motivation and hopefulness, and an expectation is established of positive change.</p> <p>PHASE 2: Behavior Change – CTI assessments guide the development and implementation of Individualized Change Plans (ICP), that are culturally appropriate, relevant to unique needs, and developed by the Case Manager and Guest together. The ICP helps to define specific areas for change and desired outcomes, and also guides them toward new ways of interaction that will prevent the recurrence of homelessness. The ICP recognizes Guest strengths, and addresses risk/protective factors such as negativity/blaming, work skills and communication in order to reduce and eliminate problem behaviors and patterns. Case Managers provide concrete behavioral interventions to guide and model specific behavior changes. The ICP is established by the end of the first month of service.</p> <p>PHASE 3: Generalization/ Stability - The final month of intervention focuses on the need to maintain positive change over the long-term and apply positive change to other problem areas and/or situations. Links the to community resources such as educational support, employment or job training, social networks and emotional support, religious/spiritual activities, additional counseling or substance abuse treatment, access to mental/ physical health are made. In partnership, the Case Manager and Guest develop a transitional service plan identifying needed resources and providers for long term support long after they exit from the program.</p>
Effectiveness/Outcome	The service plan assists and supports the homeless individual(s) through goal setting in an effort to have a beneficial outcome from services received. Intensive

	case management is the driving force for a beneficial outcome by walking closely providing a holistic approach to service needs for the individual. BCH will use Homeless Management Information Systems (HMIS) to track goals, trends, and performance measures. With the use of the HMIS, the Case Manager will be able to complete interim reporting to update income. Service tracking in HMIS can be utilized for referrals and outcomes. HMIS is significant for reporting measures and can be tailored as needed for this intensive case management program. HMIS reports will be reviewed monthly to review trends such as service use, income, and housing stability to name a few. Guests charts will be composed to include but not limited to assessments, consent for services, goal/action plans and case notes indicating progress. Weekly and monthly monitoring will be available.
--	---

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

Yes

Please provide a link to (or attach a copy of) the evaluation of the program model

<https://www.criticaltime.org/cti-model/>

Program Model Evaluation

***No files uploaded*

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

***No files uploaded*

I. Capacity

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
2:39 PM

Case Id: 15311
Name: BCH Transformational Change and Life
Address: *No Address Assigned

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.

Our mission: We create opportunities daily through emergency and supportive services, empowering individuals to live stable lives.

Our vision: We live in a community where every individual has adequate housing, is economically equipped, and has access to adequate health care, undergirding their successes and stability.

This program comprehensively addresses the housing, homelessness, and supportive needs of the homeless, including the underlying causes of their condition by focusing on job/ income creation/sustainability and workforce development. The alignment between our mission/ vision and our program lies in our daily, active contributions to stabilize the most marginalized communities in Winston Salem by connecting Guests to benefits where applicable, and including each program participant as a community member no longer to be forgotten or forced to live in tents or community parks. We proactively engage, we rehabilitate/ educate, and then we communicate for a lifetime as long as they are part of our Winston Salem.

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.

Currently, our Executive Director and Lead Case Manager have a combined 40+ years of experience supporting persons experiencing homelessness, and 20 years of that time have been dedicated to Forsyth County. Our ability to emphasize the development of a comprehensive, ongoing program that addresses stable housing, the eradication of homelessness, human development, time management, creativity and critical thinking, clinical and programmatic issues, and direct care techniques and skills employs adequate and qualified staff to ensure that all needed services are provided to those who need us the most and cannot obtain comprehensive care elsewhere. Responsible staff appointed to this program will dedicate 100% of their time to its execution.

Additionally, our Board Chair, Executive Director, and entire leadership team are BIPOC according to the definition provided by Winston Salem Foundation. As a BIPOC led organization, we represent the community that we serve in terms of diversity and inclusion, especially in understanding cultural sensitivities and competencies around the need for our own spaces for safety, healing, and leading a life of stability and independency that are not always available in environments that we (Board, Staff, and "Guests" experiencing homelessness) originate from. We respectfully request to collaborate and partner with the city of Winston Salem to expand upon this fundamental understanding and adequately address gaps in building authentic and sustainable solidarity, especially as our homeless population integrates into back into a life of independency and self-sufficiency. Our target population are underserved persons and

even within our physical location, services are rendered in a low-income part of Winston Salem. Often, our Guests exit our facility into similar areas in terms of sociodemographic “independency”. That is, they enter housing areas that are also considered “low income”. In terms of diversity, the community our Guests have access to is not diverse from that which we offer. Many of the surrounding Winston Salem neighborhoods do not represent our Guests as we are located in an economically burgeoned area surrounded by neighborhoods our citizenry cannot afford to reside in. What’s more, our staff resides in the same community that our Guests have access to. This factor is but one issue challenging for our Forsyth community and Caucasian Board members as we seek to educate and inform our community to understand. We also seek to address how our staff, Board, and community at large can address pillars of racism that feed unfair paradigms that lead to minorities not having equal access to housing, work, financial stability, etc. that our white counterparts enjoy, even during times of financial hardship. As we are BIPOC led and staffed, we live and work in the community we directly serve.

I.3. Describe the program/project implementation plan. Include any known barriers to success and how those will be overcome

The implementation of our program will reduce the continuous re-entry of homelessness into the streets of Winston Salem and promote personal accomplishment more frequently for each Guest each day that they regain self-sufficiency, especially in terms of lower numbers of people without shelters and affiliated with law enforcement due to offenses associated with homelessness. We expect to efficiently clear the streets and court calendars from matters related to destitute circumstances because the program uniquely assists in accessing community resources, formalizing partnerships, and connecting individuals with other stakeholders who have longer histories of stability in our community, supporting self-stabilizing behaviors. Again, we not differentiate between those whose offenses contributed to homelessness and those whose offenses are the result of homelessness.

CTI assessments guide the development and implementation of Individualized Change Plans (ICP), that are culturally appropriate, relevant to each participant's unique needs, and developed by the Case Manager and Guest, together, helping to define specific areas for change and desired outcomes, and also guides them toward new ways of interaction that will prevent recurrence of homelessness, recognizing strengths, and addresses risk/protective factors such as negativity/blaming, work skills and communication in order to reduce and eliminate problem behaviors and associated unstable patterns. A known barrier is adequate implementation funding to develop a data-driven analysis to demonstrate the program’s significance to local and state officials. Full implementation of the program is necessary to develop and sustain a cost effective program model. Post graduation evaluation reports are expected to indicate lowered instances of homelessness, repeat homelessness, chronic un/underemployment, and legal offenses.

Lastly, knowing that analysis cannot happen without data, we engage with our Data Manager and HMIS system to keep track of socio- demographic data to consistently improve ways that we serve Forsyth County. We acknowledge the need to understand what types of data we should be tracking and how that information conveys to broad support since we serve four times the citizenry of surrounding shelters without a national backing. We do not have the resources of Good Samaritan or Salvation Army, so a dashboard that can provide an integrated 360 view of how our community experiences our Forsyth County in their homeless condition is paramount. Analytical tools and an ability to run pertinent reports is attempted, but could be drastically improved as we collate information from our Guests during the initial intake process, during their 90 day stay at our facility, and up to two years after their stabilized exit (in their own homes). For example, the background, current resources, sociodemographic information, outreach and cost effectiveness of our programming are factors tracked via our data management system.

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.

Once initial acceptance is determined, the Case Manager will contact the Data Manager, who is responsible for tracking

sociodemographic, compliance, and effectiveness data using HMIS and CMIS. Once the initial acceptance is agreed upon by the Guest/ Program Participant, the Case Manager will have the following primary tasks:

- 1) Maintain contact and open communications with the Guest and follow up on progress, alongside the Shelter Director, informing him/her of the program details and inquires if he/she wants to voluntarily enroll into the program, and
- 2) Acquire a signed voluntary enrollment agreement, and

Collaboration between the participants and Case Managers to create an effective treatment plan is critical, especially in cases involving substance abuse and/or mental illness. Performance metrics will be adhered to in order to ensure that each participant is as healthy as he/she can be for a life of accountability and independency. Assessments will include a mental health screening, physical health screening, employment screening, and background check to detect ability to rent an apartment or secure other housing, which are critical for ensuring stabilization. Evaluative assessments including testing for tuberculosis, HIV/AIDS, Hepatitis, and pregnancy are also incorporated by partners to assess ability to maintain employment/ income for the long term. As a participant progresses to each new phase of the program, a reassessment of individual needs will be updated within ten days of phase transition. The assessment also includes the sum of participants exhibiting coexisting conditions (i.e. homelessness and alcohol/ drug abuse) and those reoffending. Observation will commence from the program's inception to ensure clear understanding of objectives and desired impact. Quantitative and qualitative data will be collected quarterly and annually through participant reports and graduate exit interviews by a neutral Program Evaluator. Additionally, as costs are critical to the survival of the program, the evaluator will identify further performance measures to address sustainability.

J. Impact/Community Need

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
3:02 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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 addition to alignment with Winston Salem's City Strategic Plan, for those lacking stable housing and living on the streets, or otherwise have endured financial difficulty, some lack governmental resources, and all lack a permanent place to call home.

It is important to remember: it is the condition of being homeless that is undesirable, not the people. These Guests are still our neighbors to more affluent communities in Winston Salem. Recent communications with Winston Salem Police Department reveal that the average daily cost of county jail is \$ 56.00 per day. In the event that severe medical or mental health services are needed, the cost of incarceration exceeds \$76.00 per day. According to the North Carolina Department of Community Affairs, the required income to afford a two bedroom apartment at fair market rent is \$29,084, which is difficult for families already facing dire financial circumstances. Apartments just two blocks from our facility rent for \$800 per month for a one bedroom unit.

The Forsyth County Solicitor's Office is presently prosecuting more than 40 cases where homelessness is the underlying issue, and these matters will continue to be recidivist cases until the core concerns are resolved. Presently, the court may attempt to accommodate homeless individuals who are unable to pay a fine by offering community service as a viable option however, even with a court order to complete community service, defendants are released back into an unstable setting. Because, the issue of securing stable and sustainable housing remains the critical factor, the individual may be re-arrested, and sequentially recycled through the system until the life situation changes. The Department of Justice estimates that about two-thirds of people who are released from prison will, without supportive services, return to the correctional system within three years. This means that rehabilitation is limited unless life stabilization is addressed. For program participants, unless legal issues are resolved, life stabilization is impeded: there can be no government sponsored assistance, no public housing, no treatment for substance and alcohol abuse, no food stamps, and no veteran's assistance. Accordingly, the homeless person becomes even more marginalized. With BCH, participants integrate their activities in a stable housing setting and/or a shelter while their case is being adjudicated. This is an opportunity to enhance their lives, not a handout. Our goal is to help program participants regain productive lives by utilizing tools to overcome a lack of job skills, employment and housing. During our counseling sessions, we speak directly to the participants, discussing with them their compliance to program rules and commitment to achieving stabilization, much like an appointed judge would do. Each person will be required to list the most meaningful or helpful activities as well as their plans for the future as opposed to living with no permanent residence and retaining constant mobility, sleeping in various parks, personal vehicles, public transit stations, and/or highway bridges.

Albeit, for Guest experiencing citations and arrests, attendance at a court hearing requires time, planning and financial resources that can consume a large portion of a day. Numerous hearings are necessary in order to protect a defendant's rights, explore legal and factual questions, and verify compliance with terms and conditions of probation. Homeless defendants often fail to appear due to their status and condition. They are likely to be struggling daily for food, clothing, and shelter. Some are not likely to adhere to short-term probation requirements, do not carry calendars, and lack transportation. The later is especially unique to Forsyth County as they lack the ability to use our public transportation system. Without counsel, most homeless persons are not in a position to comprehend the procedural or substantive issues a court proceeding presents. Furthermore, persons in this disposition are not only often indigent, but also lack the proper documentation and resources necessary to legally to defend themselves. Many homeless litigants are aware that the courts require a decent appearance, and there is the perceived heightened sensitivity to the institution. A homeless person who lacks access to hygiene facilities or without a place to store his or her belongings may choose not to appear in court at all. Moreover, homeless people are understandably reluctant to attend court given the uncertainty of court proceedings, their inability to pay fines, and the threat of being taken into custody. All of this can be eradicated by participation in our program.

J2. Describe the short-term impacts of the project/program and how they align with the community need identified above.

Short term impacts:

- Fewer persons experiencing homelessness in Winston Salem streets, parks, and public areas
- More stable, independent lives for those at lower spectrum of income scale across the city
- Fewer illegal infractions imposing on time/ resources of law enforcement/ court personnel
- Lower crime rates
- Potential participants and treatment needs are identified quickly, reducing time of homelessness and traumas associated with it (vulnerability/ safety from violence in streets)
- Increase public safety across the city as need no longer fuels criminal acts
- Participants acquire knowledge and skills for becoming self-sufficient & productive members of the community.
- Establish supportive services and monitoring needed to encourage living stabilization.
- Reduce homelessness within Forsyth County
- Economic boost for Winston Salem as participants become and remain employed

* This program aligns with the community need by addresses the underlying issues associated with housing shortages, homelessness, and supportive needs of the homeless by focusing on job/ income creation/sustainability and workforce development according to Winston Salem's strategic plan: Tier 1(focus on job creation/sustainability and workforce development, funding for affordable housing and economic development), as well as Tier 2 (poverty reduction/cessation and community engagement/ power of connections. Additionally, positive steps towards stabilization are inclusive of, but not limited to attention to personal hygiene, sobriety, use of education and job training resources, and obtaining identification card or driver's license, which all benefit the quality of life for all members of Winston Salem.

J3. Describe the long-term impacts of the project/program and how they align with the community need identified above.

After completing the 90 day program, participants may be referred to a long-term community support family that are already longstanding members of Winston Salem, connecting them to people, the greater community, and practices of a healthier, safer, independent, and noncriminal lifestyle.

- Participant will accept accountability for personal growth, employment, housing, and ongoing treatment.
- Participant will build positive family and social relationships.

* This program aligns with the community need by addresses the underlying issues associated with housing shortages, homelessness, and supportive needs of the homeless by focusing on job/ income creation/sustainability and workforce development according to Winston Salem's strategic plan: Tier 1(focus on job creation/sustainability and workforce development, funding for affordable housing and economic development), as well as Tier 2 (poverty reduction/cessation and community engagement/ power of connections. Additionally, positive steps towards stabilization are inclusive of, but not limited to attention to personal hygiene, sobriety, use of education and job training resources, and obtaining identification card or driver's license, which all benefit the quality of life for all members of Winston Salem.

J4. Referencing previous section on outcomes, describe how the impacts noted above will be measured.

Our program will be observed by the Evaluator from inception, as community concerns demonstrate the need for the program. Evaluative methodology consists of an experimental group (admitted clients) and a control group (traditional Guests who decline to participate). Empirical results will include, but not be limited to housing successes, enrolled numbers, voluntary withdrawals, expulsions, compliance rates and sequential years of stability. The assessment also includes the sum of participants exhibiting coexisting conditions (i.e. homelessness and alcohol/ drug abuse) and those chronically experiencing homelessness and/or legal infractions due to homelessness. Observation will commence from the program's inception to ensure clear understanding of objectives and desired impact. Quantitative and qualitative data will be collected quarterly and annually through Program Evaluator reports and graduate exit interviews. Additionally, as costs are critical to the survival of the program, the evaluator will identify further performance measures to address sustainability. BCH utilizes a pre and post program design and reviews: 1) successful program completion and 2) the pre or post program track. BCH responds to participant status changes due to their condition and living status: living on the streets. Case resolution is measured by successful program completion. Participants must complete all consent forms, waivers, and program contracts in consultation with the Case Manager. Successful completion requires a minimum of 90 days of continuous, satisfactory participation in program curriculum.

K. Funding Stability

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
3:26 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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?

10.00 %

K.4. Please provide narrative on funding for this program after City ARPA funding has been exhausted.

Associate Executive Director, Ashley Martin, CFRE, is dedicated to continuing to serve at the pleasure of the BCH Executive Director and Board of Directors. Ashley also advocates for the elimination of homelessness across our jurisdiction and is charged with securing funding that supports the use of evidence-informed practices, to include funding for this program after ARPA funding expires.

Ashley actively involves community-based resources and programming for rehabilitation of those who experience homelessness as they encounter BCH. Her efforts also include informing the general public of updates and data, as well as evidence of successes realized to this area. Ashley also rallies the support of 25+ staff to include partners, executive administrators, program managers, and licensed therapists to ensure the success of the program. Additionally, Ashley's direct report includes a staff Director of Development, who has over 3 years of experience with shelters and homelessness. Lastly, services have been donated by partners beyond the grant funding period for long term impact once the grant funding runs out.

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



Commitment Letters

Community Support.pdf

L. Representation

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
3:45 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

L. Representation

Please provide the following information.

Representation deals with how diverse an organizations 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.

Name	Race	Ethnicity	Gender Identification
Linda Jackson Barnes	African American	Non-Hispanic	Female
Bryan Ledbetter	Caucasian	Non-Hispanic	Male
Jason Marley	Caucasian	Non-Hispanic	Male
Chad Armstrong	Caucasian	Non-Hispanic	Male
Jake Cashion	Caucasian	Non-Hispanic	Male
Susan Boyles	Caucasian	Non-Hispanic	Female
Dr. Nate French	African American	Non-Hispanic	Male
Cheryl Lindsay	African American	Non-Hispanic	Female
Dr. D. Kathy Stitts	African American	Non-Hispanic	Female
Fleming El-Amin	African American	Non-Hispanic	Male
Christopher Leab	Caucasian	Non-Hispanic	Male
Martha Turner	African American	Non-Hispanic	Female

M. Required Documents

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
4:00 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

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

43804_Standards of Conduct.pdf

Copy of the agency's latest 990 Form as submitted to the Internal Revenue Service *Required

990.pdf

Organization By-Laws *Required

43806_BYLAWS.pdf

Articles of Incorporation *Required

43807_Articles of Incorporation.pdf

Organization Policies (including personnel, formal non-discrimination, procurement, accounting, etc) *Required

43808_Personnel Policies and Procedure Manual 1.pdf

IRS 501(c)3 Designation Letter *Required

IRS Designation Form (501c3 designation).pdf

Most recent audited financial statements or a third-party review *Required

Audit 19.final.pdf

North Carolina Secretary of State - Current and Active Status *Required

Certificate.pdf

N. Submit

Completed by ashley.martin@bethesdacenter.org on 5/2/2022
4:01 PM

Case Id: 15311

Name: BCH Transformational Change and Life

Address: *No Address Assigned

N. Submit

Please provide the following information.

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

Ashley T. Martin

Electronically signed by ashley.martin@bethesdacenter.org on 5/2/2022 4:01 PM

05/02/2022