

I. ACCESS TO CARE

Alcohol and Drug Services (ADS) – ADS Integrative Care **\$89,588**

This proposed integrated service program is intended to provide viable, accessible, effective therapeutic treatment for individuals to preserve or improve current functioning, strengths and resources. ADS plans to offer brief screening, comprehensive assessment, primary care medical services, which will include chronic disease management, psychiatric evaluations, behavioral health education to include smoking cessation, substance use disorder counseling, co-occurring disorder treatment and case management on site.

Cone Health—Congregational Nurse Program (CNP) **\$217,947**

CNP focuses on providing holistic person care that includes physical, mental, spiritual, environmental, financial and interpersonal relationship components to wellness. This program assists financially challenged churches with implementation and maintenance of nursing programs for vulnerable populations. CNP plans to expand the program to meet the new demand for increased screenings leading to new integrated care referrals to designated clinics.

Family Service of the Piedmont—Integrated Innovations **\$139,000**

Family Service of the Piedmont, Inc. (FSP) proposes to continue integrating behavioral and physical health care by co-locating mental health and addictive disorder treatment and primary medical care. Reducing the barrier to basic communication between providers of behavioral health and medical services will create a Continuum of Care to address gaps in individual care for those most in need. In addition, the project will increase opportunities to improve overall health outcomes. This proposal not only expands the number of hours that their Primary Care Provider is on site but also expands the time that the nurse will be available to allow for more patient contact.

Guilford Adult Health—Dental Access Program (GDAP) **\$100,640**

Guilford Adult Health will continue to work on integration of care over the term of this grant, including the dental clinic where they provide oral care for underserved adults. They receive referrals from providers who accept the Orange Card, and continue the provision of integrated, comprehensive coordinated care to those in our community to whom care is otherwise unavailable and/or unaffordable. GDAP works with GCCN to continue to improve the primary care system and deliver care on a continuum for their patients.

Guilford Adult Health—Guilford Community Care Network Administration **\$198,262**

GCCN is an integrated care network, with more than 65 providers offering various services, both medical and behavioral health, in order to improve the uninsured adult's overall health. Their Physician Champion and Network Development Specialist both work on ongoing identification and recruitment of primary and specialty care physicians, and medical practices to work with GAH clients. GCCN will serve as the hub for the IC initiative and will automate the Orange Card Program (OCP).

Guilford Co. Dept. of Public Health—Medication Assistance Program **\$175,000**

The Medication Assistance Program (MAP) will continue to provide comprehensive medication therapy management (MTM) services to all patients who enroll. MAP plans to work with the NC Center of Excellence for Integrated Care to incorporate a universal behavioral health screening tool so patients can be accessed across multiple agencies as they seek care at a myriad of agencies through Guilford Community Care Network (GCCN). MAP is currently working to establish collaboration with the Congregational Nurse Program (CNP) to provide a more cost effective means to mental health medications for the homeless population they are caring for and to help reduce the cost of medications for clients at Family Service of the Piedmont (FSP).

Guilford County Department of Social Services—HealthChoice **\$94,000**

NC Health Choice (NCHC) provides access to health care for children ages six to 18 who are uninsured and reside in low-income households with 150% to 200% of the Federal Poverty Level (FPL). NCHC is a free or reduced price comprehensive health care program specifically geared for children, including dental, vision and hearing services. NCHC's policy requires that qualifying families from 150% to 200% of FPL be subject to an annual enrollment fee of \$50 for one child and \$100 for two or more children. This grant covers the cost of enrollment and co-pay fees for the children eligible to receive HealthChoice.

Interactive Resource Center-Family Service of the Piedmont **\$327,618**

The Interactive Resource Center (IRC) clinic is serving an average of 500 unduplicated patients quarterly. Patients are provided primary medical care from a nurse practitioner and some receive behavioral health services onsite while others are referred to other facilities. The demand for health care services has exceeded the current capacity. The clinic has been operational four days per week but will expand to five full days if funding is approved for a new entity to operate this clinic. This clinic will expand health care service delivery to provide integrated care services to homeless patients at the Interactive Resource Center (IRC).

Interactive Resource Center – Triad Adult & Pediatric Medicine **\$40,000**

Triad Adult and Pediatric Medicine will continue to oversee the IRC for the first quarter of FY16 to ensure a smooth transition and prevent a lapse of service provision to the homeless population.

NC Center of Excellence for Integrated Care **\$114,500**

This Foundation-initiated proposal will allow the NC Center of Excellence (COE) to serve as the lead organization overseeing a three-year technical assistance and training initiative involving Integrated Care practices and Continuum of Care programs. COE will develop customized plans that will be inclusive of onsite trainings and provider coaching. Training to all site types will follow the Learning Model that is based on the evidence-based core competencies, knowledge, and skills required for successful IC service provision and model development. This TA will provide training and assistance in the planning, implementation, and evaluation of grantees' Integrated Care service delivery.

Partnership for Community Care—P4CC **\$235,340**

P4CC, a GCCN organization, provides eligibility, enrollment, case management, referrals, and medications for low-income, uninsured residents of Guilford County while decreasing health care costs. P4CC will be an integral part of the new Integrated Care initiative and will continue patient engagement in the Emergency Department (ED) when individuals are most vulnerable, determining eligibility for enrollment into the network of providers across a number of GCCN partner sites to ensure they receive adequate medical and behavioral health care, case management services for further assessment, referrals to other community based organizations to meet social needs and follow-up by case managers for continuity of care.

UNCG Center for New North Carolinians—Immigrant Health Access Project **\$135,144**

This program aims at connecting 1,500 immigrant and refugee adults in greater Greensboro to integrated care clinics in the next three years (500 annually). They will do this by partnering with local refugee resettlement agencies (Church World Service and African Services Coalition) to connect recently arrived refugee clients with access to integrated care upon arrival and using the Community Health Worker model (CHW)—a model that uses immigrant and refugee community leaders to recruit new immigrant and refugee clients through their community networks, faith communities, and connections with community partners.

IHAP staff will refer individuals to ACA or Orange Card enrollment, connect them with an integrated care clinic, and accompany patients to the clinic for the initial integrated care visit.

UNCG —Congregation Social Work Education Initiative (CSWEI) \$110,974

In addition to its longstanding interdisciplinary partnership with the Congregational Nurse Program [CNP], CSWEI proposes diversifying its service array and modifying its service integration strategy to better implement an integrated, comprehensive, coordinated screening, assessment, and treatment plan. The addition of four Community Health Workers [CHW] will allow CSWEI to reach underserved, uninsured individuals including persons experiencing homelessness, Latinos, Montagnards, Bhutanese and Burmese--outside of CSWEI's traditional placements. As an evidence-based practice, the addition of the CHWs will also allow CSWEI the opportunity to more effectively identify and engage individuals in community settings within community locations as yet unserved by the Initiative.

TOTAL ACCESS TO CARE GRANTS: \$1,978,013

II. ADOLESCENT PREGNANCY PREVENTION

Guilford Child Development

Nurse Family Partnership (NFP) \$51,000

NFP introduces vulnerable first-time mothers to a caring maternal and child health nurse. The nurses support moms to have a healthy pregnancy, to become knowledgeable and responsible parents, and provide their babies with the best possible start in life. NFP encourages first-time, teen moms to identify their personal goals and address/solve problems that could potentially interfere with creating safe households, completing their education, finding work, and preventing future pregnancies through appropriate family planning information. Nurses discuss contraceptives with each participant during pregnancy and post-delivery. This conversation includes LARC that could be used post-delivery, and encourages participants to set up an appointment to receive their chosen form of birth control.

Guilford County Guilford County Department of Health and Human Service

Division of Public Health (GCDHHS-DPH)—JustTEENS \$192,366

Funding is for 75% of requested salary and benefits for 3 positions; reduced LARC subsidies, nominal amounts for clinic upgrades and advertising and limited support for targeted outreach to pregnant and parenting teens. Title X Family Planning Clinics, like Guilford County's, have played a critical role in ensuring access to a broad range of family planning and related preventive health services for low-income or uninsured individuals. Title X family planning program is intended to assist individuals in determining the number and spacing of their children. This promotes positive birth outcomes and healthy families. The education, counseling and medical services available in Title X-funded clinic settings assist in achieving these goals. Funding comes with the clear understanding that if targets are not realized, future funding will be canceled.

Planned Parenthood South Atlantic (PPSAT)

LARC Access for Teens \$78,350

Funding for limited renovations to patient service areas is recommended for years one and two with accompanying marketing support in all three years. Recommended amounts include annual subsidies for LARC (includes device, insertion and counseling) and specific teen-friendly training. PPSAT's Greensboro health

center (1704 Battleground Avenue) through prescription and on-site insertion, administration, and dispensing, offers a broad range of effective, Food and Drug Administration (FDA)-approved family planning methods. As a Title X health center, clients are charged based on family income and size. Fees for minors requesting confidential services are based on the income of the minor. With many essential best practices already in place, they will focus on generating broader use of Planned Parenthood reproductive health services among teen clients. Funding comes with the clear understanding that if targets are not realized, future funding will be canceled.

SHIFT NC (Sexual Health Initiatives for Teens)

Greensboro Youth Access to Effective Contraception

\$168,687

SHIFT NC proposes to provide coordination, technical assistance and training to achieve improved access to health care and contraceptives - specifically long acting reversible contraceptives - for Greensboro 12-19 year olds. SHIFT NC will work with awarded clinic partners and subcontract as needed to support the strategies of the project, including: any additional technical assistance required; community leadership and linking coordination; and marketing directly to young people in Greensboro. This work will include assisting each clinic partner to track and report data as well as a cross-project annual evaluation report that indicates progress toward the collective outcomes/objectives. SHIFT NC will subcontract with BCDC Ideas for naming, branding, adult outreach, and marketing directly to youth audience as well as Partners for Healthy Youth to coordinate adult leadership team and linkages.

Young Women’s Christian Association of Greensboro, Inc. (YWCA)

Teen Parent Mentor Program (TPMP)

\$81,040

The twenty-eight year old *Teen Parent Mentor Program* (TPMP) is considered a secondary pregnancy prevention program. It seeks to support 150 pregnant and parenting teens annually as they strive to finish school, raise healthy children, and set and fulfill goals for the future. It is a relationship-based program that empowers teen mothers to overcome adversity and establish a future orientation for themselves and their children. Supporting adolescent parents to get an education, acquire job skills, improve parenting and prevent future pregnancies helps them become self-sufficient and better able to support themselves and their families. It also establishes a strong, stable foundation upon which the baby will be raised. Educational activities and programs, supportive relationships with an adult mentor, positive peer interactions, and support from staff are all included in this free program, open to any pregnant and/or parenting teen, ages 12-19, in Greensboro.

Women’s Hospital of Greensboro Memorandum of Understanding (MOU)

Provision of LARC immediately postpartum or at 6 week postpartum visit

\$50,000

The goal of this project is that 100% of teens who deliver at Women’s Hospital under the care of Cone Health Faculty Practice or seek postpartum care (up to six weeks following delivery) at the Women’s Hospital clinics will be offered LARC contraception, with an anticipated 40% choosing this option. This agreement applies only to adolescent women who are under the care of Women’s Hospital Faculty Practice at the time of their child’s delivery at Women’s Hospital of Greensboro **OR** seek postpartum care (up to 6 weeks following the delivery) at the Women’s Hospital clinics.

TOTAL ADOLESCENT PREGNANCY PREVENTION GRANTS:

\$721,913

III. HIV/AIDS

Central Carolina Health Network (CCHN)

HIV Care and Resource Development

\$161,617

Foundation funding is requested to provide dental services and housing support to people with an HIV diagnosis in Greensboro. Funding provides the guaranteed daily rate of \$3,200 for Access Dental Care (the dental care provider {a dentist, assistant and hygienist}) to expand its services from 3 days per month to 4 clinic days per month at *Regional Center for Infectious Disease*. The requested funding also includes salary support for dental clinic scheduling, coordination, billing and data entry. North Carolina Department of Health and Human Services (DHHS) provided one-time Care and Prevention Funding in the United States (CAPUS) from the Centers for Disease Control (CDC) to reduce the housing wait list (112 people with a

documented HIV diagnosis in need of housing). This funding (which ends September 30, 2015) provides for a full-time staff person to identify resources for affordable housing in the community and then link identified HIV clients to those resources. Foundation funding is being recommended to continue this position by providing for the salary, benefits and a \$10,000 fund to assist clients with one-time housing, utility or security deposits.

Cone Health

Regional Center for Infectious Disease (RCID)

\$229,272

Foundation funding is requested to support four separate functions (medication assistance, mental health services, referral coordination along with treatment adherence and case management) within RCID. Each function assists patients at various stages of the treatment cascade and from diagnosis to viral suppression. It's critical for people with HIV to not miss a dose of their medications so they don't develop drug resistance. The AIDS Drug Assistance Program (ADAP) application must be submitted by an interviewer, not the applicant. The medication assistance role, establishes financial eligibility and documents clinical information. All clients must renew eligibility twice per year. This tedious, time-consuming process ensures that patients have uninterrupted access to the medication that will help them achieve viral suppression.

Individuals living with HIV often have complicated histories, including negative experiences such as traumatic events, mental illness, and stigma. Foundation funding extends mental health counselor's time at RCID from 2.5 days per week to 4 (from 15 to 23 appointments per week).

Foundation funding is requested to support a full-time Certified Medical Assistant to help patients navigate an often confusing health care system. Access to primary and specialty care is coordinated and monitored by the primary HIV care team, as are psychosocial and social services. With a growing HIV patient population, coupled with a 10% co-infection rate of Hepatitis C, the necessity of tracking appointments to specialty medical care is important. This position would also assist with the medication approval process, another heavy administrative task for co-infected patients.

Foundation funding would help support a full-time Registered Nurse (RN) with specialist education and training in HIV. The RN will make in-home visits to patients, specifically referred by RCID medical providers, and will be responsible for ensuring treatment adherence, disease management, and patient education. The goal of this intensive care management is to get the patient to the point of greater self-management and improved function and ultimately viral load suppression.

NIA Community Action Center - Social Network Strategy **\$36,700**

Funding is recommended to staff and implement a Social Network Strategy that builds on existing trust among the members of a social network. Because people in a social network already know and trust each other they are more likely to respond positively to the messages about HIV testing. By using this strategy, NIA will be able to reach the highest-risk persons, those who live in hard-to-reach communities and who may be infected but unaware of their status, and provide them with counseling, testing and referral services.

**North Carolina Center for Excellence in Integrated Care
Consulting service to Regional Center for Infectious Disease** **\$10,000**

Because the scope of services have not been defined, the above amount is requested to facilitate RCID goals and objectives concerning integrated care. Once goals are identified, a specific scope of practice document will be drafted. This is a request to encumber \$10,000 to support North Carolina Center for Excellence in Integrated Care, if RCID chooses to explore more complete integration of care. Funding would be used to provide for the Center's expertise and technical assistance in facilitating further conversations.

Triad Health Project - Direct client services and expanded testing outreach **\$170,000**

Funding is recommended for the salary and fringe benefits for 10.6 positions involved in providing direct client services and expanded testing outreach. Medical case management includes the provision of treatment adherence counseling to ensure readiness for, and adherence to, complex HIV/AIDS treatments. Key activities include (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic re-evaluation and adaptation of the plan as necessary over the life of the client. It includes client-specific advocacy and/or review of utilization of services. Case Management is (1) beneficial in dealing with complex needs of people living with HIV/AIDS; (2) reduces cost of care by decreasing hospitalization; (3) clients enrolled in case management are 1.5 times more likely to follow drug regimens; (4) improves the chances of newly diagnosed HIV clients entering care.

With nearly three decades of experience in HIV testing in Guilford County, THP has earned the trust of many in the community who turn to them for regular sexual health screening and often refer their friends. The funding requested will allow THP to expand its offerings of rapid HIV tests in appropriate settings, allowing them to reach a larger audience of people who may not want to wait two weeks for preliminary results, or have immediate concerns that they may have been exposed to HIV, or are otherwise resistant to having a vial of blood drawn for testing.

**Wake Forest Baptist Medical Center
Improving linkage and retention in care and health outcomes for MSM with HIV in Guilford County through social media** **\$121,859**

Proposed funding develops, implements, and evaluates an innovative, tailored intervention designed to increase Human Immunodeficiency Virus (HIV) testing, improve linkage to and retention in care and health outcomes among hard-to-reach racially/ethnically diverse young (ages 18-29) men who have sex with men (MSM) with HIV in Guilford County. The intervention will harness established social media that racially/ethnically diverse young MSM commonly use. The project will include a partnership among the primary providers of HIV care in Guilford County (Regional Center for Infectious Disease [RCID]), Triad Health Project (THP), and Wake Forest School of Medicine (WFSM).

TOTAL HIV/AIDS GRANTS: **\$729,448**

IV. SUBSTANCE ABUSE & MENTAL HEALTH

Alcohol and Drug Services (ADS)

\$132,832

ADS will establish a comprehensive delivery system utilizing a multidisciplinary treatment approach of integrated, or cross-trained, and appropriately credentialed practitioners, who within their scope of practice, are permitted to diagnose and treat individuals with mental illness and substance use disorders. Most of the patients treated in this organization are receiving opioid treatment. The relationship between opiate abuse and mental illness is complex, and the treatment of both is more complicated than the treatment of either condition alone. Opiate abuse results in a worse prognosis for a person with mental illness.

Alcohol and Drug Services: Communities that Care (CTC)

\$35,000

The purpose of CTC is to mobilize all stakeholders in the community who care about children and youth; to build positive youth development by addressing the most widespread risk factors and enhancing protective factors. The CTC initiative consists of a five-phase process implemented over a 2-3 year period. ADS will maintain a part-time coordinator who will guide the community's CTC efforts.

North Carolina Center of Excellence for Integrated Care (COE)

\$165,478

In an effort to increase the capacity of the greater Greensboro community to effectively address the needs of individuals with co-occurring substance abuse and mental health disorders, the Foundation has established an initiative that will provide technical assistance, training and short-term program support to targeted substance abuse and mental health agencies. This initiative will be led by the COE. They will collaborate with Kenny House, chairperson of the NC Association for the Treatment of Opioid Dependence, other experts in co-occurring disorders and with the Center for Social Innovations (CSI) which brings a fresh perspective to our society's most difficult social problems. CSI will provide targeted web-based training modules that will enhance the state-based training with national experts in the field. The skilled clinicians, researchers, writers, trainers, and advocates from both COE and CSI translate the newest research into real-world tools, training, and technical assistance for non-profit organizations across the country.

Family Service of the Piedmont (FSP)

\$160,000

FSP will serve as the demonstration site for the CODTI and will provide peer-to-peer training and mentoring to all participating entities in the Co-Occurring Disorders Learning Collaborative. Their co-occurring disorders program focuses on integrated treatment of persons with co-occurring substance use and non-severe mental health disorders, such as mood and anxiety disorders and less severe forms of bipolar disorder. The integrated treatment approach helps people recover by offering both substance abuse and mental health services at the same time and in one setting. The population to be served includes those diagnosed with multiple diagnoses with a history of substance abuse and mental illness in the greater Greensboro community.

Kellin Foundation

\$55,000

The Kellin Foundation provides community-focused evidenced-based, and culturally-competent behavioral health services through the integration of best practice research, training and technical assistance and proposes to expand its scope to provide evidence-based services for individuals with co-occurring disorders. Clinical staff within Kellin Foundation plan to employ Co-Occurring Disorders Learning Collaborative knowledge and skills with specific services like clinical assessment; individual, couple, and family therapy; group therapy; and peer support.

Monarch

\$55,000

Through full participation in technical assistance, training and in the proposed Co-Occurring Disorders Learning Collaborative, Monarch wants to assess their current operation and transform the services they provide through the selection and implementation of an innovative, evidence-based model that addresses the specific challenges faced by individuals with co-occurring substance use and mental illness disorders. Monarch does not currently have a co-occurring disorders program in place though has a desire to implement the Integrated Dual Disorder Treatment (IDDT) model. This is an evidence-based practice that improves the quality of life for people with co-occurring severe mental illness and substance use disorders by combining substance abuse services with mental health services.

UNCG Partnership to Address Co-Occurring Disorders in Greater Greensboro

\$165,000

This proposal represents an effort by three programs previously funded by Cone Health Foundation: Congregational Nursing Program (CNP), Congregational Social Work Education Initiative (CSWEI), and Center for New North Carolinians (CNNC), to join in partnership to address co-occurring substance abuse and mental health disorders in vulnerable populations; namely, those who are homeless or in transitional housing and those who are immigrants, including refugees. This Partnership plans to serve more than 1,100 new clients over the next five years, more than half of these will be served during the three-year grant period.

TOTAL SUBSTANCE ABUSE & MENTAL HEALTH GRANT RECOMMENDATIONS: \$768,310

FY 2016 OTHER INITIATIVES

Building Stronger Neighborhoods	\$10,000
The Building Stronger Neighborhoods (BSN) Program was established in 2001 as a small grants and technical assistance program for neighborhoods in the greater Greensboro area. The program is supported through a collaborative of five local funders and the Greensboro Public Library, seeking to enable neighborhoods to build community.	
Communities That Care	\$10,000
This initiative focuses on strengthening protective factors that can buffer young people from substance abuse behaviors and promote positive youth development.	
Guilford Nonprofit Consortium (year 2 of 2)	\$20,000
The Guilford Nonprofit Consortium (GNC) conducts education, leadership and training sessions and provides other opportunities for networking in order to build capacity of the nonprofit community across Guilford County. GNC has 270 member agencies.	
Hayes-Taylor YMCA (year 3 of 4)	\$25,000
This grant was approved by the Board in early 2013 for their capital campaign to relocate and expand Hayes-Taylor YMCA next to Barber Park.	
Action Greensboro	\$50,000
Established in 2001, Action Greensboro has championed a variety of initiatives aimed at enhancing the city's quality of life and is an important collaboration with other area foundations.	
Say Yes to Education (\$1M over 5 years)	200,000
(previously approved by the Board July 2015) Guilford County has been named the next Say Yes to Education community. Say Yes provides an unprecedented opportunity for our community to work together to ensure that graduates of Guilford County Schools can get a post-secondary education.	
Partners Ending Homelessness (year 2 of 2)	\$25,000
Partners Ending Homelessness (PEH) leads a strong and stable system of care to end homelessness in Guilford County. PEH receives funding from American Express, the City of Greensboro, Cone Health Foundation, Guilford County, Lincoln Financial Foundation, Phillips Foundation, United Way of Greater Greensboro, United Way of Greater High Point, and other public and private donors. Poor health, mental illness and substance abuse are closely associated with homelessness. The rates of both chronic and acute health problems are extremely high among the homeless population. Foundation funds will be used to support their Coordinated Intake and Assessment process which is a key component toward shifting their entire system to a Housing First approach.	

Union Square Campus (year 2 of 3 of \$50,000 pledge)

\$15,000

The first campus building at Union Square will focus on training and education for health care professions. The initial key stakeholders/tenants include Cone Health, UNCG, NC A&T and GTCC to allow them to share lab space and equipment at significant cost savings and focused primarily on the nursing profession. A state-of-the-art health care simulation center will be a key component of the project and our grant will go toward the simulation equipment.

YWCA (year 2 of 3 of \$50,000 pledge)

\$15,000

Funding from Cone Health Foundation supports capital renovation at the YWCA's new facility, necessary furnishings and equipment, additional staff members for current, new and enhanced programs and support for program sustainability to provide the organization with financial stability.

Enroll America

\$30,000

Funding would support *Get Covered America's* Third Open Enrollment campaign in Guilford County during the period from November 1, 2015 through January 31, 2016. This campaign will work to maximize the number of Guilford County residents who are enrolled in and retain health coverage. Repeated contact with consumers increases the likelihood that they enroll. A consumer who has been contacted four times by the campaign is three times more likely to enroll than a consumer contacted only once.

Support for Navigator Entities

\$215,000

In-person enrollment assistance is instrumental in successfully navigating the health insurance enrollment process: Consumers who reported having in-person assistance were roughly twice as likely to successfully enroll in a health plan as those without. Funding will support navigator positions at *Legal Aid of North Carolina* and *Partnership for Community Care*. Foundation funding also supports Medicaid administrative appeals work at Legal Aid of North Carolina – these are not simple cases. Legal Aid only accepts a Medicaid appeal if it is a meritorious case. However, this is not always apparent without further investigation and evaluation.

Guilford Adult Health

\$10,000

To support Certified Application Counselors embedded within the Guilford Community Care Network (GCCN) to assist Latino patients with gaining access to health care and access to health insurance through the Health Insurance Marketplace. Our grant will be matched by Kate B. Reynolds Charitable Trust.

TOTAL OTHER INITIATIVES

\$625,000